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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.

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REPORTER'S TRANSCRIPT OF TRIAL PROCEEDINGS  
TRIAL DAY 5  
Monday, August 12, 2024  
8:30 a.m.  
LOS ANGELES, CALIFORNIA

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TERRI A. HOURIGAN, CSR NO. 3838, CCRR  
FEDERAL OFFICIAL COURT REPORTER  
350 WEST FIRST STREET, ROOM 4311  
LOS ANGELES, CALIFORNIA 90012  
(213) 894-2849

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**APPEARANCES OF COUNSEL:**

**FOR THE PLAINTIFF:**

ROBINS KAPLAN LLP  
BY: ROMAN M. SILBERFELD  
TOMMY DU  
Attorneys at Law  
2121 Avenue of the Stars, Suite 2800  
Los Angeles, California 90067

PUBLIC COUNSEL  
BY: MARK D. ROSENBAUM  
AMELIA PIAZZA  
AMANDA ROMAN MANGASER SAVAGE  
Attorneys at Law  
610 South Ardmere Avenue  
Los Angeles, California 90005

BROWN GOLDSTEIN and LEVY, LLP  
BY: EVE L. HILL  
Attorney at Law  
120 East Baltimore Street, Suite 2500  
Baltimore, Maryland 21202

PUBLIC COUNSEL  
BY: AMANDA ROMAN MANGASER SAVAGE  
Attorney at Law  
610 South Ardmere Avenue  
Los Angeles, California 90005

**FOR THE DEFENDANT: DENIS RICHARD MCDONOUGH**

US DEPARTMENT OF JUSTICE  
CIVIL DIVISION - FEDERAL  
PROGRAMS BRANCH  
BY: BRAD ROSENBERG  
AGBEKO PETTY  
JODY LOWENSTEIN  
TAYLOR PITZ  
Attorneys at Law  
1100 L. Street, N.W.  
Washington D.C. 20005

1 APPEARANCES: (CONT.)

2 **FOR THE INTERVENOR:**

3 ELKINS KALT WEINTRAUB REUBEN GARTSIDE LLP

4 BY: JUSTIN TRUJILLO

5 Attorney at Law

6 10345 West Olympic Boulevard

7 Los Angeles, California 90064

8

9 **ALSO PRESENT:**

10 Batina Washington, HUD

11 Kristin Grotecloss, Veterans Administration

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; MONDAY, AUGUST 12, 2024**

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

3                                   **--oOo--**

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5  
6                   THE COURT: We're on the record. I sent out an  
7 order this weekend, but I put 2022. My fault.

8                   There is an errata coming out, so it's 2024. And I  
9 arbitrarily picked a date because you'd made the request -- and  
10 so I thought it was appropriate -- during your case, but I'm  
11 subject to any other date the two of you agree upon.

12                   And I backed away from not giving you notice because it  
13 occurred to me Saturday morning that you had to open up the  
14 UCLA baseball field, the Brentwood Center -- or School. And  
15 out of courtesy, I thought I would just pick that date.

16                   I picked 5:30 because you have got construction problems  
17 out there. I didn't know if school was in session, and I want  
18 to be back here by 8:30, so I apologize for the early hour, but  
19 it works. Okay.

20                   All right. Mr. Kuhn, good morning.

21                   THE WITNESS: Good morning.

22                   THE COURT: How are you today?

23                   THE WITNESS: I'm well.

24                   THE COURT: All right. Counsel, is this  
25 cross-examination?

1 Do you want to do this as direct examination or cross?

2 MR. LOWENSTEIN: We're going to take direct  
3 examination, Your Honor. Thank you.

4 THE COURT: Thank you.

5 DIRECT EXAMINATION

6 (Federal defendants direct examination.)

7 BY MR. LOWENSTEIN:

8 Q Good morning, Mr. Kuhn. Welcome back.

9 A Thank you.

10 Q So this morning, I'd like to address --

11 Oh, and just for the record, Jody Lowenstein on behalf  
12 of the federal defendants.

13 THE COURT: Thank you.

14 BY MR. LOWENSTEIN:

15 Q This morning, I would like to address matters a little bit  
16 out of order.

17 Before we go through your background, I'd first like to  
18 address a topic that you explored with counsel on Friday, and  
19 that's the location of project-based housing in the Greater Los  
20 Angeles area.

21 So we're going to pull up a map here that should look  
22 familiar.

23 And do you have that map on your screen?

24 A I do.

25 Q Do you recall looking at this map on Friday?

1 A I do.

2 Q And what does it show?

3 A It shows the locations of our project-based facilities.

4 Q And are those all of the project-based facilities in  
5 Greater Los Angeles or just those with vacancies currently?

6 A The latter, those with vacancies.

7 Q Did VA utilize this map in its operations?

8 A We use it to -- as part of our involvement with the  
9 coordinated entry system.

10 So the -- LAHSA runs what is called coordinated entry,  
11 and it tries to make sure all of the resources are available to  
12 everyone, all of the providers, not just VA, all of the  
13 providers in the coordinated entry system.

14 So if you encounter a veteran, you could go to this map,  
15 see where there is a vacancy and then follow the procedures to  
16 try to refer to that apartment.

17 Q And does VA maintain any of the information on this map?

18 A No. It's maintained by LAHSA.

19 Q Now, over the weekend, was your team at VA able to verify  
20 whether this map accurately reflects the locations of  
21 project-based housing that currently has vacancies?

22 A Yes. Over the weekend, we were able to verify all of the  
23 addresses and locations.

24 We did find one error that LAHSA had on the database for  
25 ISLA, I-S-L-A. They are not in over the weekend, but they will



1 correct it today, LAHSA.

2 THE COURT: Counsel, can I ask -- because I had  
3 assumed something, and it may be inappropriate, I assumed when  
4 this first came up that although it was a LAHSA map that they  
5 had gotten this information from the VA.

6 In other words, I didn't know if LAHSA independently  
7 gathered this, but I assume the VA had.

8 THE WITNESS: We gathered the information, but they  
9 should also independently have it, since these are projects  
10 that they are aware of.

11 THE COURT: Right. So I assumed something that I  
12 may be wrong on. And that is, I thought when I saw this map  
13 that you were actually supplying the information on this map.

14 THE WITNESS: We verify it and we provide it to  
15 LAHSA, but LAHSA independently should have the information.

16 THE COURT: I understand that. You have told me  
17 that twice now. Let me say it again.

18 They are getting the current vacancies from you, because  
19 LAHSA, trust me, isn't out there at the VA.

20 THE WITNESS: It should be from us, but the  
21 providers should be telling them -- we verify it, but the  
22 providers should be telling them the vacancies.

23 THE COURT: Okay. So this map, then, should be  
24 constantly changing --

25 THE WITNESS: Yes.

1 THE COURT: -- because if we're dealing with current  
2 vacancies next week, we should maybe see a different map.

3 THE WITNESS: That is correct, sir.

4 THE COURT: Okay. Thank you very much, Counsel.

5 BY MR. LOWENSTEIN:

6 Q So you just got into this a little bit. But this web page  
7 doesn't just show locations, it also contains information  
8 regarding each location of individual project-based housing  
9 locations on this map; is that right?

10 A That's correct.

11 Q And was your team able to verify that the information  
12 provided on this web page for each individual location is  
13 accurate and up to date, other than this one exception that you  
14 have identified?

15 A All of the contact information is correct.

16 Some of the -- what we can't be certain of is all of the  
17 apartments listed as vacancies, if the correct apartment that  
18 is listed as a vacancy is correct.

19 Again, we will work with LAHSA to verify that, but if  
20 there is a vacancy, that is correct.

21 Q How did your team go about verifying the accuracy of this  
22 information?

23 A They compared our list of providers to the list on the  
24 website.

25 Q And is your team frequently in contact with the property

1 managers of these locations?

2 A Yes. They need to be -- to make referrals and then to  
3 work people through the referral process.

4 Q And at a minimum, is that at least on a weekly basis?

5 A It would depend on the property.

6 So if a property is filled and there is no vacancies,  
7 there may not be a need for a weekly connection. But with  
8 vacancies, more frequent, certainly.

9 MR. LOWENSTEIN: Your Honor, we just received some  
10 information this morning regarding the location of all  
11 property-based locations.

12 We have not been able to create that into an exhibit  
13 yet, but that is something that, with the Court's indulgence,  
14 we will be able to address with the witness later.

15 THE COURT: You may proceed.

16 MR. LOWENSTEIN: Thank you.

17 MR. SILBERFELD: Pardon me, Your Honor. Could we be  
18 shown whatever counsel has?

19 THE COURT: Pardon me.

20 MR. SILBERFELD: Could we be shown whatever counsel  
21 has?

22 THE COURT: Sure. Just step over with him. He's  
23 going to show you.

24 MR. LOWENSTEIN: I think we can change gears now.

25 BY MR. LOWENSTEIN:

1 Q Mr. Kuhn, can you remind the Court what your current  
2 position is?

3 A I'm the deputy medical center director for the Greater Los  
4 Angeles VA healthcare system.

5 Q And where is your office located?

6 A I'm located on the West LA Campus, Building 218.

7 Q Thank you.

8 You testified that you have been serving as deputy  
9 director since September of 2022; is that right?

10 A I started as a detail in September '22, yes.

11 Q And while you were on detail, you had all of the  
12 responsibilities of the deputy director during that time; is  
13 that right?

14 A That's correct.

15 Q And can you remind the Court, what are your  
16 responsibilities as deputy director, generally speaking?

17 A My primary responsibility is oversight of CERS, which is  
18 the homeless services program, and of the planning section,  
19 which is responsible for creating the planning, if you will,  
20 for the master plan.

21 Q So is it fair to say, then, that your work as deputy  
22 director is dedicated to serving homeless veterans in LA?

23 A That's correct.

24 Q And how long have you been in that general line of work?

25 A Over 30 years -- 34 years.

1 Q Do those 30 years of experience inform how you carry out  
2 your duties as deputy director?

3 A Very much.

4 Q Well, let's talk about them. A couple of preliminaries  
5 first.

6 You testified earlier, around Friday, that you have a  
7 bachelor's in psychology from Brown University, a master's in  
8 social work from Columbia University, and a master's in public  
9 health from Rutgers University; is that correct?

10 A That is correct.

11 Q Do you hold any professional licenses or certifications?

12 A I am a licensed clinical social worker in the state of New  
13 Jersey.

14 Q When did you first join the VA?

15 A In 1990.

16 Q And what was your first role?

17 A I was a supervisor in their mental health clinic.

18 Q Just generally, what were your duties at that time?

19 A I ran groups. I supervised staff. And was assigned  
20 initially -- or I guess I took an interest in -- I can't even  
21 say assigned -- I became involved with services for veterans  
22 experiencing homelessness.

23 Q What did you do next?

24 A After that, I was promoted to the assistant chief of  
25 social work service.

1 Q And approximately when was that?

2 A 1991.

3 Q And where were you located at that time?

4 A At the Bronx VA medical center.

5 Q And, again, what were your duties in that role?

6 A I had broad responsibilities for the social work  
7 department and specific responsibilities for the development of  
8 program surveying homeless veterans.

9 Q So while serving as assistant chief of social work, did  
10 you help to develop any notable housing projects?

11 A I was involved with a couple of projects.

12 First, was -- you have to remember, early 1990s, there  
13 were not many services for people experiencing homelessness.  
14 This was sort of early days that there were shelter programs,  
15 not a lot of housing programs.

16 One of the first things I did was to work with the city  
17 and create a partnership where they set aside two armories  
18 where we could have emergency housing for veterans.

19 One was for men. I don't remember the name of the  
20 armory anymore. The other was for women. One important  
21 feature of these shelters was we delivered services because, at  
22 that time, most shelters were just, essentially, warehouses  
23 with few, if any, services.

24 So we created these set aside units in collaboration  
25 with the city and, again, able to deliver services to provide

1 care.

2 The second piece, New York had just embarked on what was  
3 called the New York/New York Agreement, and it created, for the  
4 first time, permanent supportive housing for people  
5 experiencing homelessness.

6 This was a relatively new phenomena, permanent  
7 supportive housing, at that time. And it seemed to me that the  
8 VA should have an opportunity to carve out space for just  
9 veterans -- I thought veterans had unique needs -- and a unique  
10 opportunity to form community as given their experience.

11 So working with both the City and the State, I was able  
12 to get the City to commit new construction that they had just  
13 developed or were developing on Commonwealth Avenue. It was a  
14 150-unit building.

15 And, in exchange, the VA committed staffing. And I got  
16 the State to do the same.

17 So we, essentially, leveraged our resources. And the  
18 City no longer had to pay for the cost of the service team.  
19 And we got a 150-unit building devoted for unhoused veterans.

20 Q Were you aware of -- at that time, of any other  
21 veteran-dedicated housing project like what you just explained  
22 in the country?

23 A That was -- I can't say it's the first. I don't know for  
24 certain. But it was certainly one of the first of its kind.

25 Q And how long did that permanent supportive housing project

1 operate?

2 A It still exists today.

3 Q Now, after that, around 1993, you went to work for the VA  
4 in New Jersey; is that correct?

5 A That's correct. I was promoted as the chief of social  
6 work.

7 Q And how long were you with the New Jersey VA?

8 A I was there until 2007.

9 Q And you served in several different positions. You just  
10 mentioned the chief of social work was the first.

11 Can you tell us each position that you held?

12 A I was a chief of social work for a couple years, two or  
13 three years. And then I had a brief sojourn away from social  
14 services. I ran community-based outpatient clinics for four  
15 years.

16 And then returned to become the chief of homeless  
17 services for the VA in New Jersey.

18 Q Now, let's talk about a couple of the initiatives that you  
19 led while with the New Jersey VA.

20 Can you tell us about the Resource, Entitlement and  
21 Advocacy Program or REAP?

22 A One of the issues for us was we found many veterans may  
23 have been aware of their ability to get, say, service-connected  
24 benefits but were not aware of the whole range of benefits  
25 available to them outside of the VA.



1           So we worked with a local nonprofit that trained -- and  
2 I did this in the Bronx as well -- that trained veterans who  
3 were willing to be volunteers on how to assist veterans getting  
4 benefits but also advocacy pieces, helping them get lawyers,  
5 helping them connect to resources in the community.

6           And this service was available on demand. You didn't  
7 have to make an appointment. You could just walk in and get  
8 the service.

9           A lot of veterans appreciated it because it wasn't  
10 simply focused on people who were unhoused. It was a  
11 preventative measure as well.

12           Certainly, resources, income, benefits, all of those  
13 things play important roles in keeping people sustainably  
14 housed.

15           And the ability to work with veterans who were  
16 volunteers, for a lot of folks being served by us, was less  
17 intimidating than to have to come to a professional. Also, the  
18 fact that they were other veterans.

19           It was a lower barrier to service.

20 Q       Can you tell us about Maverick?

21 A       Maverick was a -- sponsored both by VA and by a community  
22 nonprofit developed to -- created for economic development. It  
23 was the Middlesex County Economic Opportunity Corporation.

24           And at that time, when we were developing this -- or  
25 when I led this, the job market was very difficult for

1 veterans.

2           So, we -- and the jobs, typically, offered through VA  
3 for trainees, we had something called a compensated work  
4 therapy program.

5           And the joke about the compensated work therapy program  
6 at that time is the jobs were in the three Fs, filing, food,  
7 and filth.

8           So there was very limited opportunity -- I mean, yes,  
9 you could get jobs there, but for many veterans, it was not  
10 particularly rewarding.

11           They weren't very appealing to a lot of veterans, and  
12 they didn't have a lot of prospects.

13           So, we worked with Middlesex County to create new  
14 businesses, businesses veterans would manage, operate, own all  
15 of the positions with support. And we created a number of  
16 businesses.

17           First, we created a golf driving range on the grounds.  
18 We were able to use a special funding source that no longer  
19 exists, but we were able to build a golf driving range. It  
20 also got a lot of donations.

21           We built a construction team. That construction team  
22 also was used to help rehabilitate and building housing for  
23 unhoused veterans.

24           We built a greenhouse. All of these employed veterans,  
25 and the construction was done by veterans.

1           We opened a cafeteria or a -- I should say a catering  
2 business.

3           And then, finally, opened a thrift store.

4           So all of these businesses generated revenues of  
5 millions of dollars. Those revenues were used to sustain and  
6 support these veteran-owned businesses that are hired veterans.  
7 And the idea was to create a model that could be replicated  
8 elsewhere in addition to serving all of these veterans and  
9 creating a separate income stream that was not dependent on  
10 federal resources that could be used for employment training  
11 and -- in a variety of different jobs and variety of different  
12 levels.

13           THE COURT: Just one moment.

14           Rest, Terri. Just rest your hands.

15           (Pause in the proceedings.)

16           THE COURT: All right. Thank you, Counsel. Please  
17 proceed.

18           MR. LOWENSTEIN: Thank you.

19 BY MR. LOWENSTEIN:

20 Q       When you came up with the concept of Maverick, had you  
21 seen anything like that program at that time?

22 A       Whenever I take on a job I always like to think -- well, I  
23 always start with an assessment of what's happening, what the  
24 needs are.

25           And rather than simply looking at existing programs and

1 improving them -- and, certainly, that is part of what I do --  
2 I look at what is needed. What is the goal. What is the  
3 ideal, and start back from there.

4 So instead of looking for incremental improvement, look  
5 where you want to be.

6 What was evident to me from the assessment I had done at  
7 the time was we needed to create meaningful job opportunities  
8 for veterans, ones that they could feel more invested in, that  
9 had greater opportunities for them, had more meaning to them.

10 So I started from that point and started looking for  
11 partners. And I knew we had -- that I could assemble certain  
12 kinds of resources to make it an attractive possibility.

13 Q So what did you do after serving in New Jersey?

14 A I was offered a position in Washington. It was -- it's  
15 called -- and I can't even tell you the acronym, what it stands  
16 for, but it's call CHALENG.

17 It was a survey process meant to better understand  
18 what -- veterans who were unhoused -- their needs were and  
19 unmet needs.

20 Q That was around 2007?

21 A Yes.

22 Q And was that a national program?

23 A Yes, it was.

24 Q Now, before you got to CHALENG, from whom was the CHALENG  
25 program seeking feedback?

1 A Prior to my arrival, it went to stakeholders -- typically,  
2 VA staff, some community stakeholders -- and asked them what  
3 they thought were the met and unmet needs of veterans. And the  
4 survey was meant to inform VA leaders about what kinds of  
5 services were needed.

6 Q And who did you expand that survey to to elicit feedback  
7 from?

8 A I felt a major gap in the current survey was it didn't ask  
9 the people we were serving; it didn't ask the veterans.

10 So I created a survey process that intentionally  
11 delivered -- sought to get the veterans' perspective, both  
12 veterans who were unhoused and those who were previously  
13 unhoused so that way we could find out what worked and when  
14 there were gaps in services.

15 Ultimately, on an annualized basis, we surveyed over  
16 10,000 veterans each year before I left.

17 Q And how did VA use the feedback that the CHALENG was  
18 eliciting?

19 A Well, it was used by me in the development of the SSVF  
20 program. A number of things that I learned from that  
21 process -- there were several things that we incorporated into  
22 SSVF that hadn't previously been done before in the VA.

23 Is it worth getting into those details?

24 Q Well, let's talk about SSVF. And you became the national  
25 director of SSVF after leaving the CHALENG program; is that

1 right?

2 A That's correct.

3 Q And when did you start in that position?

4 A It was around 2010.

5 Q How long did you serve as national director?

6 A Until this -- until assuming this position.

7 Q And was SSVF a new program when you took the reins?

8 A It was. It was authorized by Congress at about the time I  
9 was -- just before I was put into the position.

10 Q What is SSVF's mission?

11 A The mission of SSVF is to work with people who are facing  
12 a housing crisis.

13 To differentiate it somewhat from HUD-VASH, HUD-VASH  
14 works with more severely needy veterans who have chronic  
15 conditions typically, disabled.

16 SSVF really looks at a population that is more going  
17 through a crisis and trying to use a short to intermediate term  
18 intervention to resolve their homelessness crisis.

19 It also plays an important role in homeless prevention.  
20 The idea is to intervene with veterans at a moment when they  
21 are imminently at risk of homelessness in a way that prevents  
22 them from becoming homeless.

23 Roughly 70 percent of our work is done with -- SSVF work  
24 is done with people who are currently homeless and about  
25 30 percent as a prevention.

1 THE COURT: Just one moment. We will just rest for  
2 just a minute.

3 (Pause in the proceedings.)

4 THE COURT: Counsel, thank you.

5 THE WITNESS: I also should add almost all of SSVF  
6 staff is hired by community nonprofits. So there is very few  
7 VA staff involved simply to support the grant. But all of the  
8 funding goes to community nonprofits who then deliver the  
9 services.

10 BY MR. LOWENSTEIN:

11 Q And that is VA funding?

12 A Yes. Correct.

13 Q Generally speaking, what were your responsibilities as  
14 national director?

15 A I shaped the regulations, policies, training, compliance,  
16 all of the sort of supports that drove which direction SSVF  
17 would go in.

18 Q Now, is it fair to say that during your, approximately,  
19 what is it, 12 years as national director, you pioneered a  
20 number of initiatives to address veteran homelessness; is that  
21 fair?

22 A Yes.

23 Q Let's talk about a few of them. Can you tell us about  
24 Rapid Resolution?

25 A One of the issues that we always think about when veterans

1 come in to our system is how do we get them housing? You know,  
2 what's the housing plan? We forget that veterans are attached  
3 to -- they have a past. And that past often includes the  
4 family.

5 Now, sometimes that relationship with their family went  
6 sideways because of a variety of reasons. There may have been  
7 substance use, mental health disorders, behavioral issues, a  
8 whole host of reasons. And the veteran can't go back -- or  
9 feels they can't go back. They feel they can't go back  
10 because, you know, they -- I'll just make up an example -- they  
11 stole from grandma, and grandma doesn't want them in the house,  
12 or they feel that they were too burdensome on grandma. You  
13 know, that grandma had to provide too much support. And they  
14 don't want to be a burden, so because of pride or because of  
15 conflict, any number of reasons, but those are a couple of  
16 examples.

17 They essentially say that they have no one to go back  
18 to. And we just check the box. We have asked the question, do  
19 they have anyone they can go back to.

20 And then we move on to our next questions and get to the  
21 real stuff, the housing plan.

22 But what we fail to do sometimes is sufficiently  
23 explore, well, is there something that we can do to help with  
24 that relationship with grandma.

25 And there is specific mediation techniques that -- and



1 this is a training that we began to offer around the country --  
2 that can help to explore those relationships a little bit more,  
3 to tease out, not just check the box, but really have a  
4 discussion about whether that veteran might have options.

5 And then, if there might be an option with grandma,  
6 well, we try to do mediation with grandma. And if grandma is  
7 poor, maybe we help, you know, buy food.

8 So if she takes back Junior, you know, Junior can stay  
9 in the house and will help with some expenses.

10 So we found that this is a way to, essentially, expand  
11 the housing supply because we don't often think in our system  
12 of homeless services of -- we think of putting them in units.  
13 We don't think of what are the family connections. What are  
14 the things, you know, you and I might do if we had trouble.

15 So, we try to explore those possibilities. And we began  
16 offering training around the country to support it.

17 THE COURT: Just a moment.

18 Okay. Counsel.

19 BY MR. LOWENSTEIN:

20 Q I want to talk about SQUARES, which you briefly addressed  
21 with counsel on Friday. What was the problem that SQUARES was  
22 intended to address?

23 A We wanted to speed access for veterans who were unhoused  
24 to services.

25 We had already issued a policy in SSVF called

1 presumptive eligibility, that if somebody tells you they are a  
2 veteran, just assume that that is right and begin services,  
3 rather than sending them to the medical center, waiting for the  
4 eligibility check. Because we knew that a lot of veterans  
5 aren't going to follow up on that. We wanted to engage them  
6 right away.

7           The problem with just having presumptive eligibility is  
8 we can't do any financial supports. We can't pay rent. We  
9 can't do any of the things that is going to get somebody back  
10 in housing.

11           So we needed a more robust solution. So we worked with  
12 our IT folks and with contractors, developed the thing called  
13 SQUARES.

14           And, ultimately, the second version of SQUARES, which I  
15 think came out around 2016, 2017, I'm not exactly sure, but the  
16 revised version of SQUARES gave grantees the ability to go  
17 online, put in basic information about the veteran --  
18 essentially, name, birth date, Social Security number -- and  
19 get confirmation of their veteran status, in specific enough  
20 terms to say that that veteran was eligible for care. And they  
21 could use that --

22           THE COURT: Did that hook into the HMIS system as  
23 well?

24           THE WITNESS: It used the -- it did not hook into  
25 HMIS, but it hooked into the DOD system.

1           So we could use that to immediately determine if someone  
2 was eligible for care. And then once they were eligible, then  
3 the SSVF grantee would put into HMIS, we enrolled this person  
4 in care. So it became part of the HMIS system after they got  
5 enrolled, but it allowed for immediate access, immediate entry  
6 to care.

7           This is, as I shared yesterday, so vital. We have to be  
8 able to serve someone the moment they present. If we allow for  
9 a delay, we allow for somebody to be on the street another day,  
10 we certainly could lose them to care.

11           We certainly could see that veteran be retraumatized and  
12 experience things we don't want them to experience.

13           So we wanted to be able to create a system where the  
14 moment that veteran presented, we're going to get them into  
15 services.

16           THE COURT: Just a moment.

17           Counsel.

18 BY MR. LOWENSTEIN:

19 Q       Now, SQUARES started at SSVF.

20           Is SSVF the only part of VA that utilizes SQUARES?

21 A       It's used in outreach as well now. It's an important  
22 resource for many community providers. It's embedded --  
23 essentially, the questions in it are used by -- well, I  
24 shouldn't say the questions.

25           The service is used by many providers to establish

1 eligibility.

2           So, now, if we have not just SSVF nonprofits, but LAHSA  
3 knows how to use it, other outreach providers know how to use  
4 it so they can identify veterans who are eligible for care and  
5 connect them to services.

6           In fact, everyone who is part of our One Team, which  
7 is -- I think I have briefly described Friday, is this  
8 expansive range of providers who interact with veterans who are  
9 unhoused can use SQUARES as well.

10 Q       Can you tell us about an initiative called Shallow  
11 Subsidies?

12 A       So, for most veterans who are unhoused, they don't need  
13 permanent supportive housing.

14           Permanent supportive housing is a very specific  
15 intervention.

16           THE COURT: Let me go back for a moment to make  
17 certain I understand the last answer.

18           When SQUARES is used -- and you mentioned LAHSA -- does  
19 it allow your provider, like VOA or PATH, to more quickly  
20 identify eligibility for veterans?

21           THE WITNESS: Yes. Eligibility and enrollment.

22           THE COURT: Now, they are hooked into the HMIS  
23 system?

24           THE WITNESS: Yes.

25           THE COURT: I'm going to come back to my original --

1 because LAHSA is supposed to be, in some sense, through their  
2 providers into the HMIS system.

3 You mentioned a DOD database. I assume that that is  
4 nationwide or California based?

5 THE WITNESS: Nationwide.

6 THE COURT: Nationwide.

7 Explain to me if there is a relationship with the  
8 HMIS system and SQUARES.

9 THE WITNESS: The relationship would occur after you  
10 verify somebody in SQUARES, you would then put their data into  
11 HMIS.

12 THE COURT: Okay. The provider would?

13 THE WITNESS: Yes.

14 THE COURT: And the provider is able to do that,  
15 obviously?

16 THE WITNESS: Yes.

17 THE COURT: Okay. Thank you. Counsel, thank you.

18 BY MR. LOWENSTEIN:

19 Q And one more question on SQUARES. What is being verified  
20 through that SQUARES process?

21 A It verifies the veteran's previous military experience and  
22 the type of discharge they have, which is important because  
23 certain kinds of discharges will make you, for instance,  
24 eligible for VA healthcare but may not make you -- or, excuse  
25 me, or make you eligible not for VA healthcare, but you might

1 be able to be eligible for homeless programs.

2 And the classic for that is, other than honorable  
3 discharge, many of those veterans are not eligible for VA  
4 healthcare, but they are eligible for a variety of services  
5 serving veterans who are unhoused.

6 THE COURT: Now, just a moment.

7 (Pause in the proceedings.)

8 THE COURT: You have less than an honorable  
9 discharge. I understand that there may be different --  
10 let's -- I will use the word services. It's a bad word. And  
11 you said that you may not be eligible for VA healthcare, but  
12 you might be eligible for other homeless programs.

13 For instance, what type?

14 THE WITNESS: You would be eligible for HUD-VASH and  
15 SSVF and Grant and Per Diem.

16 THE COURT: So does that mean -- and whether it's  
17 the voucher system that LA uses or HUD-VASH -- I will take  
18 HUD-VASH -- that with a less than an honorable discharge that I  
19 would actually be placed into a housing unit but that I  
20 wouldn't have services that were given to me while I was in  
21 that housing unit?

22 THE WITNESS: You could still get services. You  
23 would get services through HUD-VASH. And HUD-VASH can provide  
24 a limited range of medical services. So you might have a  
25 visiting nurse, for instance, but it could not connect you

1 directly to VA healthcare.

2 THE COURT: So I might have a nurse of some kind,  
3 but I couldn't go to the VA hospital in the southern part of  
4 the West LA Campus?

5 THE WITNESS: That's correct.

6 THE COURT: I want to repeat that so I understand  
7 it.

8 Once in the HUD-VASH system, there are some services I  
9 might get, but I couldn't go to the VA hospital as a  
10 disqualifier.

11 THE WITNESS: That's correct. There are some  
12 exceptions, some mental health services that --

13 THE COURT: It's like the hearsay rule. I'm just  
14 joking. I'm trying to get a general understanding.

15 Then -- who makes that -- certainly, you don't. Who  
16 makes that kind of differentiation? Does that come from -- who  
17 makes that decision?

18 THE WITNESS: We have an eligibility department, but  
19 it's based on statute. So statute determines who is eligible  
20 for what services.

21 THE COURT: I see. Thank you very much. I  
22 appreciate that.

23 THE WITNESS: And, also, to address it, because it  
24 is a source of concern, certainly, we want these veterans and  
25 their family members to be eligible to get healthcare because

1 we know healthcare is strongly correlated to sustainable  
2 housing. So we created a thing called Healthcare Navigation  
3 within SSVF.

4 THE COURT: So I slugged my sergeant -- I'm a  
5 private, and I hit my sergeant because he's a jerk -- or I  
6 perceive he's a jerk, for want of a better word. And I'm being  
7 facetious.

8 THE WITNESS: Yeah.

9 THE COURT: I get an administrative discharge. Is  
10 that less eligibility? Can I go to the VA hospital?

11 THE WITNESS: A general discharge --

12 THE COURT: General discharge.

13 THE WITNESS: You -- it would have to be looked at  
14 by our eligibility folks. Often, they can be. The problem  
15 runs for other than honorable or dishonorable. If you have a  
16 dishonorable discharge --

17 THE COURT: I'm not there yet. I'm not doing  
18 dishonorable. That may be an absolute -- I understand that.

19 I'm talking about some type of administrative bad  
20 conduct. Better yet, I hit another person in my platoon. We  
21 got in an argument. Lieutenant or captain writes me up. And I  
22 do it again, by the way. I'm given a less than honorable  
23 discharge of some kind.

24 I might be eligible for VASH housing and whatever those  
25 services are, but I can't go to the hospital for my psychotic



1 state, correct?

2 THE WITNESS: Correct. If it's --

3 THE COURT: Okay. Fair enough.

4 THE WITNESS: Some mental health services, though,  
5 there are exceptions. So if it's for psychosis, it's possible.

6 THE COURT: I understand that there are exceptions  
7 to the exceptions. It's like the hearsay rule. And I'm joking  
8 with you. But generally speaking, I'm trying to get an idea.  
9 Okay. Thank you.

10 Counsel.

11 Then we are, in a sense, housing veterans with long-term  
12 supportive units, but we're not treating them for, let's say,  
13 their psychosis.

14 THE WITNESS: Well, I hope we are. Just not  
15 through -- directly through the VA, beyond what HUD-VASH can  
16 do. They would certainly need to be connected to  
17 community-based resources.

18 THE COURT: But are they?

19 THE WITNESS: They -- I fully expect they are. And,  
20 yes, they are.

21 THE COURT: Okay. I have actually asked both sides  
22 about that. But it's not the turning point of the case. Thank  
23 you.

24 Counsel.

25 BY MR. LOWENSTEIN:

1 Q And you may have just been hitting on this a bit. But  
2 would HUD-VASH staff assist a veteran in getting connected to  
3 private healthcare in the community?

4 A Yes. And, in fact, also SSVF does it as well. We had an  
5 initiative called Healthcare Navigation, which we did national  
6 training on, which is a requirement of the grant, that grantees  
7 connect veterans and their family members -- because a  
8 veteran's household can be destabilized if, you know, little  
9 Jane or Johnny or a partner or any household member has  
10 untreated health or mental health conditions.

11 THE COURT: Who pays for that?

12 THE WITNESS: So SSVF is required to connect them to  
13 community resources.

14 THE COURT: That's not my question. I understand  
15 the connection, so let's slow down. That's not my question.  
16 Is that disqualifier, then, placing back on the county --

17 THE WITNESS: Typically, Medi-Cal.

18 THE COURT: You haven't heard my question yet.  
19 Okay. We've got all day. Slow down. I'm trying to  
20 understand.

21 That means that the VA isn't treating me for my  
22 war-induced -- or my activity of hitting my sergeant or my  
23 corporal. The VA, then, is referring that out to what we call  
24 services, which would usually be like BOA or Pathways or  
25 somebody else, which means the county, then, if they're going

1 to treat that veteran, picks up that bill, in a sense, don't  
2 they?

3 THE WITNESS: Typically --

4 THE COURT: Slow down. Just very simple. Yes or  
5 no? Very simple. I don't want to hear the exception to the  
6 exception. Yes or no?

7 THE WITNESS: I'm not going to give up the  
8 exception. I'm going to try to tell you what happens.

9 THE COURT: Yes or no?

10 THE WITNESS: Neither yes nor no.

11 THE COURT: Okay. Well, then --

12 THE WITNESS: So the federal government would pick  
13 up part of the cost because Medi-Cal is funded, in part, by  
14 federal government and the state and county would pick up part  
15 of the cost.

16 THE COURT: But the VA is not?

17 THE WITNESS: The VA is not.

18 THE COURT: Okay. It is as simple as that. I've  
19 got to depend upon Medi-Cal or the county.

20 THE WITNESS: Uh-huh.

21 THE COURT: Okay. Counsel. Thank you very much.  
22 I'm slowing you down just so I understand.

23 MR. LOWENSTEIN: Thank you, Your Honor.

24 BY MR. LOWENSTEIN:

25 Q Now, I mentioned this earlier, but can you tell us about

1 Shallow Subsidies, which was another initiative that you  
2 pioneered at SSVF?

3 A For many people, particularly in the current housing  
4 economy, I mean, which has certainly gotten worse in the last  
5 five years, but this is a long-term trend spanning since really  
6 1980 where we have seen rents outpace inflation. If you are on  
7 a fixed income or if you are low income wage earner, which is  
8 the majority of the people in this country, half of the people  
9 in this country live paycheck to paycheck, they don't need  
10 intensive services, they just need help with the rent, thank  
11 you.

12 And a way to help them would of course be a universal  
13 cash payment, which is one thing I explored which we can't do,  
14 but what we could do, since we can't do universal cash payment,  
15 is a thing called "Shallow Subsidy," and what that does is for  
16 people who are falling behind on their rent or can't afford the  
17 rent but don't need intensive services, Shallow Subsidy will  
18 pay half the rent for two years, and that can be renewed based  
19 on need.

20 The idea of -- primarily this is a preventative  
21 mechanism for people who are on fixed incomes that they're  
22 approaching the risk of becoming homeless, rather than having  
23 them enter the homeless system and the incredible and trauma  
24 and disruption that causes, step in and help them pay the rent.

25 So that was what Shallow Subsidy was designed to do. It

1 also can, and is used for people who, again, don't need the  
2 intensive services and may just need help with the rent for  
3 part of the SSVF intervention to help resolve on a longer term  
4 because it can go two years and it's renewable, the rent  
5 crisis.

6           These services bring more units of housing into  
7 affordability, because essentially you have expanded housing  
8 pool because you've just cut the rent in half, and it's -- the  
9 subsidy is based on fair market value, not the HUD FMR, but the  
10 actual fair market value based on grantees' assessments.

11 Q       And do Shallow Subsidies apply nationwide?

12 A       Yes, they do.

13           THE COURT: Were you instrumental in that program?

14           THE WITNESS: I started it.

15           THE COURT: Thank you.

16 BY MR. LOWENSTEIN:

17 Q       Can you tell us about SSVF's role in the concept of  
18 "intentional bridging"?

19 A       So one of the -- there are two -- there are a couple of  
20 issues with HUD-VASH that stem from the process of simply using  
21 a voucher, you know, there is of course the administrative  
22 process of getting a voucher, which requires sometimes quite a  
23 bit of paperwork in time, then once you get a voucher and  
24 identify a unit you have to have the unit inspected, so for a  
25 landlord that's a delay, they have to wait for an inspection,

1 if the inspection finds anything, they have to make a repair or  
2 correction before someone can occupy it, so there's a couple  
3 disincentives on first the veteran's end there are delays in  
4 getting permanent housing waiting for that process.

5 On the landlord's end they are dealing with the cost of  
6 a vacant unit and in this market, a vacant unit -- they don't  
7 need to have a vacant unit, they can turn around and rent very  
8 quickly.

9 So, intentional bridging says we are going to place that  
10 veteran immediately using SSVF resources, knowing that veteran  
11 needs more intensive services than SSVF typically provides and  
12 knowing they need a voucher, but we're going to get them out of  
13 their homelessness, secure housing immediately, also satisfying  
14 the landlord so we don't lose the unit and then work all of the  
15 HUD processes while that veteran is permanently housed. So  
16 that is intentional bridging that is a national initiative as  
17 well and something we do in LA.

18 Q So is it fair to then say that when there is a delay from  
19 the HUD-VASH process, SSVF can step in and fill that gap --

20 A Step in and fill that gap. Yes.

21 Q And is intentional bridging applied here in Greater LA?

22 A We started it in LA, yes. It's now national.

23 Q A couple of more questions about your time at SSVF.

24 Under your leadership, SSVF issued one of the first  
25 federal initiatives to address the COVID-19 pandemic; is that

1 right?

2 A That's correct.

3 Q Can you tell us about that initiative?

4 A Very early on in the epidemic it was apparent that crowded  
5 areas were not good places to be, congregate shelter was not  
6 going to be a place we wanted veterans to be sent. It would  
7 put their health at risk, but at the same time what were the  
8 alternatives, we could not leave people in the streets.

9 So, we directed all of our grantees in a -- we issued  
10 memo in March of 2020 very shortly after the outbreak  
11 instructing grantees to develop relationships with local hotel  
12 operators and to use their funding to place veterans at hotels  
13 and motels instead of referring to the traditional Grant and  
14 Per Diem, healthcare for homeless veterans contracts or other  
15 shelter stays in order to provide veterans with safe shelter.

16 Q Now was this concept of moteling and hoteling applied  
17 prior to the pandemic for a certain set -- group of veterans?

18 A So SSVF initially began providing hotels and motels as  
19 shelter to families, the idea was we knew that VA in general,  
20 only housed veterans.

21 THE COURT: Just one moment, that is confusing, I  
22 apologize.

23 When you say the "VA," aren't you working through  
24 providers for these placements? Isn't this just basically  
25 rapid rehousing, what I'm going to call civilian side, you're

1 not actually doing the placement, you are working with  
2 providers for the placement, aren't you?

3 THE WITNESS: So through SSVF --

4 THE COURT: I understand that that is your program,  
5 but the VA isn't actually doing the placement --

6 THE WITNESS: Oh, I see what you --

7 THE COURT: -- you are referring them to the  
8 provider like BOA, or Pathways, aren't you?

9 THE WITNESS: Yes.

10 THE COURT: Now I understand it's through your  
11 program. Are you also supplying the funding for this?

12 THE WITNESS: Yes.

13 THE COURT: Okay. So you are supplying the funding  
14 to the provider?

15 THE WITNESS: Yes.

16 THE COURT: What I'm going to call basically rapid  
17 rehousing.

18 THE WITNESS: It wasn't rapid rehousing though  
19 because this is emergency housing.

20 THE COURT: Emergency housing, sorry. All right.  
21 Thank you very, very much.

22 BY MR. LOWENSTEIN:

23 Q Now you were saying that originally the moteling and  
24 hoteling that SSVF was doing was initially addressed for  
25 families?



1 A Yes. There was no other way for VA to provide referrals  
2 or assistance are very difficult, very limited ways to keep  
3 families together.

4 The danger is if I'm mom or dad and my household is  
5 homeless, I don't want to get housed and abandon my household  
6 or see my kids dispersed to foster care, so the hotel option  
7 gave VA a capacity to keep families together.

8 Q So, under this initiative that was issued right at the  
9 start of the COVID-19 pandemic, did that initiative just apply  
10 to families?

11 A No, it was broadened to all veterans. So any veteran  
12 should be offered this as a shelter opportunity if the only  
13 other option was a congregate environment.

14 THE COURT: And is this because -- this referral  
15 because we didn't have enough long-term supportive housing or  
16 shelter at the VA system? In other words, is that why we had  
17 to go to our providers when the pandemic hit?

18 THE WITNESS: The shelters that existed at that time  
19 were congregate.

20 THE COURT: Right, you had Bell, et cetera, in the  
21 area. Now let me go back to my question, the VA apparently  
22 didn't have enough what I'm going to call "on-site" or  
23 "off-site" shelter, therefore when the pandemic hit we had to  
24 go to the provider with SSVF funding and have them do the  
25 placement. So in a sense they are competing at that time with

1 veterans and also the -- what I'm going to call the "civilian  
2 population," where it's Skid Row or the Valley or Venice for  
3 the same finite resources and that's because we don't have  
4 enough shelter or supportive housing in our own system at that  
5 time.

6 Pretty simple question.

7 A That's correct.

8 THE COURT: Okay. Now, counsel?

9 BY MR. LOWENSTEIN:

10 Q Was that measure successful in your view?

11 A It over time placed about 40,000 veterans in emergency  
12 housing.

13 THE COURT: 40,000.

14 THE WITNESS: 40,000 nationwide.

15 THE COURT: Nationwide. Do you have any idea of  
16 Southern California what you placed? I think you came 2022.

17 THE WITNESS: Yeah, I don't know the numbers in  
18 Southern California, but could find them.

19 THE COURT: I understand you are not part of the  
20 past history.

21 THE WITNESS: Uh-huh.

22 THE COURT: And the pandemic is before you even got  
23 to the VA, but offhand do you have any idea what was placed,  
24 let's say, in the Los Angeles city area or even LA County area?

25 THE WITNESS: It would be thousands, but I don't

1 have the number.

2 THE COURT: Okay. Thank you.

3 BY MR. LOWENSTEIN:

4 Q And then you were detailed from SSVF in the fall of 2022  
5 to come serve as deputy director here in LA?

6 A That's correct.

7 Q And you testified already that one of the principal  
8 components you oversee is CERS; is that right?

9 A Yes.

10 Q And in basic terms what would you say is the purpose of  
11 CERS?

12 A Provide services and housing planning, and everything that  
13 goes along with it to veterans who are unhoused and ultimately  
14 end homelessness in GLA area.

15 Q Okay. Let's turn gears a little bit.

16 Do you recall about how many homeless veterans were  
17 living in LA when you first came in fall of 2022, according to  
18 VA's best estimates?

19 A The 2023 PIT count, which is essentially when I came here  
20 in January was roughly 4,000 veterans who were homeless. And  
21 this is based on the Los Angeles COC. You could can look at  
22 other numbers and make it more or less but roughly 4,000.

23 Q You said "LA COC." What is that?

24 A It's a Los Angeles COC, it doesn't include Pasadena.

25 THE COURT: And Long Beach? Pasadena and Long

1 Beach?

2 THE WITNESS: Well, it does include Long Beach.  
3 Glendale, I would say a more accurate count it would for Los  
4 Angeles should include Glendale and Pasadena and strip out Long  
5 Beach since Long Beach is served by another medical center, and  
6 if you do those things it's -- the number runs up about the  
7 same, 4,000.

8 BY MR. LOWENSTEIN:

9 Q And you used the term "PIT count."

10 Now, we have heard about the PIT count, but you could  
11 just explain, what is the PIT count.

12 A The PIT count is short for -- it stands for point-in-time.  
13 It's a snapshot that HUD mandates is done every two years  
14 around the country, many localities including Los Angeles do it  
15 annually, and what it does is each -- for Los Angeles year  
16 measures the number of veterans and other subpopulations who  
17 are experiencing homelessness, either sheltered or unsheltered.

18 Q How is the PIT count conducted?

19 A There are two parts of a PIT count. The first part, that  
20 snapshot I mentioned, is generally done the third week of  
21 January, LAHSA organizes it, and what they do, they pull  
22 together volunteers from across the community, thousands of  
23 volunteers I believe, and they assign them to certain areas of  
24 LA, LA County, and they enumerate the number of people who are  
25 unsheltered, so that's one part of it.

1           The second part -- and they don't interact with anyone  
2 -- they literally just count, so to understand who the  
3 subpopulations are, LAHSA contracts with USC.

4           And USC does a much longer process, starts in November  
5 and goes into March, where it might even start in October, but  
6 they go out and they survey specific areas to have a  
7 representative sample, and talk to people they meet. And try  
8 to understand their demographic background and other factors  
9 you see included in the PIT annual report, point-in-time annual  
10 report, and that survey is then generalized to the overall  
11 population.

12 Q       In your opinion is the PIT count a reliable snapshot of  
13 the approximate number of homeless veterans in LA?

14 A       The PIT count is an estimate. I think it's important to  
15 understand there's plus or minus percentage, you know, it's a  
16 range, it's an estimate. I think it's most valuable for  
17 understanding trends, so where we see trends in the  
18 point-in-time count that tells us probably more valuable  
19 information than saying -- that says there are, you know, two  
20 -- like for us, there are 2,991 veterans who are homeless, well  
21 that number as a real accurate number, you need to understand  
22 it's more of an estimate.

23 Q       And do you utilize the PIT count in your job?

24 A       Oh, of course, it's important. We utilize all of the  
25 metrics available to us to inform programming and services, you

1 know, increases, decreases, both in shelter and unsheltered  
2 counts are extremely important for us to understand whether our  
3 interventions are effective and also to understand where we  
4 need to target services.

5 So, in addition to this broad point-in-time count, as I  
6 mentioned, some communities have separate point-in-time counts  
7 so we have a better understanding of smaller communities and  
8 the impact of homelessness in those smaller communities.

9 Q Now you have used the term "sheltered homelessness," can  
10 you just tell me, what is sheltered homelessness?

11 A When we measure homelessness there's two ways we count  
12 people who are unhoused.

13 One is the most obvious, which is people in the street,  
14 where you see people in encampments, living in their cars, RVs,  
15 people who are visibly homeless and those are certainly the  
16 people at the most risk as well.

17 The second group, which could be people, for instance,  
18 in our temporary housing if you're in a Grant and Per Diem  
19 program, if you are CTRS or any one of our temporary housing  
20 programs you are still counted as homeless, although, certainly  
21 you are safer than if you were in the street.

22 MR. LOWENSTEIN: May we approach the witness, Your  
23 Honor?

24 THE COURT: You can do so any time.

25 MR. LOWENSTEIN: Thank you.

1 BY MR. LOWENSTEIN:

2 Q Mr. Kuhn, we're going to hand you a document that has been  
3 admitted as Exhibit 1335.

4 Do you recognize this information, Mr. Kuhn?

5 A Yes, this is information from the point-in-time count  
6 released by LAHSA.

7 Q And what area does this -- do these numbers apply to?

8 A This applies to the City of Los Angeles.

9 Q How are you familiar with this information?

10 A I'm familiar with it because it's my job to be familiar  
11 with it.

12 Q Would you say in some ways it's your grade?

13 A Yes, I suppose it is.

14 Q Do you see where it says "veterans"?

15 A Yes, I do.

16 Q What is the total estimated number of homeless veterans in  
17 LA City according to the PIT count in 2024?

18 A 1,834.

19 Q Okay. You can put that to the side, we're going to hand  
20 you another document that has been admitted as Exhibit 144.

21 Do you recognize this information?

22 A Yes, I do.

23 Q And what is this?

24 A This is an LA continuum of care point-in-time count.

25 Q And do you see the section entitled "veterans"?

1 A Yes.

2 Q What's the total estimated number of homeless veterans in  
3 the LA COC according the PIT count of 2024?

4 A 2,991.

5 Q You can put it to the side. We're going to hand you  
6 another document that is marked as Exhibit 1334.

7 Do you recognize this document?

8 A Yes, I do.

9 Q And what is it?

10 A It is a PowerPoint presentation showing the reductions in  
11 homelessness among veterans between 2024 and 2023.

12 Q How are you familiar with this document?

13 A Again, it's my job to be familiar with this information.

14 Q But this specific document, how are you familiar with it?  
15 Did you create it?

16 A Oh, yes, I created this based on the LAHSA results.

17 MR. LOWENSTEIN: Your Honor, I move to admit  
18 Exhibit 1334 into evidence.

19 THE COURT: Received. Do you want 144 received as  
20 well if it hasn't been?

21 MR. LOWENSTEIN: 144 was admitted.

22 THE COURT: Just to be certain it's been received  
23 just in case and 1335 was previously received.

24 (Exhibit 1334 received into evidence.)

25 MR. LOWENSTEIN: Thank you.



1 BY MR. LOWENSTEIN:

2 Q All right. Let's talk about this document. Can you tell  
3 us what this first slide shows?

4 A It shows a substantial decline in homelessness among  
5 veterans in LA City. It was down 32 percent compared to 2023.  
6 This also contrasts with the 2 percent reduction overall for LA  
7 City, which if you actually strip out the veteran reduction is  
8 close to zero for the general population.

9 MR. LOWENSTEIN: Can we go to the second slide.

10 THE COURT: Just one moment.

11 Thank you, counsel.

12 BY MR. LOWENSTEIN:

13 Q Now what does this second slide show?

14 A This is the LA COC. It shows a 23 percent reduction in  
15 homelessness among veterans between from 2023 to 2024.

16 That contrasts with an unchanged result for the overall  
17 population, if you actually strip out veterans, homelessness  
18 among the general population increased by about 1 percent.

19 Q How did the veteran numbers in the LA COC 2024 PIT count  
20 compare to veteran numbers in other COCs in Southern  
21 California?

22 A Veteran numbers in LA and in Ventura as well where we also  
23 provide services are really the exceptions in Southern  
24 California.

25 What we see across Southern California, San Diego, San

1 Bernardino, Long Beach, and Orange County all saw increases in  
2 homelessness among veterans.

3 THE COURT: And let me summarize so I'm certain I'm  
4 absorbing it. In LA City we have a 32 percent decrease?

5 THE WITNESS: That's correct.

6 THE COURT: And what I'm going to call the "broader  
7 region" I won't say LA County because it doesn't necessarily  
8 match up with the VA, we have a 2 percent decrease?

9 THE WITNESS: 23 percent.

10 THE COURT: I'm sorry?

11 THE WITNESS: The general population had a 2 percent  
12 decrease, but the veteran homeless population's declined by  
13 23 percent.

14 THE COURT: Thank you very much.

15 BY MR. LOWENSTEIN:

16 Q So just to summarize, LA City had a 32 percent decrease?

17 A Yes.

18 Q LA COC had 23 percent decrease in veteran homelessness?

19 A Correct.

20 Q And other COCs in Southern California, what were their  
21 decreases or increases?

22 A For veterans they have increased across the board. I  
23 don't remember the exact percentages offhand, San Diego I think  
24 was 6 percent, I don't remember what San Bernardino. Orange  
25 was also a big increase. San Bernardino went up and Long Beach

1 went up couple of percent, but they all went up.

2 THE COURT: Now just a moment. San Diego I think  
3 was 6 percent, is that a decrease or increase?

4 THE WITNESS: Increase.

5 THE COURT: San Bernardino went up.

6 THE WITNESS: Yes.

7 THE COURT: And Long Beach went up.

8 THE WITNESS: Yes. And Orange County went up.

9 BY MR. LOWENSTEIN:

10 Q What conclusions do you take away from the 2024 PIT count?

11 A I think it demonstrates that the innovations and the  
12 approach we're taking in Los Angeles have been effective.

13 Q Who is "we"?" When you say "we," who is included in that?

14 A We have a remarkable group of people who are committed to  
15 this mission that is the One Team, which comprise of county,  
16 nonprofits, VA, staff working together with this common  
17 mission.

18 Q And that mission is?

19 A Ending homelessness among veterans.

20 Q Now, you have mentioned One Team and I would like you to  
21 just briefly tell me, what -- what were the problems that One  
22 Team was designed to address?

23 A We needed an approach that maximized our resources,  
24 improved efficiency, improved what I would like to describe as  
25 the velocity of where we work faster and with more urgency and

1 created a body that would plan and adapt to conditions as they  
2 changed.

3 Too often, we have gotten fixed in all sorts of  
4 wonderful programs, so the VA has developed a remarkable range  
5 of programs, but not always is connected to each other as they  
6 should be and certainly not as connected to other resources  
7 available in the area.

8 The goal is to create some process, some body that  
9 people are regularly coordinating, planning, resource  
10 utilization, and working with individual veterans and making  
11 sure that individual veterans -- each one, I mean, we talk  
12 about homelessness like it's some protoplasmic blob,  
13 homelessness only describes a person's housing situation.

14 It does not describe who they are, it does not describe  
15 what their needs are, and what they need to lead not only a  
16 life without homelessness but something hopefully more  
17 fulfilling. So we want to deliver the right resource based on  
18 everything that is available to us, not just that it's  
19 available to the one program you showed up at.

20 But everything that's available to us, to end their  
21 veterans' homelessness and sustain them in housing.

22 Q And who came up with the One Team concept here in LA?

23 A So I came up with the concept but, you know, I think it's,  
24 again, so important here, the concept is just the beginning.

25 The implementation has been the hard work of all of

1 these folks who have -- one of whom you heard from the other  
2 day, Sally Hammitt, who has done a remarkable job. It's the  
3 implementation that has been so successful.

4 Q When did One Team begin implementing this approach?

5 A We began talking about it towards the end of 2022. We  
6 started training on it early in 2023. We had a first of  
7 in-person meeting where we brought hundreds of people,  
8 providers, staff from all over the area, I think it was in the  
9 late spring of '23.

10 But it had been building with training and trying to set  
11 up a framework so that when we finally did get together, people  
12 already had an understanding of what we were trying to do.

13 Q And are you just starting to see the outcomes of the  
14 implementation of the One Team approach here in LA?

15 A We saw the outcomes spike almost immediately. So as we  
16 began rolling it out, starting in I would say March of last  
17 year, we saw a significant increase in the number of homeless  
18 veterans being placed into permanent housing.

19 So the results we saw for the calendar year of 2022 we  
20 had 1,301 veterans placed in permanent housing, formerly  
21 homeless veterans, and in 2023 it was 1,790, so a 38 percent  
22 increase in one year.

23 Q And that was just through the HUD-VASH program; is that  
24 correct?

25 A No, that was through all of our efforts. That's HUD-VASH,

1 SSVF, every program -- primarily SSVF and HUD-VASH, but there  
2 are other programs that work in VA with veterans who are  
3 experiencing homelessness who also had contributed to that.

4 MR. LOWENSTEIN: Your Honor, I think that's a good  
5 stopping point if that works for the Court.

6 THE COURT: Just one moment. Thank you.

7 MR. LOWENSTEIN: Can we take a break?

8 THE COURT: 20 minutes.

9 MR. LOWENSTEIN: 20 minutes will be great, thank  
10 you.

11 THE COURT: Sir, you may step down, thank you, we  
12 will see you in 20 minutes.

13 (Morning recess.)

14 THE COURT: We're on the record. All counsel are  
15 present, the witness is present.

16 Counsel, go back to direct examination.

17 MR. LOWENSTEIN: Thank you, Your Honor.

18 Ready, Mr. Kuhn?

19 THE WITNESS: Yes.

20 BY MR. LOWENSTEIN:

21 Q Let's talk about unsheltered homelessness in LA.

22 What are some of the particular difficulties that  
23 veterans face when they are unsheltered?

24 A So any person who's unsheltered, there are enormous risks  
25 to their health. The morbidity/mortality rates of people

1 experiencing homelessness are much higher than you would see in  
2 a normal population. They're subject to repeated trauma, they  
3 are generally in fear. You think of like basics, access to  
4 sanitation, a safe place to sleep, a place to store your goods,  
5 regular and healthy food, all of those things become if not  
6 impossible to get, very difficult to get.

7 It's very dangerous to be unsheltered.

8 Q Before we get into particular programs or initiatives, can  
9 you tell the Court just at a high level how VA is trying to  
10 help unsheltered veterans in LA?

11 A So, to help unsheltered veterans our goal is to improve  
12 access so that way if you are an unsheltered veteran, you can  
13 get access to emergency housing as quickly as possible. You  
14 can get access to services with as few barriers as possible.

15 We know from the literature about Housing First, that  
16 getting somebody into a safe environment makes it possible to  
17 do all of the other things that are important to that veteran.

18 Q And in part of that process of creating access is there a  
19 priority of getting unsheltered veterans off the streets and  
20 into safe shelter?

21 A That's the first priority is engaging those veterans and  
22 getting them someplace safe.

23 Q Now, on Friday you explored briefly with counsel some of  
24 the initiatives that you have implemented since coming to LA to  
25 help VA veteran gauge unsheltered veterans and create access, I

1 would like to talk about a couple of them and I'd like to start  
2 with -- I think the term on Friday was the hotline. If you  
3 prefer the hotline or do you prefer the call center?

4 A Call center is fine.

5 Q Great. Can you tell us about the call center, how does it  
6 work?

7 A So the call center started because -- I want to also  
8 share, of course, the VA has a national call center, which is  
9 used to connect veterans to services.

10 What we wanted to do was to do something that was both  
11 locally specific but faster as well.

12 So while the national call center, which has been stood  
13 up for years, will connect a veteran to a local medical center,  
14 it doesn't get immediate response. And we needed something  
15 that provided immediate response.

16 The call center is something a veteran can call and  
17 within several hours have a bed available in an emergency  
18 housing location that we can go and send a Lyft or an Uber or a  
19 staff member to pick them up and get them to that emergency  
20 housing. Same day.

21 Q So if a veteran were to call this call center, would they  
22 ever get turned away?

23 A No. They may elect not to accept what is offered, but  
24 every veteran who needs housing is given an offer of emergency  
25 housing. The call center has two different numbers. There is



1 the work -- during worked hours. There is a number that you  
2 call where you connect with VA staff. And then there is  
3 off-hour number, which is manned by Volunteers of America, one  
4 of our partners, who would respond.

5 Q And is proximity to emergency housing an issue?

6 A We want to be able to provide -- part of access is  
7 providing things that are close enough that you can get to on  
8 the same day.

9 So if we have somebody -- I mean, even across LA, it  
10 could take quite a bit of time in traffic to get across LA.

11 So we want to make sure that there is enough emergency  
12 housing access, not just at the West LA Campus -- certainly,  
13 West LA, but at other areas so that way we can connect  
14 homeless -- someone who is homeless to a resource not only that  
15 is proximate to them but also an area where they may be more  
16 comfortable.

17 There are many people who don't want to come to the West  
18 LA Campus, so we want to be able to provide as many pathways as  
19 possible that the veteran would be willing to accept. So it's  
20 not enough just to say, here, take it or leave it, but as many  
21 options so that hopefully the veteran says yes.

22 Q We'll talk a little bit temporary housing in a bit.

23 But with respect to the call center, you mentioned that  
24 VA would send an Uber or Lyft. Is that for any veteran that  
25 calls that line? That's not --

1 A Anyone who is unsheltered who needs housing, we will send  
2 an Uber or Lyft. And it's actually not us. We have a --  
3 because -- this is another area where VA used to pay for it  
4 under COVID authority, which expired. We have a wonderful  
5 community partner who pays for those Uber or Lyft trips,  
6 Village for Veterans. Hats off to them for doing that.

7 We -- this is another example of how One Team works  
8 where we use resources available throughout the community to  
9 serve veterans. It's not dependent on one program.

10 We have also, I want to share, have publicized this. We  
11 have billboards. One up in downtown. We're going to be  
12 putting them on buses soon. We have distributed business cards  
13 to everyone under the sun to try to make sure that this number  
14 is widely known. And we have had some media, also,  
15 fortunately, that have been very kind to share the phone number  
16 to the public.

17 Q And you testified that this initiative was first  
18 implemented at the end of 2022?

19 A December of 2022.

20 Q And has it proven successful?

21 A Up through last week, we had gotten 503 unsheltered  
22 veterans into emergency housing so --

23 THE COURT: You dropped your voice. We had gotten  
24 503 unsheltered veterans into emergency housing?

25 THE WITNESS: Yes. Through the call center.

1 BY MR. LOWENSTEIN:

2 Q And that is a statistic that VA tracks?

3 A Yes.

4 Q I would like to ask you about outreach.

5 Does CERS have a dedicated outreach team?

6 A We do.

7 Q What are the challenges that CERS outreach team faces in  
8 engaging unsheltered veterans through their efforts?

9 A And here is another example of how One Team is so  
10 important. The VA will --

11 THE COURT: Just a moment.

12 You need that volume increased. We'll increase it.

13 Counsel, we just need IT to come up and increase the  
14 volume for the court reporter. So tell them to come up and  
15 work quietly.

16 Would you repeat your question? Sorry for the  
17 interruption.

18 MR. LOWENSTEIN: Absolutely.

19 BY MR. LOWENSTEIN:

20 Q What are the challenges --

21 THE COURT: What are the challenges that CERS  
22 outreach faces?

23 BY MR. LOWENSTEIN:

24 Q Yeah. What are the challenges that CERS outreach team  
25 faces in engaging unsheltered veterans through their outreach

1 efforts?

2 A The VA will never have enough outreach staff. We just  
3 could not afford to hire enough outreach staff to cover the  
4 entire GLA catchment area, which is quite large. Again, here  
5 is One Team at play where we use everybody working with  
6 veterans as our eyes and ears.

7 So anyone encountering a veteran is the right person to  
8 encounter a veteran. And they can use all of the resources  
9 that are available to anyone working with veterans, including  
10 the call center, but also our outreach staff. Their phone  
11 number and contact information is widely shared to be able  
12 to -- so that there is no wrong door.

13 The idea is that any place a veteran connects to  
14 services, any place is the right place. So it doesn't become  
15 bouncing a veteran from one place to another as they -- to get  
16 services. We want to engage that veteran at the moment they  
17 ask for care wherever they ask for care.

18 Q Mr. Kuhn, we're about to hand you what has been marked as  
19 Exhibit 1175.

20 Do you recognize this document?

21 A Yes, I do.

22 Q What is it?

23 A In One Team, we want to socialize a process across all our  
24 providers so everyone understands how to access resources and  
25 how that resource delivery system looks and works.

1           So, we are all truly operating from the same sheet of  
2 music. I guess, here is the sheet of music.

3           So we train on this. Part of our gatherings, whether in  
4 personal or virtual, relies on, for instance, our technical  
5 assistants, which helps us create these documents and develop  
6 policies, then, that change in response to real world data and  
7 experiences of our providers and input from veterans.

8 Q       So this is a document you use in your operations?

9 A       Yes.

10           MR. LOWENSTEIN: Your Honor, I'd move to admit  
11 Exhibit 1175 in evidence.

12           THE COURT: Received.

13           (Exhibit 1175 received into evidence.)

14 BY MR. LOWENSTEIN:

15 Q       Do you see where the figure on the bottom of the first  
16 page says access points?

17 A       Yes.

18 Q       And you will see it there on your screen highlighted?

19           And below that, there is a bulleted list of programs.  
20 Do you see that?

21 A       Yes.

22 Q       Are those all VA programs?

23 A       No. A number of them are not VA. LAHSA is not VA. VPAN  
24 is not VA. These, again, are members of our One Team, which we  
25 incorporate into our service delivery system.

1 Q And when you were talking earlier about, you know, there  
2 is no wrong program to enter into One Team's operations and set  
3 of programs, can you just explain how these non-VA entities  
4 would serve as access points for veterans?

5 A So they've become places where they can connect to  
6 services. They meet regularly with -- in One Team, our -- all  
7 of these different programs meet in case conferencing,  
8 generally, weekly, sometimes every two weeks, to discuss cases  
9 that they have taken in and then work together through all of  
10 these different programs to come up with a housing plan and  
11 figure out the resources and case assignments that make the  
12 most sense based on that veteran's needs.

13 So, these programs all work together from a meaningful,  
14 real way by sitting down to a table. And we break this out by  
15 SPA as well. LA is big. And there are a lot of people we  
16 serve.

17 So, where in some places, like Norman, Oklahoma, you  
18 could maybe sit down at a table and have everybody talk about  
19 veterans and come to a plan, we need to set this up in a way  
20 that is to scale for Los Angeles, which is more complicated.

21 Q So these non-VA entities will meet regularly with VA  
22 programs to discuss new cases, new veterans that they have  
23 engaged?

24 A New and existing cases.

25 Q So, if a veteran is, you know, engaged by, let's say, a

1 LAHSA outreach team, this One Team approach ensures that that  
2 veteran has access to the whole panoply of VA services?

3 A Yes. So, it might be helpful if I sort of start from  
4 where we take in a veteran. So a veteran comes into services.  
5 They are entered into HMIS. And they then get on what we call  
6 a by-name list or BNL for short. Through this by-name list,  
7 we're able to track every veteran we encounter throughout the  
8 entire homeless system.

9 That by-name list is used to then assign veterans to  
10 care and then track their progress.

11 Part of what we do through One Team is each week, we ask  
12 for every provider's capacity. We develop capacity reports.  
13 Again, this is something unique to Los Angeles.

14 So that way, we know every week who has capacity to take  
15 on additional veterans into services. And then that helps  
16 inform our case assignments.

17 I'm actually very excited to share that as of last  
18 month, we have been able to assign everybody on our by-name  
19 list to care with the exception of about 10 percent, which we  
20 have trouble contacting those veterans. Contact information is  
21 either incorrect or they are not responding to it. So  
22 90 percent of the people on that by-name list are assigned to  
23 care, which gives us a real chance to get those veterans  
24 housed.

25 We know the veterans who are homeless, at least the ones

1 who are on that by-name list, and we believe represent a bulk  
2 of the needs in LA County.

3 We hope that as we become more efficient at placing  
4 folks and the by-name list reduces, it will also be reflected  
5 in reduction of homelessness in Los Angeles.

6 And another thing we have also done in Los Angeles, I  
7 wanted to add, is that there are two different data systems  
8 that exist nationally. There is HMIS, which is what is used by  
9 most providers outside VA, and HOMES. Historically, that's  
10 created a bit of a challenge because the datasets don't talk to  
11 each other.

12 So we have assigned staff from VA to enter data into  
13 HMIS. So that way, we have some basic data that can go into  
14 the by-name list so there is a comprehensive by-name list based  
15 on HMIS.

16 Q And the by-name list that you just mentioned that you were  
17 able to assign a provider for every veteran that you were able  
18 to contact --

19 A Yes.

20 Q -- that's that comprehensive by-name list?

21 A Yes.

22 Q Approximately how many veterans are on that list?

23 A There are just over 1,400 for LA County.

24 Q Now, can you tell the Court what you have done with CTRS  
25 and A Bridge Home to improve engagement with unsheltered



1 veterans?

2 A So we wanted to, again -- I mentioned it on Friday --  
3 create more low barrier access to care.

4 When we contact a veteran or see a veteran who is in the  
5 street, we want to address the concerns that prevent them from  
6 coming in to shelter. And sometimes, that concern is they want  
7 privacy. They don't want to be told when to eat, necessarily,  
8 or when they can, you know, leave or come. They want a little  
9 bit more freedom.

10 And by giving veterans more choices, there is -- I  
11 should also share that, of course, there is an expectation  
12 every veteran that comes into these programs works with staff  
13 and there are services. These are not just shelters. But they  
14 work with program staff to get services and develop housing  
15 plans.

16 But we want to create a low enough barrier that veterans  
17 are willing to come into care. So CTRS, we increased the  
18 capacity from 120 to 135 in our regular program beds. We also  
19 increased the drop-in units. We had six; we went to 12. The  
20 drop-in units don't have the same requirements as the regular  
21 program.

22 We use the drop-in units so that way someone showing up  
23 late can get a bed. But, also, it's an opportunity for someone  
24 who is not willing to commit to services to perhaps test out or  
25 we can help try to help them test out whether they might want

1 to get engaged in services.

2 So those drop-in beds, they stay overnight. But if they  
3 want to enroll in the program, hopefully, they can then  
4 transfer from those drop-in beds into the regular CTRS program.

5 ABH was a program that initially was designed back in  
6 Mayor Garcetti's day. We have one of the sites for A Bridge  
7 Home. And it was a congregate shelter of 50 beds. And it was  
8 never fully utilized. Veterans didn't want to use it. It also  
9 had a screening process that made it difficult to access the  
10 same day.

11 So we changed the mission. We changed the provider.  
12 And in the contract now is a requirement that the provider  
13 gives same-day access to care and can only screen out people  
14 under exceptional circumstances. We also reconfigured the  
15 congregate space where before it was 50, it's now 32. But  
16 those 32 -- even though it's still a congregate space, people  
17 have individual bays, so there's a sense of privacy. So we  
18 reconfigured that space. And it's given us more capacity to  
19 meet the needs of what veterans say they want.

20 So that way, we see capacity in those programs is much  
21 higher, tends to run closer to full -- they are not full, but  
22 closer to full -- compared to Grant and Per Diem or other  
23 congregate facilities or other facilities with more rules where  
24 we routinely have 150-plus vacancies a night.

25 Q So that change that was made to A Bridge Home or as -- you

1 used ABH, to create more privacy, that was in response to  
2 veteran feedback that you were listening to?

3 A Yes.

4 Q And have you seen increased engagement?

5 A Oh, absolutely. We are running that program -- there is  
6 much for demand for that program than we saw for the previous  
7 iteration of it.

8 Q And are the drop-in beds at CTRS often utilized?

9 A I would say about 50 percent is typical. It comes higher  
10 and lower depending on the night. But about 50 percent for the  
11 drop-in beds.

12 Q And, in your opinion, have those been -- has the CTRS  
13 drop-in beds been a successful way of engaging veterans?

14 A We always want enough types of capacity that we can engage  
15 as many veterans as possible.

16 You know, this goes back to what I was saying earlier,  
17 that we can't think of homelessness as this, you know,  
18 monolithic beast. It's individuals. It's a bunch of veterans,  
19 all with different needs and willing to do different things.

20 So by offering as many pathways as possible, the idea is  
21 if you make the highway as wide as possible, if you will, we  
22 are going to have more traffic coming in, the ability to serve  
23 more people, and meet the needs of the veterans as they  
24 experience them, not as we want them to be.

25 Q So we have discussed a couple different types of shelter

1 there on the West LA Campus.

2 Let's think more holistically. In the GLA area, VA  
3 provides temporary housing dedicated to veterans, correct?

4 A Correct.

5 Q Can you just give us an overview of the different types of  
6 temporary housing that VA provides to veterans throughout GLA?

7 A There are, I would say, three basic types. Two are  
8 closely related. One which is the oldest program in the VA for  
9 veterans who are experiencing homelessness is the Grant and Per  
10 Diem program. That is described as transitional housing.  
11 Lengths of stay tend to be a little longer. They also are more  
12 focused on providing services.

13 There are different models within Grant and Per Diem.  
14 They are moving more and more towards same-day access. And we  
15 have certainly been -- delivered our expectations to our local  
16 Grant and Per Diem providers that they offer same-day access.  
17 One of the things that has changed in local -- in Los Angeles  
18 is before we had no same-day access beds in Grant and Per Diem.  
19 Now we have 81. So that program is evolving.

20 The second program, which, I guess, we could think of  
21 two pieces, is runner to Healthcare for Homeless Veterans.  
22 There is the CTRS program, which is part of Healthcare for  
23 Homeless Veterans. It's the only -- there is only one in the  
24 country. It's in Los Angeles. Certainly, we would -- we hope  
25 to see more. There may be more. But, for now, it's the only

1 one in the country.

2 And the second are Contract Residential Services, known  
3 as CRS, within Healthcare for Homeless Veterans. Those --  
4 while CTRS is run directly by VA, although we do have other  
5 supports there beyond VA, the contract programs, the CRS  
6 programs, are all done through contracts with nonprofit  
7 providers like PATH, VOA, so forth.

8 Q So, collectively, the temporary housing programs that you  
9 just mentioned, approximately how many units are spread  
10 throughout GLA?

11 A Throughout our catchment area, we have somewhere  
12 between -- we have about 900, 950 beds throughout our catchment  
13 area. Approximately 300 are on the West LA Campus, if you  
14 combine all of those different housing types.

15 Q And do you have a ballpark of approximately how many  
16 vacancies there typically are from month to month?

17 A On a typical night, we have somewhere north of 150  
18 vacancies, sometimes up to 200 vacancies.

19 Q And so the majority of temporary housing in the GLA  
20 catchment area is in the broader community, not on the West LA  
21 Campus?

22 A Right. About two-thirds in the broader community.

23 THE COURT: And do you pay, then, a flat rate  
24 whether the beds are occupied or not? Another way of asking  
25 that is, if we have a vacancy rate of about 150 to 200, are you

1 paying for those non-occupied beds?

2 THE WITNESS: No.

3 THE COURT: Okay. So you pay because the bed is  
4 occupied?

5 THE WITNESS: Correct.

6 THE COURT: Thank you very much.

7 BY MR. LOWENSTEIN:

8 Q Now, why have temporary housing spread throughout the  
9 Greater Los Angeles area rather than condensed in just maybe a  
10 couple of specific areas or just on the West LA Campus?

11 A We need it throughout our catchment area because, back to  
12 that theme of offering veterans what they want and in order to  
13 engage them.

14 There are many veterans who do not want to come to West  
15 LA or Los Angeles, and we constantly have to reassess the  
16 distribution of our resources to meet needs. And I will give  
17 you an example we are looking at now.

18 Lancaster is a growing area. And we are -- now have  
19 a -- very soon have a solicitation going out to add contract  
20 beds. And one of the areas -- we can't preselect, so I can't  
21 tell you we're going to put beds in Lancaster, but it is an  
22 area that will be considered in the next round of funding. We  
23 need to always be responsive to the demand. We have to look at  
24 the data, and we have to let the data drive our decisions.

25 Q And why is having temporary housing proximate an important

1 piece of creating an engagement?

2 A Because, using my Lancaster example, veterans who live in  
3 Lancaster or even are housed in Lancaster often refuse to come  
4 down to Los Angeles.

5 We also have the reality of those veterans -- to get  
6 access to services, if we want an unsheltered veteran to get  
7 into a shelter, it's a lot easier to get them into a shelter if  
8 it's close by. A veteran told, well, we will give you shelter  
9 two hours away, they are less likely to take it. It's harder  
10 to make the arrangements as well to get them into shelter. So  
11 we want to create a framework of services where we have the  
12 capacity and can deliver what the veteran wants.

13 So simply capacity alone, just looking at numbers, is  
14 only part of the story. The other part is knowing and trying  
15 to address what the veteran is going to be willing to accept.

16 THE COURT: Just one moment, please.

17 Counsel, thank you.

18 MR. LOWENSTEIN: Thank you, Your Honor.

19 BY MR. LOWENSTEIN:

20 Q Now, you have used a term in your testimony, low barrier.  
21 What is low barrier?

22 A Low barrier tends to create conditions that don't limit  
23 what a veteran might consider objectionable to accept services.

24 So that might mean not having curfews. That might mean  
25 a certain tolerance for drug use -- not that we necessarily

1 accept drug use, but we're not going to discharge you  
2 immediately because you use drugs.

3 It allows for a limited engagement in services maybe  
4 initially. So we're trying to meet the veteran where they are  
5 and then build on that.

6 Q Historically, were some of the requirements you just  
7 listed, were those barriers to shelter?

8 A Oh, absolutely. Historically -- well, when I -- years  
9 ago, when I first ran homeless services in New Jersey and I ran  
10 a domiciliary, if you used drugs, you were discharged from the  
11 program, like no ifs, ands or buts. That was it. So that was  
12 a treatment first approach, which was standard in those days.  
13 Housing first has really made us reconsider those approaches.  
14 And it's firmly grounded in data and evidence.

15 Q And under your leadership, is more temporary housing going  
16 towards low barrier?

17 A Yes.

18 Q Is it possible for an unsheltered veteran to go straight  
19 into permanent housing and skip temporary housing?

20 A So, traditionally, no, because we haven't had those kinds  
21 of housing resources.

22 However, we do plan to pilot, as early as this month, an  
23 initiative that will allow us to do that by taking veterans  
24 working with -- obviously, have to have landlords willing to do  
25 this with you, but willing to take a veteran directly off the



1 street and have them go into permanent housing. The -- I guess  
2 the zenith of housing first. Why this is important? Again,  
3 it's another pathway.

4           There are veterans who are very difficult to engage.  
5 And outreach teams spend a lot of time engaging them. They  
6 finally develop a trusting relationship. And that veteran will  
7 turn down emergency housing. He will turn it down because  
8 fear; they don't want to start with someone new. They don't  
9 want to be in a group environment. They don't want to be  
10 around a lot of other people. There are many reasons.

11           So for that group, we want to create a pathway to  
12 permanent housing that meets those specific needs. And if we  
13 could find somebody in the street who is willing to accept  
14 permanent housing who before we couldn't get to take that step  
15 because of the necessary -- the necessity to go through  
16 emergency housing, well, we need to develop that pathway. So  
17 we are doing that.

18           And I hope this month we will have our first instances  
19 of people being placed directly from the street into permanent  
20 housing. We have already begun to socialize that.

21 Q       Now, are there some veterans who would prefer to be in  
22 temporary housing rather than permanent housing, at least for a  
23 period?

24 A       Yes. There are certainly options available in our Grant  
25 and Per Diem program to do that. For some veterans, they don't

1 want to be alone. The idea of being in their own apartment --  
2 especially, you know, if you've had sort of a community where  
3 you have been in encampment and at least there are some  
4 connections, and, now, all of a sudden, you are by yourself in  
5 an apartment, is not appealing, or there are veterans who have  
6 specific care needs that will be better served in a different  
7 environment like Grant and Per Diem, that might be a better  
8 option for them, so we look to meet those needs as well.

9 So Housing First doesn't mean you are prevented from  
10 seeking treatment options or other supportive options that are  
11 more appropriate for the individual.

12 Q And what are some of the treatment options that are  
13 provided in Grant and Per Diem?

14 A In Grant and Per Diem it's a more supportive environment.  
15 Typically the kinds of supports are for sobriety, in addition  
16 to Grant and Per Diem we have a domiciliary program at the West  
17 LA Campus, which provides intensive treatment and  
18 rehabilitation as well. So there are a number of service  
19 options available to veterans who can take advantage of that  
20 prior to getting permanent housing or, for the domiciliary,  
21 even after they get permanent housing you can of course go to a  
22 domiciliary and get healthcare.

23 Q Are veterans in temporary housing able to get connected to  
24 services like mental healthcare?

25 A So for Grant and Per Diem, and this goes back to the

1 example shared earlier, Grant and Per Diem can serve other than  
2 honorable veterans, some of those veterans are not going to be  
3 able to be eligible for VHA healthcare, so those veterans are  
4 connected to providers in the community that would be able to  
5 provide those services, and that Grant and Per Diem provider is  
6 required to make those connections. There are other veterans,  
7 of course, who are eligible for those services, VHA healthcare,  
8 who would naturally get those services.

9 Q Would that be a priority of VA's to get veterans in  
10 temporary housing connected to --

11 A It must happen. That's a requirement for every provider  
12 that we work with must attend to the physical health and mental  
13 health needs of their participants.

14 Q Typically how long would a veteran stay in temporary  
15 housing here in Greater Los Angeles?

16 A The statutory limit in Grant and Per Diem is two years, so  
17 typically the average length of stay is considerably shorter.  
18 Six months is about norm for transitional housing. For  
19 emergency housing we like to keep it to 90 days but there are  
20 significant variants in both programs from the norm.

21 We need to be able to work with the veteran based on  
22 their needs, so although the desire is 90 days if you have  
23 health issues that are going on, if an apartment you thought  
24 you had fell through, if there are other complications it can  
25 take longer.

1           So, we really need to vary it based on what is going on  
2 with the veteran. But there is a requirement that veterans are  
3 working towards permanent housing.

4           So, any veteran in these programs, if they refuse to  
5 participate in services or they refuse to work towards  
6 permanent housing, ultimately they will be offered some sort of  
7 congregate shelter, they will be ultimately discharged if they  
8 refuse all permanent housing options because the intent is end  
9 their homelessness, and place them in permanent housing, none  
10 of those things are happening if they're refusing services and  
11 staying in emergency housing in our programs.

12 Q       So, you mentioned earlier a housing plan that VA wants to  
13 get veterans on?

14           When a veteran comes into temporary housing, is that  
15 when VA tries to get them on a housing plan?

16 A       We start those conversations from the very beginning. The  
17 initial goal is always to start talking about the housing plan  
18 as soon as possible, and developing a housing plan tailored to  
19 that individual veteran's interest. That includes some element  
20 of choice, it's not just the VA saying, "Here is the next  
21 opening, this is where you are going," but "here are some  
22 options," trying to understand from the veteran what their  
23 interest is, perhaps making sure that if the veteran wants to  
24 go to multiple places we work that out with transportation  
25 support or other assistance so that way that veteran has

1 choices and then hopefully gets to permanent housing.

2 Q Once a veteran is sheltered, off the streets, set up with  
3 a housing plan, how common is it that that veteran will make it  
4 to permanent housing here in LA?

5 A Generally the rate of program entry and placement and  
6 permanent housing is about 70 percent. It could vary, it's  
7 gone up and down to, you know, mid-70s, but about 70.

8 Q Now you've said that the goal is permanent housing?

9 A Yes.

10 Q Let's talk about permanent housing.

11 What does permanent housing offer a veteran that  
12 temporary forms of housing don't?

13 A Well, we all -- I would like to think almost all of us  
14 when we come home there is a certain sense of relief, you close  
15 the door, there is privacy. There is control over your  
16 environment.

17 When you have lease rights you can close the door and  
18 whoever comes in it's up to you, you control your space.

19 When you are in temporary housing you don't have that.  
20 You have people knocking on your door potentially whenever they  
21 see fit. They can enter, you don't have the right to keep  
22 whatever you want in your unit, you are subject essentially to  
23 search, it's not -- it's not your castle. People want homes  
24 because they want the dignity, they want the privacy, they want  
25 the control and the independence that goes along with it.

1 Q Does permanent housing improve health outcomes?

2 A There is clear relationships. It's sort of in the other  
3 direction that prove it. People who are on the street have  
4 much higher mortality rates, much higher rates of healthcare  
5 complications, the mental health crisis relationship to trauma  
6 and homelessness is well established, so yes, there are very  
7 severe consequences to health and longevity for people who are  
8 homeless.

9 Q And is that a concept that is somewhat inherent in this  
10 principle you have used, Housing First?

11 A Housing is healthcare.

12 Q Can you just describe what is the Housing First principle?

13 A Housing First is based on -- if you will an old concept, a  
14 relatively old psychological concept that Abraham Maslow did a  
15 nice job describing in the hierarchy of needs, and that is at  
16 the base level of needs is the physiological need, you need to  
17 be able to breathe, you need to be able to eat and sleep. If  
18 you can't attend to the needs, those basic needs, your brain  
19 doesn't work properly. You cannot start talking about how you  
20 are going to go for a job interview and ace the job interview  
21 or how you are going to get treatment for a complex mental  
22 health disorder. None of those things are going to work if you  
23 are starving, if you are not sleeping, if you are not attending  
24 to basic needs.

25 Housing First says let's attend to the basic needs, free

1 up that person's capacity so they can attend to those high  
2 order of needs, and ultimately Housing First is evidence based.  
3 It has been borne out by the data.

4 Q And is Housing First a principle that influences how VA  
5 administers its homeless programs in here?

6 A It's a guiding program nationally of how the VA  
7 administers programs to the homeless.

8 Q Are there any major hurdles to securing permanent housing  
9 for homeless veterans in the Greater Los Angeles area?

10 A There are significant headwinds nationwide. The  
11 affordable housing crisis has been well documented, we know  
12 across the country that there are not nearly enough affordable  
13 housing units for the number of people who need affordable  
14 housing and that problem is on steroids in Los Angeles. And in  
15 California as a whole. California is the most expensive state  
16 for housing with the fewest number of affordable housing units  
17 per capita for demand of any state in the country. There is  
18 roughly -- for every -- roughly for every hundred units that  
19 are needed we have 30.

20 So there are very stiff headwinds in California, the  
21 affordability is a huge issue.

22 Q At a high level what is VA's role in increasing the  
23 affordability housing stock available to homeless veterans?

24 A If our goal is to end homelessness we have to attend to  
25 affordability.

1           There is no way to end homelessness without paying  
2 attention to these basic macroeconomic issues, so we have a  
3 responsibility.

4 Q       And can you describe what programs are invested in  
5 increasing the affordable housing stock?

6 A       The two major programs that VA has that work to find and  
7 finance permanent housing are HUD-VASH and SSVF.

8 Q       Where does VA seek to increase permanent housing  
9 opportunities for veterans in the Greater Los Angeles area?

10 A       So certainly the One Team efforts by coordinating services  
11 is part of that, making sure that every possible resource is  
12 identified, that we exploit all capacity to do that.

13           We also make sure we try to get flexibility in rules  
14 where we can, so back in I think it was in March of last year  
15 we had meetings with our local public housing authorities to  
16 try to get rid of paperwork demands, for instance, on vouchers  
17 because a lot of these paperwork demands end up being barriers  
18 to getting Section 8 vouchers, and through that advocacy we  
19 were able to help HUD basically provide waivers for a lot of  
20 these paperwork demands.

21           So there are a number of things we can do to try to  
22 increase housing capacity, I mentioned a couple of things I did  
23 in SSVF, and then of course partnering to work to develop the  
24 housing stock more directly, like through bulk leasing.

25           THE COURT: Just a moment.



1 Counsel?

2 MR. LOWENSTEIN: Thank you, Your Honor.

3 BY MR. LOWENSTEIN:

4 Q Is VA trying to create or increase that affordable housing  
5 stock throughout the Greater Los Angeles area?

6 A Yes.

7 Q And does that include the campus?

8 A Yes. So the campus is certainly an important feature of  
9 our ability to place veterans in housing. We have -- the  
10 grounds are -- there is a lot of undeveloped area on the  
11 grounds and the opportunity to build housing is being taken  
12 advantage of, but we also need to build housing throughout the  
13 community. It cannot just be in West LA.

14 Q How do veterans benefit from VA providing permanent  
15 housing opportunities throughout the broader community?

16 A Well, I have talked repeatedly about providing veterans  
17 with choice, and creating pathways to housing that meet their  
18 needs.

19 Many veterans don't want to live in West LA, they don't  
20 want to live in a hospital, they want to live in the community.  
21 They want to be a part of something different, maybe they have  
22 local connections to different areas but, you know, there are  
23 real concerns for a lot of veterans about living on the  
24 hospital grounds.

25 But for many veterans, it's something they want, so we

1 want to be able to offer both.

2 Q About how many formerly homeless veterans are housed  
3 throughout the Greater Los Angeles area with HUD-VASH  
4 assistance?

5 A With just HUD-VASH I think it's something like 5,300.

6 Q You said, "just HUD-VASH," are there others?

7 A There are thousands that have been placed by -- roughly  
8 there is the same number of people placed by HUD-VASH has been  
9 placed by SSVF. So -- and SSVF, because of the short-term  
10 nature of the services, when you graduate out of SSVF they're  
11 not tracking you any longer.

12 HUD-VASH people tend to stay in a very long time,  
13 although there is a graduation rate. So right now there is  
14 about 5,300 people in -- getting active services in HUD-VASH.  
15 There are thousands who have graduated out of it. There are  
16 also many thousands who have been placed and served by SSVF and  
17 placed in permanent housing.

18 Q Now, I know you addressed this on Friday, but could you  
19 remind us about how many are housed through the use of  
20 project-based vouchers?

21 A So, we have 1,722 project-based vouchers. Most of which  
22 are filled are about 90 percent occupancy.

23 Q So approximately how many veterans would be that are  
24 currently housed with?

25 A .9 times 1,722, anyone got a quick math? 15-something.

1 Q Great, thank you. And how many veterans are housed with  
2 the use of tenant-based voucher?

3 A The remainder, so that's over 3,000.

4 Q And I think this is something that you just briefly  
5 addressed with counsel on Friday, approximately what is the  
6 utilization rate of tenant-based vouchers?

7 A It's low. We're in the 50s. There are multiple reasons  
8 for that. I think the two biggest ones is the housing market  
9 in LA is such that landlords don't need to wait for the  
10 HUD-VASH process. This is one of the reasons why we moved  
11 towards intentional bridging, but they don't have to wait for  
12 the HUD-VASH process, they can just turn around and flip it to  
13 somebody with very brief periods of vacancies. They also can  
14 get higher rents often than they can get out of HUD-VASH, and,  
15 finally, there is just flat-out discrimination.

16 When you are a landlord, even though it's illegal, and  
17 the Fair Housing Act and the way it's applied in LA, it  
18 prevents landlords from discriminating against voucher holders,  
19 landlords find ways of doing it and it's very hard to enforce  
20 action to prevent it.

21 Q Is discrimination against Section 8 voucher holders a  
22 pervasive problem in LA?

23 A It's pervasive nationally.

24 Q Is that a longstanding problem?

25 A Yes. In fact, the L.A. Times reported that 50 percent of

1 all vouchers is general population now, not just VA.

2 50 percent of all vouchers are returned unused.

3 THE COURT: Just one moment so the court reporter  
4 can rest for a moment.

5 Thank you, counsel, please resume.

6 MR. LOWENSTEIN: Thank you, Your Honor.

7 BY MR. LOWENSTEIN:

8 Q Now, on Friday you testified that VA is employing an  
9 initiative to overcome some of those barriers to tenant-based  
10 housing utilization and you called that "bulk leasing." That  
11 is unlikely to be a familiar term to most here. In basic terms  
12 could you just describe what is bulk leasing?

13 A Bulk leasing is composed of two different programs. One  
14 is known as master leasing, the other is described as RPSS,  
15 both use different approaches to achieve the same aim.

16 The aim is the landlord of a building or a portion of  
17 the building says, "You control these units, I will not screen  
18 or be involved in any way in the decision as to who enters  
19 them, you control them." And in return, through master  
20 leasing, the landlord is promised guaranteed rent with no  
21 vacancies, and RPSS's are given various incentives and the  
22 landlord is able then to fill these units at an advantage to  
23 them financially with no marketing costs, they don't have to  
24 manage the population or -- the only thing for them to do is  
25 make sure the building stands.

1           So from a financial standpoint, it's a great deal for  
2 the landlord, which is one of our customers, right, if we want  
3 a robust housing stock they are one of our customers.

4           For us it means, especially with tenant-based housing,  
5 where we have very low utilization rate where we have to go  
6 traditionally with a veteran apartment by apartment, one by  
7 one, a very time-consuming process where veterans often get  
8 rejected, we have now a bulk buildings we know we can get a  
9 veteran into, that that whole process is short-circuited and we  
10 look to get these buildings in areas we want to -- we would  
11 live in.

12           So we want buildings that, as Your Honor pointed out,  
13 many of the project-based buildings historically have been  
14 located in areas that are not so great.

15           We want them in good areas and increase the housing  
16 stock and options in good areas.

17           THE COURT: And with these -- or the bulk housing  
18 concept, whether it's the City or the VA, aren't you going to,  
19 once again, be in the position of buying or supporting the  
20 lower-cost buildings which in turn are going to end up  
21 continuing to centralize in the historic 110 corridor and Skid  
22 Row?

23           THE WITNESS: No, those are the very buildings we  
24 don't want.

25           THE COURT: Show me that the building's on west side

1 of LA.

2 THE WITNESS: I can show you the two buildings we  
3 just got.

4 THE COURT: I know the two buildings. But look down  
5 at the west side of LA by comparison, from Malibu to Palos  
6 Verdes and besides those two -- and I think they're minimal  
7 buildings, quite frankly. You show me why there hadn't been a  
8 historic and continuing push to place the minority population  
9 specifically in that 110 corridor. I'm going to charge you on  
10 that now.

11 THE WITNESS: Your Honor, I don't disagree with you.

12 THE COURT: Okay. Fine. Thank you, counsel.

13 BY MR. LOWENSTEIN:

14 Q Now, VA's implementation of this bulk leasing initiative  
15 is a relatively new initiative; is that correct?

16 A That's correct.

17 Q When did you first consider employing this concept in Los  
18 Angeles?

19 A Almost immediately.

20 THE COURT: By the way, then places our minority  
21 population, and historically, this containment policy, further  
22 away from probably the best services available which is the  
23 West LA Campus hospital. You don't have it in Lancaster, I  
24 will guarantee you that. Right?

25 THE WITNESS: Well, we have --

1 THE COURT: Well, later on, I may be relying upon  
2 you. I want you to think about that. You don't have to answer  
3 that right now. Because I find you very helpful, frankly.

4 All right. Thank you, counsel.

5 You think about that for a while.

6 BY MR. LOWENSTEIN:

7 Q Now, you said almost immediately you started to work on  
8 employing bulk leasing as a concept here in LA. What do you  
9 mean? Almost immediately after you got here?

10 A Yes. So we had to increase the housing stock. Not  
11 everything I'm going to try is going to work, so I try multiple  
12 things at a time.

13 You heard on Friday about the modular housing, which  
14 didn't work.

15 We started on bulk leasing, initially, trying to see if  
16 the VA could fund it. But unfortunately, there are statutory  
17 limits in the same way. We can't build our own housing. We  
18 can't do bulk leasing directly. But I found we could do it  
19 without partnership in One Team.

20 So, the County was willing to -- able to fund the  
21 leasing portion -- those costs associated with the bulk  
22 leasing, and in return, they leverage and we leverage -- we  
23 leverage their resources and they leverage our services. So we  
24 come in, we tell the County, hey, you don't have to pay for any  
25 services, we will cover that, plus we can offer incentives to

1 landlords, which will reduce some of your master leasing costs.  
2 So we were able to work out a partnership that is going to  
3 continue to produce more buildings.

4 So we have two that we have already done. We have more  
5 that we're negotiating, and I hope will open shortly.

6 Q Okay. Let's just pause a little bit on that process.

7 You said first you considered whether or not VA could  
8 directly lease these units; is that right?

9 A Yes.

10 Q And that didn't pan out?

11 A Correct.

12 Q When did you approach the County as a potential partner in  
13 this endeavor?

14 A It was last year sometime. I'm guessing summer.

15 Q So summer of 2023?

16 A Something like that, yes.

17 Q And it's the County that pays for the lease of these  
18 buildings?

19 A They pay the guarantee. They pay the incentives.

20 THE COURT: Just a moment. It's too fast. Would  
21 you repeat that slowly.

22 THE WITNESS: Yes. They pay for the guarantee, and  
23 they pay for the incentives. In the case of mass releasing you  
24 hope they never pay the guarantee. If you can keep units  
25 filled, the County never pays. So it's almost like when the



1 government guarantees a loan, if you will.

2 THE COURT: So in short that goes back to my prior  
3 question. The County, then, in a sense, pays a flat rate --  
4 for want of a better word -- but you only pay per bed space  
5 occupied.

6 THE WITNESS: Exactly.

7 THE COURT: Exactly, right? Let me repeat that so  
8 we're both -- County picks up the bill, for let's say  
9 200 units. But in the VA, we're able to only pay for the bed  
10 space that is occupied. We don't have to pick up the flat rate  
11 for 50 veterans inside that building.

12 THE WITNESS: Right.

13 THE COURT: Okay.

14 THE WITNESS: Hopefully the County won't pay the  
15 200 units because we filled them all. Yes, they are on the  
16 hook.

17 THE COURT: Fair enough. Okay. I got it.

18 BY MR. LOWENSTEIN:

19 Q And so, VA's role in this is providing services to the  
20 veterans who are going to be housed in the bulk-leased units?

21 A Services and the rent. So either through a voucher or  
22 through SSVF, there is also an opportunity with SSVF to furnish  
23 those units, so SSVF can pick that up. And there is some  
24 incentive payments that SSVF can also pay.

25 Q So we didn't unpack that --

1 THE COURT: And I'm chuckling, unrelated to you. So  
2 if the County was telling me now, unrelated to this lawsuit  
3 which you are in, that they are paying per bed space, there  
4 might be a disagreement with the leases that you are aware of,  
5 or the interactions with County that you are aware of. They  
6 are still paying a bulk, aren't they?

7 THE WITNESS: So, we work very closely with the  
8 County.

9 THE COURT: I know that. That is not my question.  
10 I know you work very closely.

11 They are still paying -- I'm going to call bulk unit --  
12 they are still paying across the board for 200 spaces,  
13 hypothetically.

14 THE WITNESS: Hopefully not. That means their  
15 program is not working.

16 THE COURT: Never mind. All right.

17 BY MR. LOWENSTEIN:

18 Q And this is something that I don't think you fully  
19 unpacked yet --

20 THE COURT: This has nothing to do with you. I'm  
21 just -- in other lawsuits and in other endeavors, I might be  
22 getting different representations. This has nothing to do with  
23 this lawsuit. I am just kind of chuckling out loud.

24 BY MR. LOWENSTEIN:

25 Q Can you explain RPSS a little bit more. You talk about

1 "various incentives," I think is the term you used. What are  
2 those incentives?

3 A They get -- the landlord will get incentives based on  
4 occupancy and on making certain units available to the third  
5 party.

6 Q And those are monetary?

7 A Yes. Paid out monthly.

8 Q Now on Friday, I think you talked about this, but -- and  
9 just this morning, you currently have two different buildings  
10 that have been leased through this bulk leasing process; is  
11 that right?

12 A Yes.

13 Q One is in Burbank?

14 A Yes.

15 Q And that is 38 units?

16 A Yes.

17 Q And one is in West Hollywood?

18 A Yes.

19 Q And that is 13 units?

20 A Correct.

21 Q And those are attractive communities for veterans; is that  
22 fair to say?

23 A Very attractive.

24 Q Now, are all of those units considered permanent  
25 supportive housing?

1 A They are.

2 Q And that would mean that it's the same type of housing,  
3 generally, that is being developed on the West LA Campus?

4 A Yes.

5 Q Or rather than on the campus, it's integrated into the  
6 broader community?

7 A That's correct.

8 Q And bulk leasing utilizes existing infrastructure and  
9 buildings in the community; is that correct?

10 A That's correct.

11 THE COURT: I apologize. Let me correct one thing I  
12 said to you. I said the County, but it includes the County and  
13 the City when I was referencing some of the bulk examples.

14 All right. Counsel.

15 BY MR. LOWENSTEIN:

16 Q When did the West Hollywood and Burbank locations open?

17 A They opened in June.

18 Q And are veterans currently housed in those units?

19 A Those buildings are filled.

20 Q Full capacity -- they have taken up the full capacity of  
21 those two buildings?

22 A Yes. I mean, unless for whatever reason somebody left  
23 today, yes, they are filled.

24 Q Is VA currently working on opening more units through bulk  
25 leasing?

1 A We have -- we are currently in negotiation for multiple  
2 buildings.

3 THE COURT: By the way, I don't want to know those  
4 locations in case you are getting any pushback. I don't need a  
5 record of where those are.

6 THE WITNESS: Thank you. It could also complicate  
7 our negotiations.

8 BY MR. LOWENSTEIN:

9 Q But more units could come online in the next couple of  
10 months?

11 A I fully expect we will have more units.

12 Q How many do you reasonably expect?

13 A In the next few months, reasonably over 100.

14 Q And through this bulk leasing initiative, how many could  
15 be possible?

16 A It's -- I think this is gaining traction where before  
17 there was not a great deal of receptiveness about doing that  
18 for veterans. We're seeing increased receptiveness. And we  
19 have actually been offered multiple projects, maybe even beyond  
20 our capacity.

21 So I am hopeful this is going to be a regular stream of  
22 permanent housing for veterans, not just a one-off that is  
23 going to give us a few buildings, but that is something that is  
24 going to be ongoing.

25 Q So I would like to just change gears a little bit, and I

1 would like to discuss briefly VA's referral rate which I know  
2 you explored with counsel on Friday.

3 Do you recall being asked by counsel about the rate at  
4 which VA was referring veterans to public housing authorities  
5 for HUD-VASH vouchers?

6 A I do.

7 Q And at one point, counsel cited a statistic that the  
8 average weekly referral rate from VA to HACLA in 2023 was four  
9 referrals.

10 Do you recall that statistic?

11 A I do.

12 Q How many referrals is VA making to HACLA on average per  
13 week, currently?

14 A In 2024, that number is north of 13 per week. So more  
15 than triple of what it was in 2023.

16 And HACLA is only one of the PHAs we work with. All  
17 told, our referral rate in 2024, compared to 2023, is up by a  
18 third.

19 THE COURT: Is that the 13 per week?

20 THE WITNESS: 13 is just HACLA. For -- if you  
21 combine HACLA with LACTA, the other big agency, we're averaging  
22 over 100 per month. That is not all of the PHAs, it's just the  
23 biggest. We still want to get it higher, but it's a  
24 significant improvement.

25 BY MR. LOWENSTEIN:

1 Q In that year's time, what did your team do to increase  
2 that referral rate?

3 A Part of it is the PHA, they are part of the One Team. So  
4 we work with them in a much more dynamic, collaborative way.

5 Also, because of One Team, we have many more referrals.  
6 We're training our SSVF grantees to make referrals directly, so  
7 it's not limited to HUD-VASH staff, trying to eliminate that  
8 chokepoint so there could be a greater flow. So we're  
9 continuing to make more and more steps and train more and more  
10 grantees to -- ultimately, all of the SSVF grantees will be  
11 able to make these referrals.

12 Q Well, let's focus a bit and talk about the campus.

13 How many units of permanent supportive housing does the  
14 master plan of 2022 plan for the campus?

15 A 1,200.

16 Q And that's still VA's plan today?

17 A That is the current plan.

18 Q Is that number set in stone? Is that going to be the  
19 final number?

20 A No. And that's just permanent supportive housing so that  
21 number is the number of units of permanent supportive housing.

22 Q So, you say no. Will VA get to 1,200 and evaluate it  
23 then, or is it going to evaluate whether to put more than 1,200  
24 permanent supportive housing?

25 A Exactly. We will continue to evaluate. We will make

1 decisions based on the need and the data. There is nothing  
2 magic about 1,200. That is the floor.

3 Q Now, you just mentioned you will assess the need and the  
4 data. What are some variables over the next several years that  
5 would be relevant to that future assessment of need?

6 A Well, first, as I mentioned earlier, permanent supportive  
7 housing is a very specific type of housing designed for a  
8 certain subgroup of homeless persons.

9 It's driven by the needs of disabled veterans for  
10 certain types of housing.

11 If we want to solve homelessness, we -- and in Los  
12 Angeles, it's about half of the population may need permanent  
13 supportive housing; nationally, it's about a quarter -- if we  
14 want to solve homelessness, we need to increase affordable  
15 housing. That is a bigger pot. As I mentioned earlier, there  
16 is about 30 units of affordable housing for every 100 that are  
17 needed.

18 So, it's certainly important to develop permanent  
19 supportive housing, but just or maybe more important is  
20 developing affordable housing. So that's one of the data  
21 points.

22 The other data point we have to look at is, of course,  
23 what is the demand, what are the needs, and where are the  
24 needs.

25 Q Could you expound on that? What do you mean by "where are



1 the needs"?

2 A Where do veterans want to live.

3 We have veterans who want to live in all sorts of  
4 locations. I think there is a danger in messaging that you are  
5 going to live -- that this is the place to live if you are a  
6 homeless veteran is the West LA Campus. That might be good for  
7 a lot of folks, but we want to be careful not to create an --  
8 even if it's unintentional -- a situation where all veterans  
9 are expected to live on the West LA Campus and not have choices  
10 outside.

11 Right now, there is limited funding because the way the  
12 low income --I have to back up a little bit here.

13 So, the way these products are funded is through  
14 low-income housing tax credits. Those things are competitive.  
15 There is a limited amount. And that is what drives the  
16 development of housing. That's what pays for a lot of it  
17 outside of the bulk leasing, by the way. So, that's how we  
18 develop most of the permanent supportive housing. If more and  
19 more of the tax credits go to stuff on the campus, that means  
20 there is less and less available in the community. So we need  
21 to keep that in mind in terms of dispersing housing so it meets  
22 the broader need and offers choices and different pathways to  
23 veterans as many practical options as possible. So one of the  
24 options absolutely should be West LA, but it also needs to have  
25 -- we also need to have resources in other areas as well.

1 Q So if I heard you right, the more housing that would be  
2 developed on the campus would mean less housing developed in  
3 the community?

4 A For permanent supportive housing, that is the way the math  
5 works now, yes.

6 THE COURT: Based upon the present tax credit model?

7 THE WITNESS: Correct. Based on current policy.

8 BY MR. LOWENSTEIN:

9 Q Would the number of homeless veterans in LA be a relevant  
10 variable in that future assessment?

11 A Of course.

12 Q And so would the overall size of the affordable housing  
13 stock?

14 A Yes. And we also want to be able to develop a sufficient  
15 -- affordable housing is the root cause of homelessness.

16 You know, we didn't see encampments like we see now in  
17 1980. And I would venture to say, you know, we probably had  
18 just as much substance abuse, we had just as much mental health  
19 disorders. What has changed is affordable housing doesn't  
20 exist in the numbers that we had then.

21 So we need to build our affordable housing stock. Even  
22 as the numbers of homelessness drop, if we want to prevent  
23 future outbreaks or be able to address them quickly, we want to  
24 continue to build the affordable -- and I differentiate that  
25 from permanent supportive housing -- we want to build the

1 affordable housing stock.

2 Q For the campus -- for the 1,200 permanent supportive  
3 housing units that are intended for the campus, are any of the  
4 buildings intended to be or future buildings intended to be  
5 dedicated to particular subgroups of veterans?

6 A Building 210. We briefly mentioned that on Friday which  
7 is about to start construction. A significant portion of that  
8 -- I think it is supposed to be 38 units and 30 units --

9 THE COURT: Show me 210 again.

10 THE WITNESS: It's right here. Part of the  
11 challenge --

12 THE COURT: Point to it one more time. And 209.

13 THE WITNESS: It's a little confusing.

14 THE COURT: Here's my question. Point to 209. It's  
15 just above it? There. Closest to the --

16 THE WITNESS: 209 is --

17 THE COURT: No, no. Go up. You just touched 209.  
18 Put your finger on the map someplace. Right there. That is  
19 209. And above is 208.

20 THE WITNESS: And then 205.

21 THE COURT: Okay. Now, go down and look at the  
22 labeling for 210. What does it say?

23 THE WITNESS: Yeah. The labeling is -- it says 790  
24 Bonsall. This also says Bonsall. There are two sets of  
25 numbers.

1 THE COURT: Just for my record, I need somebody to  
2 understand what we're doing. Eventually.

3 THE WITNESS: There are two sets of numbers.

4 THE COURT: Okay. Thank you. I appreciate that.

5 BY MR. LOWENSTEIN:

6 Q Now, you were just mentioning Building 210 in response to  
7 my question about whether or not some buildings on the campus  
8 will be dedicated to particular subgroups of veterans.

9 A Uh-huh.

10 Q Could you say more about Building 210?

11 A So Building 210 is a development that should start  
12 construction, we hope, in the next few months. It is designed  
13 to have 30 of its 38 units, I believe that's the number, set  
14 aside for women.

15 THE COURT: 30 for women?

16 THE WITNESS: Yes.

17 THE COURT: How many for men?

18 THE WITNESS: Eight units remaining, which are  
19 unassigned.

20 THE COURT: How many for men?

21 THE WITNESS: Could be 8.

22 THE COURT: 80?

23 THE WITNESS: Eight.

24 THE COURT: Eight for men, 30 for women?

25 THE WITNESS: Yes.

1 THE COURT: Okay.

2 THE WITNESS: Now, for all of these buildings, women  
3 can -- are not excluded --

4 THE COURT: I see. Counsel.

5 BY MR. LOWENSTEIN:

6 Q And of the 1,200 permanent supportive housing units, just  
7 generally, about how many will be dedicated for single men who  
8 are disabled or have substance abuse issues?

9 A They are all open to that population. We have a number of  
10 units also that are going to going to be two-bedroom, so there  
11 is a capacity to serve families. So there is a variety of  
12 units planned as well that can serve different needs.

13 Q Sure. We're going to hand you a document that has been  
14 marked as Exhibit 1621, which is a one-page excerpt of the 2022  
15 master plan.

16 THE COURTROOM DEPUTY: Counsel, does that have an  
17 exhibit number?

18 MR. LOWENSTEIN: Exhibit 1621.

19 THE COURTROOM DEPUTY: Thank you.

20 BY MR. LOWENSTEIN:

21 Q Now, Mr. Kuhn, you have already testified that you are  
22 familiar with the master plan, correct?

23 A Yes.

24 Q And are you familiar with the North Campus community plan  
25 which is an appendix to the 2022 master plan?

1 A Yes.

2 MR. LOWENSTEIN: We move to admit Exhibit 1621, Your  
3 Honor.

4 THE COURT: Received.

5 (Exhibit 1621 received into evidence.)

6 BY MR. LOWENSTEIN:

7 Q Now, let's look at page 253. That is the page behind the  
8 title page.

9 Do you see in the second -- do you see the second  
10 paragraph there that says "as the intention"?

11 A Yes.

12 Q Let me just read it.

13 "As the intention of this plan is to create a  
14 residential community for healing within the West LA VA campus,  
15 the community plan also includes within its parameters  
16 services, amenities, and outdoor spaces which help to create a  
17 neighborhood that supports one of the most vulnerable  
18 populations.

19 The community plan leverages the physical assets of the  
20 Department of Veteran Affairs, the land, the structures, and  
21 the landscape to create this supportive housing community."

22 Did I read that correctly?

23 A Yes.

24 Q Is that still VA's plan for the campus today?

25 A It is.

1 Q Is building a residential community important for veterans  
2 who will be living on the campus?

3 A It's critically important. So of course we start with  
4 creating housing but, you know, once you are in your apartment,  
5 we don't want you to be, essentially, stuck there because there  
6 is no other activity, there is not the life that creates a  
7 community. When we think of a community, we don't think of an  
8 apartment. We think of the interactions that can occur in a  
9 park, at a show, in a shop, all of the -- just the general  
10 day-to-day interactions that we would expect to take place.

11 So we have to create an environment where that can  
12 happen. We have to make sure that there are places that are  
13 inviting in the community, that will bring people out, help  
14 support a healthy interaction and a healthy community.

15 Q Where in the process is VA in building that residential  
16 community today?

17 A So part of what we have been doing to help us -- to inform  
18 us about what needs to be done, is we began -- now that we have  
19 233 residents on the campus beyond the permanent housing  
20 residence -- is to start taking their input. So we did a  
21 survey to hear from them, as well as other interested  
22 stakeholders, what they think is important for us as we begin  
23 to plan this town center, this community center, if you will.

24 And from that, we have already taken initial steps.  
25 We're working with our Veterans Canteen Service who is

1 responsible for creating not just cafeterias but also places  
2 where you can shop. The number one need identified in the  
3 survey process that we did was places where you could eat and  
4 groceries, so grocery stores, places to sit down, a coffee  
5 shop, those sorts of things.

6           So that's already in the works. And we have work groups  
7 planning on that. The other thing we've identified that we're  
8 working on is a community center. This is to be distinguished  
9 from a service intensive environment. This is a place where  
10 veterans can come together, there could be activities, there  
11 could be services available, you can connect to, but it's  
12 really meant as a -- almost like a clubhouse, and that allows a  
13 service center of community life.

14           We already have activities, some activities going on.  
15 There is barbecues that happen. There are events sponsored  
16 both on campus and off by what is called the Veterans  
17 Collective which is already actively engaged in working with  
18 veterans to provide some of that soulful context, but we  
19 certainly have more to do.

20 Q       And to be clear, you mentioned one of the -- I think you  
21 said something to the effect of one of the needs that was  
22 identified was groceries, coffee shop, who is identifying that  
23 needs?

24 A       The veterans are. This is the result of the survey  
25 process we did. We need to hear the veteran's voice.



1           It's not what we want, it's what they want. It's their  
2 community.

3 Q       All right. We're about to hand you what has been marked,  
4 for identification purposes only, as Exhibit 85.

5           Now, Mr. Kuhn, can you please read for the record the  
6 title of this document, which is on the right side there and on  
7 the screen.

8 A       Expert witness, disclosure and expert report of Jonathan  
9 Sherin, M.D., Ph.D.

10 Q       Let's look at page 6 which is PDF page 8. Let's look at  
11 the second paragraph that starts with "to put it mildly."

12 A       Uh-huh.

13 Q       If you go to the second sentence there, about midway  
14 through do you see where it says "it is critical"?

15 A       Yes.

16           THE COURT: Just a moment, please. Okay. I have  
17 got it.

18 BY MR. LOWENSTEIN:

19 Q       Let me read that into the record. It says, "It is  
20 critical to reiterate that housing alone on a largely empty  
21 campus will be a mistake. It must be embedded in a community  
22 of people and resources that facilitate personal recovery and  
23 reintegration."

24           Do you generally agree with that statement?

25 A       Yes.

1 Q Is that VA's plan for the campus?

2 A Yes.

3 Q All right. Let's now look at page 4 which is PDF page 6.

4 And let's look at the second bullet there. And this  
5 should also be on your screen. Do you see that second bullet?

6 A Yes.

7 THE COURT: Just one moment. Thank you, counsel. I  
8 have got it.

9 BY MR. LOWENSTEIN:

10 Q Let me read it into the record. It says, "Roughly 2,800  
11 permanent housing units are needed to supplement the planned  
12 1,200 units which are either completed, about 300, or to be  
13 completed in the next six years."

14 Did I read that correctly?

15 A Yes.

16 Q Okay. We're about to hand you another document, what has  
17 been marked for identification purposes only as Exhibit 82.

18 A Thank you.

19 Q And can you please read for the record the title of this  
20 document which is on the right side of the first page?

21 A Expert witness disclosure and expert report of Steve  
22 Soboroff.

23 Q Now let's look at page 6, PDF page 8.

24 And do you see at the bottom of that page the section  
25 titled -- that says "permanent supportive housing in addition

1 to that currently planned"?

2 A Yes.

3 Q Let me read it into the record. It says, "An additional  
4 2,800 permanent housing units to supplement the planned  
5 1,200 units, which are either completed, about 300, or to be  
6 completed in the next six years."

7 Did I read that correctly?

8 A Yes.

9 Q Okay. Can you put that to the side. I'm going to hand  
10 you one more document that has been marked for identification  
11 purposes as Exhibit 84.

12 A Although I will point out an interesting difference  
13 between these two documents. The first document doesn't make a  
14 reference to permanent supportive housing, the second document  
15 does. I'm making the ask considerably different.

16 Q Thank you.

17 THE COURT: Just a moment. I didn't compare those  
18 quickly enough, just a minute.

19 Just a moment I want to make sure I'm tracking this.

20 I didn't follow it, I'm sorry, I saw it on both, I just  
21 saw permanent supportive. Here it is, permanent supportive  
22 housing.

23 THE WITNESS: At the top it's referencing the  
24 permanent housing and this is permanent supportive housing.

25 THE COURT: Here that would be in Soboroff's report?

1 THE WITNESS: Yes.

2 THE COURT: Which is different than Sherin's report  
3 in the heading, not the body?

4 THE WITNESS: Correct.

5 THE COURT: The body reads almost -- strike that.  
6 It's identical. But the heading at the top you are pointing to  
7 the Court to.

8 THE WITNESS: Right.

9 THE COURT: Thank you very much. Thank you, sir, I  
10 appreciate that.

11 BY MR. LOWENSTEIN:

12 Q Now, that section that we just read, the section titled  
13 does say "permanent supportive housing"; is that right?

14 A That's correct.

15 Q Now we're about to hand you what has been marked for  
16 identification purposes as Exhibit 84.

17 Can you please read for the record the title of this  
18 document.

19 A "Expert Witness Disclosure and Expert Report of Randy  
20 Johnson."

21 Q All right. Let's look at page 6, PDF page 8.

22 Do you see the section titled, "Permanent Supportive  
23 Housing Units"?

24 A Yes.

25 Q Let me read that top sentence into the record. "An

1 additional 2,740 permanent housing units is needed to  
2 supplement the planned 1,260 units, which are either completed,  
3 about 300, or to be completed in the next six years."

4 Did I read that correctly?

5 A You did. Yes.

6 Q You can set that to the side.

7 THE COURT: Okay.

8 BY MR. LOWENSTEIN:

9 Q Now all three of those, assuming the reference to  
10 permanent housing is referring to permanent supportive housing,  
11 for the sake of this question comes out to a total of 4,000  
12 permanent supportive housing units for the campus; is that  
13 correct?

14 A I take your word for it, yes.

15 Q So strictly from a demand perspective, what do you think  
16 of the suggestion to develop 4,000 permanent supportive housing  
17 units on the West LA Campus from a demand perspective?

18 A From a demand perspective it's not evident to me that that  
19 is necessary.

20 Q And why is that?

21 A Permanent supportive housing serves a subpopulation of  
22 homeless persons requiring disabilities and high levels of  
23 needs.

24 Based on what we're seeing on the point-in-time count,  
25 and our -- the own demand that we see, there isn't a need for

1 that many units of permanent supportive housing.

2 Q Okay. Well, let's just play out the hypothetical that --  
3 and assume that VA was able to fill 4,000 permanent supportive  
4 housing units on the campus. Okay?

5 How in your opinion would that impact VA's ability to  
6 create on the North Campus a residential community in which  
7 veterans want to live?

8 A I can't say this any more plainly, it will be an  
9 environment that no veteran will want to live in. There is not  
10 a reputable provider of services in the country of homeless  
11 services who would suggest having a concentration of 4,000  
12 permanent supportive housing units clustered in one area is a  
13 good idea.

14 Q And could you tell me why that is?

15 A We are going to have an alarming number of behavioral  
16 health incidents stemming from people's behavioral problems.  
17 It's going to make it difficult for veterans who are doing well  
18 to live in an environment where there is frequent mental health  
19 crises, widespread substance abuse disorders, the security is  
20 going to be very problematic, it's going to look like an armed  
21 camp if you are going to do it in a way that is safe. And  
22 we're going to recreate an environment that is the environment  
23 many veterans are trying to get away from, where they are going  
24 to be traumatized, where they are not going to feel safe, where  
25 they are going to be fearful.

1           Healthy communities are mixed, which is why I keep  
2 focusing on permanent supportive housing, not the total number  
3 of housing units. The total number of housing units -- clearly  
4 West LA could have many, many more housing units than there are  
5 planned or currently have.

6           It's the type of unit that is going to make the  
7 community not one anyone is going to want to live in. And it's  
8 also -- let me go further, it's also going to create a  
9 stigmatization for the veterans living there that if we have  
10 that many veterans who are disabled because -- largely because  
11 of substance abuse and mental health disorders, the people  
12 living there are going to be stigmatized. We're going to end  
13 up with a community that's going to essentially be walled off  
14 by the local community because it's going to be -- there is  
15 going to be fear about it, there is going to be, again, this  
16 idea that, oh, this is where we send a certain type of veteran.  
17 It will also -- because we're now draining resources from the  
18 rest of the community where every veteran with these diagnoses  
19 lives, and as well intentioned as we are now, we don't know how  
20 the political environment changes in the future and how these  
21 veterans could face further discrimination because it's easy to  
22 identify them, here's this vulnerable group of people all  
23 living in one area, I think we'd court significant further  
24 discrimination against that group.

25 Q       Are you aware of any permanent supportive housing project

1 of the size that plaintiffs' experts have proposed anywhere in  
2 the country?

3 A I'm not aware of anything that's even agreed to that  
4 approaches 1,200 units, much less goes north of that.

5 Q What are some of the supportive services that would be  
6 necessary to try to support a campus community with 4,000  
7 permanent supportive housing residents?

8 A I, frankly, don't know how it could be done. It would  
9 require a level of the intensive nature of -- it would just  
10 feel like a place people don't want to live. It potentially  
11 could become an armed camp to ensure that security is  
12 sufficient. It's not going to be an inviting environment.

13 Q So it's your opinion that no matter the amount of  
14 supportive services, you could not mitigate the challenges  
15 presented by 4,000 permanent supportive housing units filled on  
16 the campus?

17 A You could not.

18 MR. SILBERFELD: Objection, Your Honor. That is  
19 leading.

20 THE COURT: What is that?

21 MR. SILBERFELD: Objection, leading.

22 THE COURT: I'm taking it as an expert. Overruled.

23 BY MR. LOWENSTEIN:

24 Q You can answer that question.

25 A I don't see how it could be done.



1 Q Now, you have mentioned in your testimony being familiar  
2 with evidence-based practices in the fields of homeless  
3 services and mental health?

4 Would developing 4,000 permanent supportive housing  
5 units on the campus to house disabled veterans be consistent  
6 with evidence-based practice in those fields?

7 A No. We need a healthy community, a mixed community. We  
8 could have 4,000 units of housing. I think there is a lot to  
9 be said for developing more affordable housing on the grounds.

10 But we want to create communities veterans want to live  
11 in. Veterans who will be comfortable going out and mingling  
12 and going to the parks that we create, and the places to eat,  
13 and activities. We want people in a place they want to live.

14 We don't want to create a place for veterans that  
15 veterans are afraid to go to, that they're stigmatized in,  
16 discriminated against because of what we've made.

17 And there gets to be -- there is a tipping point that we  
18 -- I don't know what that tipping point is, but we need to be  
19 able to serve veterans in a way that is meeting their needs  
20 with a healthy community, and where we have permanent  
21 supportive housing that is scattered and integrated into the  
22 community so that way they don't face the ostracism and  
23 discrimination, that they're just blended with the community,  
24 they are part of the community, they have an opportunity to  
25 live their full lives.

1 Q Is community integration an important piece of VA's  
2 approach to creating housing opportunities?

3 A Absolutely.

4 Q And would the requirement to install 4,000 permanent  
5 supportive housing on the campus undermine community  
6 integration?

7 A It's smacks of re-institutionalization. We're asking  
8 4,000 people who previously would have under  
9 deinstitutionalization, the goal is when in the past we have  
10 institutionalized people that had large numbers of people  
11 living on hospital grounds because, frankly it was convenient  
12 and it let the community avoid any responsibility for them,  
13 just pack them into these places and we can sort of forget  
14 about them. We don't want to recreate that. We don't want to  
15 create what is essentially a re-institutionalized group packed  
16 into housing because it's convenient for us with the best of  
17 intentions, I understand, but that's what we will end up doing,  
18 we will be re-institutionalizing these people. Instead of  
19 giving veterans an honest opportunity to live their full life,  
20 integrated into the community, a part of the community, and  
21 places they want to live.

22 MR. LOWENSTEIN: Your Honor, I think that is a good  
23 time for a break if that works for the Court.

24 THE COURT: It works for the Court if it works for  
25 you, counsel. 1 o'clock okay for you folks? Go have a good

1 lunch, we will see you at 1 o'clock. Thank you very much.

2 (Lunch recess.)

3 THE COURT: We're back in session. All counsel, the  
4 parties are present. The witness has resumed the witness  
5 stand. Counsel, you continue with your direct examination,  
6 please.

7 MR. LOWENSTEIN: Thank you, Your Honor.

8 BY MR. LOWENSTEIN:

9 Q Mr. Kuhn, on Friday you talked briefly about a temporary  
10 housing initiative that you had proposed last year, the modular  
11 housing development initiative. Do you recall testifying to  
12 that?

13 A Yes, I do.

14 Q Can you just remind us, what was the proposal that you  
15 were making in that initiative?

16 A I was attempting to create housing that, again, would be  
17 responsive to the needs of the veterans seeking services who we  
18 -- who I felt there was a gap in care.

19 That would be for veterans with families, veterans who  
20 have certain types of disabilities including military sexual  
21 trauma.

22 Q And now, what you are proposing, can you just describe  
23 what that housing would look like, generally?

24 A The modular housing was essentially almost mobile homes,  
25 where you would have apartment style living that could be put

1 together relatively inexpensively. Prefabricated units that  
2 could be brought to the site and assembled.

3 Q And about how many of those modular units were you  
4 proposing in that initiative?

5 A 40 to 50.

6 THE COURT: I'm sorry, how many?

7 THE WITNESS: 40 to 50.

8 THE COURT: 40 or 50. Thank you.

9 BY MR. LOWENSTEIN:

10 Q And how did you land on that number? Why not propose  
11 more?

12 A Honestly, 40 to 50 was probably more than -- I think  
13 almost certainly more than we needed. It was -- we didn't have  
14 the demand from families that would justify it.

15 I was looking at SSVF data. And what I thought  
16 potentially could be demand if we created the resource, and I  
17 thought 40 to 50 would be more than sufficient.

18 Q And does that include the other subgroups of veterans?

19 A Yes.

20 Q Did that proposal get implemented?

21 A Unfortunately, no.

22 Q Why not?

23 A The clock ran out. We lost the -- it was -- I had hoped  
24 to use the COVID authorities to build, because as we know, we  
25 don't have the statutory authority otherwise, and that perhaps

1 the COVID authorities would allow us to do it.

2 I also hoped that we could use funding from the American  
3 Rescue Plan, and there was still funding available at that  
4 time, to pay for the cost.

5 Q So, when it comes to temporary housing on the campus, you  
6 have testified that you have expanded CTRS; is that correct?

7 A Yes.

8 Q There is a planned expansion of a Bridge Home; is that  
9 correct?

10 A Yes.

11 Q And then there was this modular housing initiative  
12 proposal?

13 A Yes.

14 Q Other than those three projects, have you identified any  
15 other resource needs for additional temporary housing on the  
16 campus?

17 A Not for temporary housing, no.

18 Q Okay. Let's look again at Exhibit 84 which we presented  
19 to you and that is the expert report of Randy Johnson.

20 Do you have that up there? I will also pull it up on  
21 our screen.

22 A I will use the screen.

23 Q Great. Let's look at page 3.

24 A Okay. I see 3.

25 Q Let's look at -- let me see. Just one second.

1 Let's go to PDF page 5, and the report page number 3.

2 A Uh-huh.

3 Q Okay. And now, do you see the last full paragraph, and we  
4 have blown it up on the screen.

5 THE COURT: David, could you get this up for me.  
6 Please continue, counsel.

7 MR. LOWENSTEIN: Thank you.

8 BY MR. LOWENSTEIN:

9 Q Do you see there where it says, "I assume further, at the  
10 instruction of counsel, informed by the opinions of other  
11 experts, that creating 1,000 temporary housing units would have  
12 a robust and positive impact on the homeless veteran  
13 population."

14 Do you see that?

15 A I do.

16 Q Let's now turn to the next page.

17 Okay. Do you see the section heading Temporary  
18 Supportive Units?

19 A Yes.

20 Q And the first bullet there, I will read it into the  
21 record, it says, "There is an urgent need to place  
22 approximately 1,000 temporary supportive housing units on the  
23 property in order to make a robust impact on homelessness in  
24 the veteran population in the five county area covered by the  
25 West LA VA."

1 Did I read that correctly?

2 A Yes, you did.

3 Q All right. Now, let's pull up and look again at  
4 Exhibit 82.

5 And this is plaintiffs' expert report of Steve Soboroff.  
6 Let's turn to page 4 of the report.

7 Now, that first paragraph, do you see where it says, "I  
8 assume further at the instruction of counsel, informed by the  
9 opinions of other experts that creating 1,000 temporary housing  
10 units would have a robust and positive impact on the homeless  
11 veteran population."

12 Do you see that?

13 A I do.

14 Q Okay. And on that same page, do you see that a section  
15 titled Temporary Supportive Housing -- and we should blow that  
16 up on the screen here.

17 Do you see that?

18 A I do.

19 Q And that first bullet, I will read it into the record. It  
20 says, "There is an urgent need to place approximately 1,000  
21 temporary housing units on the property, totally different from  
22 the small temporary shelter bed huts which face San Vicente  
23 Boulevard."

24 Did I read that correctly?

25 A Yes, you did.

1 Q And just for clarification, do you know what this report  
2 is referring to when it says "totally different from the small  
3 temporary shelter bed huts which face San Vicente Boulevard"?

4 A Yes, I do.

5 Q And what would those probably be?

6 A CTRS.

7 Q Okay. Now, we can put those to the side and take that  
8 down from the screen.

9 Mr. Kuhn, do you agree that there is a, quote, urgent  
10 need, end quote, to install 1,000 temporary modular units on  
11 the campus?

12 A Absolutely not.

13 Q Why not?

14 A Well, first, it would be a fantastic waste of resources.  
15 Why would we spend funds on something that is not going to  
16 solve homelessness -- these are temporary -- a thousand  
17 temporary units, at that -- when we currently are running open  
18 beds with 300 units on the campus, and we routinely have over  
19 150 empty available temporary housing beds every night.

20 I would wonder what experts were consulted, who was  
21 identified as experts, who would suggest this. Certainly not  
22 someone -- anyone familiar with the Housing First movement or  
23 anyone familiar with VA data.

24 The recommendation is illogical.

25 THE COURT: Did you say that you have 300 open beds



1 on the campus?

2 THE WITNESS: We have 300 beds in the campus, and  
3 overall, we have about 150 open units in our catchment area.  
4 On the campus at any given night, we probably have --

5 THE COURT: I hadn't heard that or I may have missed  
6 it. You have 300 open beds on the campus?

7 THE WITNESS: No. We have 300 total beds on the  
8 campus.

9 THE COURT: Okay. Now, so, to be certain, you do  
10 not have 300 open beds on the campus; is that correct?

11 THE WITNESS: That's correct. We do not.

12 THE COURT: Okay. Thank you.

13 BY MR. LOWENSTEIN:

14 Q Typically, about how many open beds do you have on the  
15 campus when it comes to temporary housing?

16 A We currently have -- I'll do the math quickly in my head  
17 -- about 10 to 15 beds between CTRS and AVH, 20 beds in New  
18 Directions, 10 beds in Oasis. What is that? About 35? And  
19 then we have another 32 beds in AVH scheduled to open in about  
20 six months' time. And then when construction is complete at  
21 New Directions, another 30 units of housing.

22 So, we have additional capacity that is going to be  
23 added, and we, yet, have vacancies on the West LA Campus. And  
24 that does not include all of the vacancies we have off the  
25 campus. There is not a need for it.

1 I am a huge proponent, as I have shared, that the first  
2 mission for us is to get people off the streets.

3 If I felt there was a need for temporary housing, we  
4 would create temporary housing. There is not going to be a  
5 veteran we leave on the street for lack of capacity.

6 Q So, do you agree or disagree with Mr. Johnson and  
7 Mr. Soboroff that installing 1,000 temporary modular housing  
8 units on the campus would have a, quote, positive impact on the  
9 homeless veteran population, end quote, in LA?

10 A It's a terrible idea. And again, degrades the environment  
11 on the campus for the people who do live here.

12 We want to invest those resources in permanent housing,  
13 not more temporary housing. We have sufficient temporary  
14 housing planned or existing. We want to vest available  
15 resources in permanent housing. That is the very central  
16 concepts of Housing First.

17 And just to remind everybody, Housing First is what  
18 governs VA philosophy because it's evidence based and it's  
19 proven its effectiveness.

20 Q And to be clear, would a 1,000 temporary housing unit  
21 project for the campus necessarily shift resources away from  
22 creating more permanent housing opportunities for veterans?

23 A I don't know where the money would come from. You know,  
24 this is -- unless Congress appropriates more funds, you have to  
25 assume that the money is coming out of the existing VA budget.

1           So, where is that budget going to come out of? It's  
2 going to come out of homeless services. If it comes out of  
3 homeless services, that is going to cost us permanent housing  
4 resources.

5           Where else could it come from?

6           MR. LOWENSTEIN: May I have one moment, Your Honor.

7           THE COURT: Take your time.

8           MR. LOWENSTEIN: No further questions for the  
9 witness.

10          THE COURT: Why don't you check with your team just  
11 to make sure. See if there is anything further, at least at  
12 this go around.

13          MR. LOWENSTEIN: The team is comfortable. No  
14 further questions.

15          THE COURT: Counsel, are you comfortable with  
16 cross-examination or do you need a break?

17          MR. SILBERFELD: Ready to go.

18          MR. LOWENSTEIN: Just one matter, if I may, Your  
19 Honor. We do reserve the right to recall the witness, if  
20 necessary. Thank you, Your Honor.

21          THE COURT: Then this witness has to be  
22 cross-examined because the gentleman was taken on direct  
23 examination.

24          MR. SILBERFELD: It's either cross or recross at  
25 this point, Your Honor.

1 THE COURT: Recross examination?

2 MR. SILBERFELD: I'm not sure anymore.

3 THE COURT: Well, this is your second go-round,  
4 Mr. Kuhn.

5 THE WITNESS: Okay.

6 REDIRECT EXAMINATION

7 (Plaintiffs' redirect examination)

8 BY MR. SILBERFELD:

9 Q Mr. Kuhn, if something isn't done to create temporary  
10 housing on campus, veterans on the street will die.

11 Is that true?

12 A No, that is not true.

13 Q Not true?

14 A No. We have sufficient temporary housing to get veterans  
15 off the street. Getting them to accept the temporary housing,  
16 right now, is a greater challenge.

17 Q What you don't have is you don't have sufficient staff at  
18 multiple levels to get those veterans who are on the street  
19 into that housing?

20 A No. That is not true.

21 Q Okay. All of the effort that you have described this  
22 morning and as of -- part of our conversation on Friday, too,  
23 all of that effort that you have made in the last two years,  
24 was made necessary by decades of neglect of the homeless  
25 veteran problem in West LA, right?

1 A I would disagree with that characterization. I don't  
2 think that -- because the strategy changes, it doesn't mean the  
3 previous strategy was neglectful. It may have meant the  
4 previous strategy was not successful. But to say it was  
5 neglectful is a real leap.

6 Q How much housing was there for permanent supportive  
7 housing on the West LA Campus five years ago?

8 A It was Building 209, and that was it. So that is  
9 54 units, something like that.

10 Q How about 10 years ago?

11 A Zero.

12 Q 20 years ago?

13 A The same.

14 Q 30 years ago?

15 A I think you would have to go back quite a ways, then you  
16 would find that it was the original intent of the property when  
17 it was thousands of units of congregate housing.

18 Q You would have to go back more than 50 years to find any  
19 significant amount of housing on the campus. Would you agree  
20 with that, sir?

21 A Yes.

22 Q I'm going to jump around a little bit, but I will try to  
23 orient you as to my questions because I'm just going to follow  
24 counsel's outline, if I may.

25 You were asked some questions about the REAP program --

1 A Yeah.

2 Q -- R-E-A-P, I think it is.

3 A Yeah.

4 Q You described what that is. Does the REAP program exist  
5 in Los Angeles?

6 A No. I actually tried to do something similar, but not  
7 every program works in every environment. Times change, and  
8 sometimes a program that worked before doesn't work now. And  
9 we adapt.

10 Q So, other than helpful background about your  
11 accomplishments, REAP is irrelevant to Los Angeles?

12 A That's correct.

13 Q All right. Same question with respect to Maverick. You  
14 spoke about Maverick. Was Maverick a program introduced to Los  
15 Angeles?

16 A No, it was not.

17 Q Again, one of your accomplishments, not relevant for  
18 purposes of our discussion. True?

19 A That's correct.

20 Q You said that there was a list of priorities that you use  
21 to make decisions about how to move the West LA VA forward.

22 A Yes.

23 Q Do you recall that?

24 What are your list of priorities in order of importance,  
25 sir?

1 A First priority is making sure that every veteran who is  
2 homeless and unsheltered has access to safe temporary housing.

3 Second priority is to make sure that the affordable  
4 housing stock meets demands, and taking steps as necessary to  
5 increase the affordable housing supply.

6 Third is to integrate and consolidate community and VA  
7 resources to make sure that we deliver these services  
8 efficiently and effectively so every veteran has an  
9 individualized, tailored plan to meet their specific needs.

10 Q Another program that you were asked about was Rapid  
11 Resolution. That was the mediation program?

12 A Yes.

13 Q Grandma was the example you gave us.

14 A Yes.

15 Q Was Rapid Resolution a program introduced into Los  
16 Angeles?

17 A Yes.

18 Q When?

19 A Shortly after I got here, we did training, I think it was  
20 in January of '23. And we will likely redo training again this  
21 year.

22 Q And has Rapid Resolution actually been used to accomplish  
23 housing by resolving some interfamily dispute that some veteran  
24 has?

25 A It has. The numbers have not been significant, but it

1 has.

2 As I have shared, there are going to be a lot of things  
3 I try. Some of the things will be successful, some moderately  
4 or less so, some not at all. But I'm going to try all sorts of  
5 things to try to address this problem, and continue to do so.

6 Q Okay. And Rapid Resolution has helped provide housing to,  
7 roughly, how many individuals?

8 A I don't have the number, but it's less than 100, I'm sure.

9 Q Okay. Is it less than 10?

10 A No. It's probably between 10 and 100, but I don't know  
11 the number.

12 Q Okay. Another program you spoke about was Shallow  
13 Subsidy?

14 A Yes.

15 Q Is that a program in Los Angeles?

16 A Yes.

17 Q And how long has it been in the West LA VA?

18 A It's been here for as long as Shallow Subsidy existed. It  
19 actually -- West LA was one of the pilot sites. Originally,  
20 Shallow Subsidy was rolled out to ten communities. LA was one  
21 of the ten.

22 One of the things we learned from LA was that the  
23 subsidy wasn't large enough when it was initially rolled out.  
24 It was 35 percent but because of feedback from the community,  
25 we increased it to 50 percent. So it's been around for several



1 years.

2 Q And approximately, if you -- happy with a range of  
3 numbers, how many veterans, homeless veterans, have been helped  
4 by the Shallow Subsidy program --

5 A I can tell you nationally.

6 Q Hang on --

7 A I don't know in Los Angeles.

8 Q I hadn't finished. In West LA.

9 A I don't have the number in West LA. I could find it.

10 Q Okay. You spoke about SSVF and the bridge funding. What  
11 was that called again?

12 A Intentional bridging.

13 Q Intentional bridging. That is a program where money is  
14 spent while a veteran or an apartment is connected up for  
15 purposes of a HUD-VASH voucher, right?

16 A No. It's money spent by SSVF to rapidly rehouse a  
17 veteran, and then later is converted to a voucher.

18 Q I see. And that has been in Los Angeles at the West LA VA  
19 for how long, sir?

20 A We began intentional bridging probably in early '23. It's  
21 probably -- its main impact has probably since, I'd say, summer  
22 of '23.

23 Q So, roughly a year?

24 A That's about right.

25 Q And in that year, how many veterans have been assisted by

1 the intentional bridging funds that SSVF provides?

2 A My guess is in the hundreds. But I would -- again, I  
3 would be guessing at a number.

4 Q Okay. Fair enough.

5 You were asked some questions about the PIT count, and  
6 we sort of went back and forth between LA City and LA County,  
7 and it's not just LA County, it's the LA Continuum of Care,  
8 correct?

9 A Correct.

10 Q Which excludes a couple of cities -- Pasadena, Burbank,  
11 and Long Beach, or Glendale?

12 A Glendale.

13 Q So, Pasadena, Burbank, and Glendale?

14 A Pasadena, Glendale, and Long Beach. But Long Beach -- we  
15 don't serve Long Beach.

16 Q I will get this right before the end of the week.

17 A It's confusing.

18 Q The PIT count for LA City for '24, you testified was down  
19 32 percent?

20 A Yes.

21 Q And for the LA Continuum of Care, minus those three  
22 cities, down 23 percent?

23 A Correct.

24 Q Do you understand the reasons for that drop?

25 A The reason -- we can't determine direct causality. We

1 don't have that kind of scientific rigor to be able to do it.  
2 But we can, from inference, because we know that housing  
3 placements significantly increased under the -- in the past  
4 year using the One Team model, so with the increase in  
5 placements, plus the reductions in unsheltered homelessness  
6 linked, potentially, to the counts we see coming in off -- from  
7 the call center, I think we can infer that our actions has had  
8 a direct impact on that reduction.

9 Q But you don't know that for certain?

10 A No. We can't know that, and there are very few social  
11 service programs who can infer direct casualty. That standard  
12 is very high.

13 Q There are certainly other explanations for a change in the  
14 PIT count, would you agree with that?

15 A Yes. You can come up with other explanations.

16 Q So, for example, a homeless veteran who was counted in  
17 '23, and found on the streets in Harbor City, might have been  
18 found in '24, across the bridge in Long Beach?

19 A But those kinds of --

20 Q Hypothetical.

21 A Those kinds of changes tend to be -- they tend to cancel  
22 each other out. So the numbers of veterans who would have left  
23 Los Angeles, who would have been offset by the number of  
24 veterans, in that example, who came in.

25 So, some of the kind of variables you are describing

1 offset each other.

2 Q Okay. Veterans die, that's a variable?

3 A Yes.

4 Q Veterans leave the area, completely, that is a variable?

5 A Correct. Veterans enter the area. New veterans are made  
6 who are discharged from the service.

7 So there are inputs and exputs -- ex- -- that -- we have  
8 reasons for people coming into the system, inputs, and people  
9 leaving the system.

10 Q Can you say to a reasonable degree of scientific certainty  
11 that the explanation for the drop in homelessness among  
12 veterans as exemplified by the PIT counts that you testified  
13 about is due to increased housing placement?

14 A As I have shared, scientific certainty is something  
15 extremely rare in social services. We can infer causation, but  
16 we cannot be certain of causation.

17 Q All right. You testified in response to counsel's  
18 question about increases in other communities. Do you remember  
19 that?

20 A Yes.

21 Q Increases in the PIT counts?

22 A Yes.

23 Q And you said that San Diego had gone up -- was it  
24 6 percent?

25 A 6 percent.

1 Q Okay. And that's 6 percent out of a total homeless  
2 population there, of how many?

3 A I don't remember offhand.

4 Q It's under 1,000, right?

5 A I don't remember offhand.

6 Q It's 800.

7 A Okay.

8 Q And in Orange County, you said, I think, that the homeless  
9 population in a PIT count this year also went up?

10 A Correct.

11 Q From what to what?

12 A I don't remember the numbers.

13 Q Do you remember the percent of increase?

14 A I remember the percent for the entire county was over  
15 20 percent -- not veterans, I don't remember the veteran count.  
16 And that count --because Orange County doesn't do a count every  
17 year, they do it every two years, so the change is from '22 to  
18 '24.

19 Q Do you know what the total homeless veteran count was in  
20 Orange County in either '24 or '23?

21 A I do not.

22 Q Does 328 sound right?

23 A I will take your word for it. It's certainly searchable  
24 on -- I'm sure if you Google it, you could find the number  
25 quite easily, or look at the HUD website.

1 Q Well, we did.

2 A There you go. So you have the number.

3 Q San Bernardino, you said, had an increase --

4 A Yes.

5 Q -- right?

6 A Yes.

7 Q Do you know how much?

8 A Again, I do not.

9 Q Okay. And the San Bernardino homeless veteran number was  
10 211. Does that sound about right?

11 A It's relatively low, certainly compared to Los Angeles.

12 Q And that's for the entire County of San Bernardino, right?

13 A Yes.

14 Q And that is the largest county in the United States?

15 A Is it? I didn't know.

16 Q Okay. Long Beach had an increase, you said?

17 A In veterans, yes.

18 Q Right. Do you know what the homeless count is for the  
19 City of --

20 A A few hundred.

21 Q -- Long Beach. 380 sound about right?

22 A It sounds about right.

23 Q Okay. Now, the drop that you testified about in LA City  
24 and in the LA Continuum of Care, that was not matched by a drop  
25 of the rest of your catchment area, correct?

1 A It was in portions. So, in Ventura there was also a steep  
2 drop. In Kern County, although there wasn't a drop if you  
3 compare it to the general population, there was considerable  
4 growth in the homeless population in Kern County, but among  
5 veterans there was no change.

6 The only area where we did not outperform the general  
7 population, in the GLA catchment area was in Santa Barbara. In  
8 every other area, the VA -- the veterans count significantly  
9 outperformed the general population.

10 Q Well, let's stay with the raw numbers of homeless between  
11 '22, or '23, depending upon whether a county does the count  
12 once a year or twice a year, and the numbers in '24. Can we  
13 just stick with that for a moment?

14 A Sure.

15 Q In San Luis Obispo County in '22, they recorded 16  
16 homeless vets. Does that seem right to you?

17 A San Luis Obispo had a change in their methodology. So,  
18 there was a significant jump in the veteran count, but the  
19 count was not -- it's apples and oranges. What they did in '22  
20 and '24, they will -- it says on their website, this is public  
21 information, that they changed the way they count.

22 Q Okay. So, we shouldn't compare those numbers at all?

23 A No, we should not.

24 Q All right. In Ventura in 2023, there were 134 homeless  
25 veterans, and this year, it dropped to 69. That is that big

1 drop you talked about?

2 A Yes.

3 Q All right. In Kern County in 2023, there were 92 homeless  
4 veterans, and this year, there was one more, 93?

5 A But if you look at the general population count, which  
6 went up very much, that is a relative success that ours did not  
7 go up, essentially, and there was a big jump in the general  
8 population.

9 Q In Santa Barbara County in 2023, the homeless count was  
10 82, and in 2024, it was 90.

11 A Yes. The one year we did not outperform.

12 Q Okay. And you know, we have talked over the course of the  
13 last couple of days about this catchment area, that is the five  
14 county area.

15 Do you have an estimate for us of how many square miles  
16 that is? The five counties.

17 A It's quite large. I don't have an estimate, but I could  
18 tell you that overall veterans homelessness in that in that --  
19 our entire catchment area went down 21 percent. Again,  
20 significantly outperforming the general population.

21 Q My question was about the size of the area.

22 A I don't know the size of the area.

23 Q Does 20,000 square miles seem right?

24 A Huge.

25 Q Huge.



1 A Yeah. I'm sure, again, Google maps would tell us, if we  
2 asked.

3 Q I have asked.

4 A Okay.

5 Q You testified in part, when you and I made the housing  
6 charts, you testified at some length about the housing options  
7 that are really collaborations between VA and community  
8 partners. Do you remember that general topic?

9 A Yes.

10 Q Those collaborations, Mr. Kuhn, are made necessary, are  
11 they not, again by decades of failure on the part of the VA to  
12 provide housing to homeless veterans?

13 A Well, I think it would be difficult to describe VA's  
14 efforts as failing, when over the past dozen years homeless  
15 among veterans have declined in half, while the general  
16 population, if you exclude the veterans number, is essentially  
17 unchanged. So, in fact, this was just recently covered by the  
18 New York Times, there has been a significant improvement in  
19 veterans' homelessness in part because of the efforts made  
20 nationally with support of Congress with the funding that has  
21 been made available to address this issue.

22 Q You were asked some questions about outreach. Do you  
23 remember that?

24 A Yes.

25 MR. SILBERFELD: And I -- I'm sorry to use my phone,

1 Your Honor, I took a picture of the transcript because I didn't  
2 want to get the testimony wrong.

3 BY MR. SILBERFELD:

4 Q At page 82 of today's transcript, Mr. Kuhn, you were asked  
5 the following question:

6 "What are the challenges that CRS outreach faces in  
7 engaging and -- in engaging unsheltered veterans throughout  
8 outreach efforts?" Let me do that one more time.

9 The question was: "What are the challenges that CERS  
10 outreach faces in engaging unsheltered veterans through  
11 outreach efforts?"

12 Your answer was: "The VA will never have enough  
13 outreach staff. We could not afford to hire outreach staff to  
14 cover the entire GLA catchment area, which is quite large."

15 Why can't you afford it?

16 A Like any budget, we have to make choices. Our resources  
17 are not limitless, if they were limitless, we could afford it,  
18 but I would rather invest money in our resources that are going  
19 to directly go to end permanent -- end homelessness and support  
20 permanent housing.

21 For outreach we have the advantage that there are other  
22 resources we can collaborate with, take advantage of, and serve  
23 the purposes that we need.

24 So why invest in resource that's duplicative and is  
25 already being provided by the County or other local agencies,

1 and that we can share resources as I've described in One Team  
2 to take advantage of the strengths of all of these different  
3 programs. There is no need to duplicate every program by every  
4 agency. That kind of stove-piping mentality is not productive.

5 Q Can we at least agree that as far as outreach efforts go,  
6 you and the VA make a choice about where to spend money?

7 A We all make choices on where to spend money, of course.

8 Q Well, of course. But it isn't a matter of you can't do  
9 something, it's you choose not to, correct?

10 A We can't given current resources.

11 Q What is the annual budget of the VA?

12 A I don't know. It's substantial.

13 Q \$407 billion sound right?

14 A But homeless services are a line item in our budget, so  
15 unless Congress provides statutory support to provide more  
16 funding for homelessness, our budget is pretty much fixed.

17 Q You talked about in counsel's questioning of you, about  
18 the severe health consequences that people on the street face,  
19 veterans and others?

20 A Yes.

21 Q That -- none of that is new information, is it?

22 A No, of course not.

23 Q And that's been known for decades?

24 A It has.

25 Q You also testified that veterans don't want to live on

1 campus, they don't want to live in a hospital setting.

2 Do you remember that?

3 A I said some veterans do not want to live on campus, that  
4 is correct. Not all, some.

5 Q Sure. And in part your explanation was that people may  
6 not want to live on campus because they don't want to live in a  
7 hospital setting, correct?

8 A Right.

9 Q And what is out there now in West LA is a hospital  
10 setting, right?

11 A You mean on the grounds of West LA or do you mean the --

12 Q Yes, sir, on the grounds of West LA.

13 A Right, it's based at a hospital.

14 Q Sorry?

15 A It's based at a hospital. Our housing on West LA Campus  
16 is a hospital setting.

17 Q There is no community out there now?

18 A There is a limited community.

19 Q Well, there's 233 individuals living in three buildings?

20 A Right.

21 Q But there is no community services?

22 A There is limited community services.

23 Q There is no store?

24 A None.

25 Q There is no restaurant?

1 A I should -- no, there is not no store, the store is  
2 limited. There is a store on the North Campus run by the  
3 Canteen Services. It's limited.

4 Q What can you buy there?

5 A You can buy lunch, you can buy limited selections. It is  
6 certainly an area where we are looking to develop and it's one  
7 of the reasons why we have the Veterans Canteen Service.  
8 They've come out to visit the property. They have committed to  
9 expand services. It is absolutely an area of need. I'm  
10 certainly not going to contest that point, we need some far  
11 more robust where there is groceries, where there is a range of  
12 items you can shop for.

13 What we have right now is not sufficient.

14 Q Other than the open area between the three buildings we  
15 have talked about, 205, 8, and 9, that sort of parklike setting  
16 out in front of those buildings, you are familiar with that,  
17 are you not?

18 A Uh-huh.

19 Q Other than that, is there a place to commune on the  
20 grounds if you wanted to sit and talk?

21 A We are in the process of developing something as sort of a  
22 community center. It's still in early proposal stage, but it's  
23 something we certainly hope to see put in place, not -- maybe  
24 the first half of next year.

25 Q It's not there today?

1 A It is not. I'm not saying there is not work to do,  
2 clearly we have work to do.

3 Q Sure. What about the chapel, Mr. Kuhn?

4 A I would love to see that restored.

5 THE COURT: I'm sorry, just a moment, I didn't hear  
6 the answer.

7 THE WITNESS: The chapel, we would love to see it  
8 restored.

9 BY MR. SILBERFELD:

10 Q Do you agree, sir, that a sense of community may well  
11 include a place to worship, either nondenominationally or  
12 denominationally?

13 A I'm actually very excited by the chapel, U.S. Vets has  
14 been raising money for that and my understanding is that they  
15 are very close to raising sufficient funds to completing it.  
16 They had to raise -- because of it's a historical preservation  
17 site, they had to raise enough money to demonstrate that they  
18 could complete the project before starting it. This is what --  
19 this is hearsay, by the way, this is what the U.S. Vets have  
20 shared with me. But that they are very close to raising enough  
21 money to completing -- having sufficient funds to complete  
22 restoration.

23 Q How long has it be since the chapel was in use?

24 A A long time. I don't know when.

25 Q 30 years, 50 years? Longer?

1 A I don't know.

2 Q Why is this restoration of the chapel, which you would  
3 agree is part of community, right?

4 A Yes.

5 Q Why is that left to a charitable organization which has  
6 the need to raise money to do this work? Why isn't that chapel  
7 open today fully restored for veterans' use?

8 A The VA right now has a backlog of things to build and  
9 repair on -- not just on the West LA Campus, but across the  
10 country. The backlog is in the billions of dollars. These are  
11 healthcare facilities that are central for treating and serving  
12 veterans.

13 So if we decide to say we're going to take millions of  
14 dollars to restore the chapel, that means that's not money  
15 available to build out a primary care clinic, or restore  
16 something for prosthetics, so people's spinal cord injuries can  
17 get served.

18 So it's a question about choices. If we had the money  
19 to repair everything -- we have roofs at the -- on the West LA  
20 Campus, a roof, right in our own homes that would be the first  
21 thing we would repair. We have roofs we cannot afford to  
22 replace, we simply don't have the money, the backlog for  
23 repairs for essential buildings are going unmet, so this is not  
24 just an issue of the chapel, this is across VA.

25 The amount of money available for infrastructure is

1 grossly insufficient, and we can only spend what is  
2 appropriated.

3 Q How many total buildings are there on the West LA Campus,  
4 approximately?

5 A I wouldn't even guess. A lot.

6 Q 95?

7 A I don't want to hazard a guess.

8 Q How many of them are partially or completely unoccupied?

9 A A bunch. And that's part of the inventory we're using of  
10 course.

11 THE COURT: Hang on just a moment. A bunch?

12 THE WITNESS: I don't have a number. If you want me  
13 to guess.

14 THE COURT: I'm interested now or through Braverman  
15 or Soboroff or Johnson, I'm going to want to know that number.  
16 That doesn't mean that they're functional, it doesn't mean  
17 they're not up to standard, I don't have an idea of what that  
18 number is.

19 THE WITNESS: We can get that.

20 THE COURT: I need to know where they're located  
21 eventually, either through you, Braverman, your experts,  
22 Soboroff, Johnson, so I'm just putting everybody on notice,  
23 we're here until I get that number and I'm not saying that  
24 they're suitable rehab, I just don't know until I go out there  
25 in a couple of weeks, but I would like to know now.



1 BY MR. SILBERFELD:

2 Q Let me try it this way. Mr. Kuhn, does the number 45  
3 buildings sound about right as being buildings that are  
4 partially or completely empty?

5 A Again, I would only be hazarding a guess. It sounds like  
6 you have researched it so, we can get back and confirm it.

7 Q All right. Great, let's do that.

8 THE COURT: And why don't you come back later, or  
9 Mr. Braverman --

10 THE WITNESS: We'll have somebody.

11 THE COURT: Or somebody, give me a number that you  
12 can all agree on. You folks can -- it's like the map, work it  
13 out for me, okay? Just give me the number.

14 BY MR. SILBERFELD:

15 Q In response to counsel's question about building 1,200  
16 permanent supportive housing units, just to be clear, that's to  
17 be accomplished by 2030, correct?

18 A I think it was 2036 but I -- no, 2030, you are right.

19 Q It's not 2036?

20 A No, you're right. You're right.

21 Q Please don't, dates confuse me.

22 A I'm getting dates confused.

23 Q 2030.

24 A Yes.

25 Q Six years from now, roughly.

1           And you said that number could adjust?

2     A       Yes.

3     Q       But as we sit here today, there is no study underway, is  
4     there, to determine whether 1,200 permanent housing units on  
5     the campus is the right number or not?

6     A       There is no study, but there are -- there is exploration  
7     about possible further development.

8     Q       When did that further exploration begin?

9     A       About a year ago.

10    Q       About a year ago?

11    A       Yes.

12    Q       And what does it consist of, that exploration?

13    A       Not a year ago, more like six months. It's to see whether  
14    we can construct affordable housing on the campus separate from  
15    permanent supportive housing.

16    Q       And who is leading that effort, sir?

17    A       That is a combined effort that we initiated that is with  
18    OAEM.

19           THE COURT: I'm sorry, with who?

20           THE WITNESS: OAM. It's undergoing legal review  
21    right now.

22           THE COURT: O-A-M, who is that?

23           MR. SILBERFELD: I think it's O-A-E-M, Your Honor.

24           THE WITNESS: Office of Asset and Enterprise  
25    Management.

1 THE COURT: He's going to do this again, slowly.

2 THE WITNESS: Office of Asset and Enterprise  
3 Management, O-A-E-M.

4 THE COURT: I'm not very good at acronyms, okay?  
5 Office of Assets and?

6 THE WITNESS: And Enterprise Management.

7 THE COURT: What's that?

8 THE WITNESS: They basically are in charge of doing  
9 all of the leases on the grounds of VA for permanent housing.

10 THE COURT: So they are in charge of the leases, but  
11 they are the planning head?

12 THE WITNESS: Different from planning.

13 THE COURT: Counsel, you ask the question, I'm  
14 curious who's taking the lead, if the VA is or if a leasing  
15 agency is, so either side, develop this for me. I don't know  
16 what the plan is yet.

17 BY MR. SILBERFELD:

18 Q The exploration of building other kinds of housing, which  
19 you said started roughly six months ago, is -- that's a VA  
20 project?

21 A Yes.

22 Q Headed by somebody in West LA?

23 A It started with me, it's now under review by the OAEM,  
24 that's the Office --

25 Q And understanding that it's gotta go through a review and

1 may change, what is the premise of that exploration?

2 A The premise is we need more affordable housing, as I have  
3 described in my testimony.

4 Q And what's the number of units that is being explored to  
5 build additional housing on the West LA Campus?

6 A We're not at the point of establishing a number yet. Just  
7 whether we have the authority to do it and whether we can  
8 proceed. So early days.

9 THE COURT: So you haven't established a number --  
10 let me write "a number" and you don't know if you have the  
11 authority?

12 THE WITNESS: Correct.

13 THE COURT: Thank you.

14 BY MR. SILBERFELD:

15 Q All right. You were asked some questions by Mr.  
16 Lowenstein about the referral rate by VA to at least the  
17 Housing Authority of the City of Los Angeles. Do you remember  
18 that?

19 A Yes.

20 Q And I think you and I established that in 2023 the weekly  
21 referrals were four? Do you remember that? Four per week?

22 A What I have shared is, yes, it was low in 2023 but now we  
23 are up to just north of 13 a week for just HACLA.

24 Q Right. We're just talking about --

25 A H-A-C-L-A, HACLA.

1 Q We're just talking about HACLA, H-A-C-L-A, the Housing  
2 Authority of the City of Los Angeles. And there are 19 housing  
3 authorities all told?

4 A Correct.

5 Q And at 13 referrals a week, that is about half of what  
6 HACLA has told you they need in order to deploy the available  
7 vouchers that they have to deploy, correct?

8 A That's correct.

9 Q And you have been at the clip at 13 referrals a week for  
10 how long?

11 A Since about the beginning of this calendar year.

12 Q So seven months, give or take?

13 A Give or take.

14 Q All right. You weren't asked any questions about how VA  
15 and CERS is addressing the attrition rate, that is people who  
16 fall out of the HUD-VASH program.

17 Do you understand that as many people in 2023, actually  
18 more, fell out of the HUD-VASH program than entered it?

19 A That's no longer true.

20 Part of what we have done is closer collaboration with  
21 the public housing authorities, so that the issue you  
22 described, which did occur, we weren't getting paperwork done,  
23 was happening too often, is not occurring now.

24 Q So you answered a question I didn't ask, but I appreciate  
25 the answer.

1 In 2023, more people fell out of HUD-VASH than entered  
2 it, at least as the Housing Authority of City of Los Angeles is  
3 concerned, correct?

4 A I don't recall the numbers offhand, I know that there was  
5 issues with us not getting in as many referrals as people  
6 coming out. I don't know if it was a net negative or not, I  
7 don't recall.

8 Q And you say that's no longer true?

9 A Yes.

10 Q How long has that been the case, namely that apparently  
11 the attrition or people falling out problem --

12 A This calendar year.

13 Q -- seems solved or made better, what is it?

14 A I don't want to ever say solved because we don't know what  
15 is going to happen in three months' time. I would like to  
16 think it's solved, but certainly for the moment it's -- for now  
17 it's solved.

18 We would like to see ongoing improvements, we're not  
19 satisfied with the improvement we have seen, we would like to  
20 see continuous change in the better direction so that we use  
21 more and more of these vouchers.

22 Q What was done by VA to stem the attrition problem?

23 A Better coordination, One Team. Well, first, we have hired  
24 more staff, but we also have much better coordination than we  
25 have had in the past.

1 Q So do you ascribe the improvement of the attrition rate to  
2 the improvement of your staffing when a year ago it was roughly  
3 70-something percent to almost 90, is that the cause?

4 A Staffing and coordination, those two are probably the  
5 critical changes.

6 Q Okay. Do you know about the designated service provider  
7 program --

8 A Yes.

9 Q -- that was rolled out in March?

10 A Yes.

11 Q And roughly, that was a program that VA rolled out to  
12 incentivize the housing authorities themselves to become case  
13 workers for all intents and purposes, correct?

14 A It's something that HUD has made available to the local  
15 public housing authorities to support additional services to  
16 expedite voucher utilization.

17 Q Well, it was a program to ask the housing authorities to  
18 basically act as case workers?

19 A To supplement, yes.

20 Q Okay. Did HUD provide any training for that program?

21 A The program is -- so far it has not, it's only in a  
22 discussion stage.

23 Whether our local PHAs ultimately adopt it is up to the  
24 local PHAs, they would be better to speak on it than us.

25 THE COURT: Just one moment, if you would pause.

1 (Pause in proceedings.)

2 THE COURT: Thank you for the pause, Counsel.  
3 Please continue.

4 BY MR. SILBERFELD:

5 Q The Designated Service Provider Program is relatively new,  
6 it was rolled out in March?

7 A It actually doesn't even exist yet in Los Angeles.

8 Q Okay. Will it be funded by either HUD or VA in order to  
9 compensate the public housing authorities who are going to be  
10 asked to do this work?

11 A Whether it's funded is up to HUD. I know that the PHAs  
12 are interested, whether it happens or not, again, I don't know.  
13 It ultimately will depend on the local PHAs to decide whether  
14 they want to pursue it.

15 Q Based on what you understand the program to be, is there  
16 funding from HUD to pay the public housing authorities to do  
17 this work?

18 A There is limited -- there is very limited funding for it.

19 Q What does that mean, sir?

20 A The PHAs essentially have to find money out of their own  
21 hide; however, there is some additional funds coming into their  
22 administrative accounts through another stream that might allow  
23 them to offset other expenses and free up money for this, if  
24 they chose to do it.

25 Q You were asked a series of questions about whether 4,000



1 permanent supportive housing units on campus is the right  
2 number and you said, "Absolutely not," correct?

3 A Correct.

4 Q What is the right number?

5 A I don't have the right number. I'm actually concerned  
6 that even 1,200 permanent supportive housing units may be too  
7 many, but we certainly could use at least 4,000 units of  
8 housing.

9 Q Okay.

10 MR. SILBERFELD: If I may approach, Your Honor, I  
11 have got one more chart to make and then I'm finished.

12 BY MR. SILBERFELD:

13 Q Mr. Kuhn, what I would like to do is have you count up  
14 with me the number of available housing units for the various  
15 types of housing you described to me earlier. Can we do that?  
16 We'll call it as of today, August 12th. All right?

17 A Okay.

18 Q Let's start with permanent supportive housing on campus.  
19 There is 233, correct?

20 A Correct.

21 Q They're 100 percent occupied?

22 A There's some turnover so there is always a couple of  
23 vacancies, but essentially yes.

24 Q And available zero, approximately?

25 A For all intents and purposes. Yes.

1 Q CTRS, now I'm going to lump together the drop-in as well  
2 as the sheds, it's 147?

3 A Correct.

4 Q There you told me about 90 percent occupied?

5 A Yes.

6 Q Let's call that 15 available.

7 A On any given night it varies, but yes, let's say that.

8 Q The project-based units throughout the community, remember  
9 the map we talked about?

10 A Uh-huh.

11 Q I'm just going to call those "PD units." There are you  
12 said 1,500 of those, right?

13 A Correct.

14 Q They're about 90 percent occupied?

15 A Correct.

16 Q So the available units would be 10 percent, call that  
17 150 --

18 A Yes.

19 Q -- approximately?

20 The bulk lease combining the two buildings is 51.

21 A Correct.

22 Q 100 percent occupied, zero available?

23 A Correct.

24 Q ABH, 32 available -- sorry, 32 units, right?

25 A Correct.

1 Q 80 percent occupied was your estimate?

2 A Correct.

3 Q So 6 or 7?

4 A I do want to point out, you're combining temporary and  
5 permanent housing if that matters.

6 Q I'm just trying to count spaces.

7 A Okay.

8 Q Call that 6?

9 A Yes.

10 Q Oasis, which is the women's facility?

11 A Yes.

12 Q 18 and you said 40 percent occupied?

13 A 8 people in it so about 40 percent.

14 Q Okay. And that would make it 12 available?

15 A 10 available.

16 Q 10?

17 A Yes.

18 Q Two more. New Directions, 100 available beds?

19 A It's actually 90 now and it's going to be 120.

20 Q Well, let's just count the ones we have today.

21 A 90.

22 Q 90. And you said 80 percent occupied?

23 A Yes.

24 Q Which means the available ones are roughly 18, correct?

25 A Yes.

1 Q Give or take?

2 A Yes.

3 Q And, lastly, the transitional housing, these are community  
4 based --

5 A Uh-huh.

6 Q -- facilities, correct?

7 A Correct.

8 Q There are 600 of those. And you said they're about  
9 70 percent occupied?

10 A Correct.

11 Q Which would mean we would have roughly 180 units there?

12 A Correct.

13 Q Okay. So just on this page it's 198. Let's just count up  
14 the first page and get a total, shall we?

15 A Uh-huh.

16 Q These two are 165, plus 6, is 171, plus 10 is 181, does  
17 that seem right?

18 A Uh-huh.

19 Q Do you agree with that?

20 A Yes.

21 Q I get a grand total of about 379. 379, does that seem  
22 about rights to you?

23 A Dedicated veterans housing.

24 Q Yes, sir.

25 A Not including tenant based factors.

1 Q Correct. Dedicated veteran housing?

2 A Yes.

3 MR. SILBERFELD: Your Honor, I would like to mark  
4 these two pages as plaintiffs' next in order. I will do it  
5 informally, 217.

6 THE COURT: 217, all right.

7 MR. SILBERFELD: And I will offer that.

8 THE COURT: Received.

9 (Exhibit 217 received into evidence.)

10 MR. SILBERFELD: That's all of the questions I have.

11 THE COURT: Counsel, do you have questions? Let's  
12 call it the second go-round, whether we call it redirect or  
13 recross.

14 MR. LOWENSTEIN: No questions for the second  
15 go-round. Thank you, Your Honor.

16 THE COURT: I want to wait until I hear from  
17 Dr. Braverman, Soboroff, Johnson, and Sherin.

18 And I may have a number of questions, but I don't want  
19 to ask you. I want to hear the whole lawsuit, and then come  
20 back and give counsel, if I still have those same questions  
21 after I hear from all of your primary experts, a couple of  
22 questions I might have. But I think it's premature right now.  
23 I may have questions at the end.

24 Now, I have no idea where we're going.

25 If this passes through a gate into what I call

1 injunctive relief, that is an equitable function of the Court.

2 And I deal in equity there, but that doesn't mean the  
3 Courts are wise. We pretend we are.

4 So, I may need, if we get to that phase, you back,  
5 Soboroff, Johnson -- I mean, a whole different world at that  
6 time. You know, try to seek in equitable remedy. Do you have  
7 any vacation plans in the next year? Just joking with you. I  
8 just want to be courteous. What do you have coming up, let's  
9 say -- because I think I'm going to move another case I have  
10 back. But I just don't know where we are until the end of the  
11 week.

12 THE WITNESS: I actually have more availability now.  
13 The second week of September, I'm out.

14 THE COURT: That is good to know. I will not  
15 inconvenience you, so if you have a spouse or whatever, you are  
16 going. Okay.

17 I want to thank you very much. Thank you very much.  
18 You may step down. It's been a pleasure.

19 Now, I tossed out something that I'm going to backtrack  
20 on.

21 Just giving me the number of buildings that are empty or  
22 partially empty may not be helpful, because you have one office  
23 in a building that could hold, you know, 150 units, so -- but  
24 when we go out there, I might get a general idea kind of what  
25 -- not building by building, but what is available and what is

1 not. And you know, this office is occupied by three offices of  
2 so and so. So I don't know if 45 buildings, if you are  
3 correct, is meaningful. I think if I was on the government's  
4 position I would say, well, Judge, 45 buildings but they are  
5 partially used, I might have an office in there. But that  
6 doesn't answer whether they could be rehabilitated or people  
7 could be put in. So I'm not sure you I'm going to have you  
8 chase that number right now.

9 But eventually, I'm going to be kind of curious of what  
10 our capacity is out there, whether subject to renovation or  
11 not. It may not be.

12 What do you want to do next? Call another witness?

13 Excellent. I love the enthusiasm.

14 Why don't you call another witness?

15 MR. ROSENBAUM: Your Honor, the plaintiffs  
16 enthusiastically call Dr. Steve Braverman.

17 THE COURT: Great.

18 MR. ROSENBERG: He's in the building. We will just  
19 go get him now.

20 THE COURT: Do you want me to take a recess now,  
21 just ten minutes while you get him?

22 MR. ROSENBERG: Yeah. Maybe ten minutes.

23 THE COURT: Why don't we take ten minutes, counsel.  
24 We will come back, and let's try to get his testimony at one  
25 time.

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(Recess.)

THE COURT: We're on the record. All counsel are present. The parties are present.

Counsel, if you would like to call your next witness.

MR. ROSENBAUM: Thank you, Your Honor. Plaintiffs call Dr. Steven Braverman.

THE COURT: Would you be kind enough to raise your right hand. The clerk is right here.

THE COURTROOM DEPUTY: Do you solemnly swear or affirm the testimony you shall give in the cause now before this Court shall be the truth, the whole truth, and nothing but the truth, so help you God?

THE WITNESS: I do.

THE COURT: Thank you very much. If you may be seated. We have got a mess up here. We will clean this up. The steps are closest to the wall.

THE WITNESS: Thank you.

THE COURT: Dr. Braverman, I have already disclosed I met you a number -- years ago, and then maybe another time out of the facility a couple of years ago. So counsel already knows we have had a meeting before.

THE WITNESS: Thank you.

THE COURT: So, if you would be kind enough to state your full name, please.

THE WITNESS: Yes. Steven, with a V, Edward,



1 Braverman, like I'm a braver man than you.

2 STEVEN EDWARD BRAVERMAN,  
3 having been duly sworn,  
4 testified as follows:

5 THE COURT: All right. Thank you. This would be  
6 direct examination by plaintiff's counsel.

7 MR. ROSENBAUM: Thank you, Your Honor.

8 DIRECT EXAMINATION  
9 (Plaintiffs' direct examination)

10 BY MR. ROSENBAUM:

11 Q Dr. Braverman, it's very nice to see you again.

12 A Thank you.

13 Q How are you?

14 A I'm well. How are you?

15 Q I'm good. Dr. Braverman, what is your current position,  
16 please.

17 A I am the network director for the Desert Pacific  
18 Healthcare Network, otherwise known as VISN 22.

19 Q And that network --

20 A I'm sorry. The Desert Pacific Healthcare Network,  
21 otherwise known as VISN, V-I-S-N, 22.

22 Q And VISN is all caps, right?

23 A That's correct. The VA Integrated Service Network.

24 Q Thank you. And that network, sir, that includes  
25 California?

1 A The four facilities and their catchment area is in  
2 Southern California, the three in Arizona, and the one in New  
3 Mexico.

4 Q And when you said Southern California, that includes Los  
5 Angeles?

6 A Los Angeles, Long Beach, Loma Linda, and San Diego.

7 Q And prior to taking that position, you were the director  
8 of the VA Greater Los Angeles Healthcare System; is that  
9 correct?

10 A Yes.

11 Q And that position, sir, you began towards the end of  
12 September 2019?

13 A Yes.

14 Q And in terms of your familiarity, you first were on the  
15 grounds of the West LA VA campus sometime in July of 2019; is  
16 that right?

17 A Yes.

18 Q And you were there for a brief meet and greet with your  
19 staff; is that right?

20 A Yes.

21 Q And I take it, sir, like your colleagues, you don't want  
22 there to be such a thing as veterans experiencing homelessness;  
23 is that right?

24 A Yes.

25 Q And when we say you don't want veterans experiencing

1 homelessness, you want no veterans to be experiencing  
2 homelessness; isn't that correct?

3 A Yes.

4 Q And one of the principle reasons that you have for this  
5 position that you have just stated, is that housing, like  
6 access to care, is a factor that affects one's health; isn't  
7 that right?

8 A Housing is a contributor to overall health. I would agree  
9 that that's one of the many, many factors that play a role in  
10 overall health, yes.

11 Q That is kind of the no brainer, right?

12 A I agree with your question.

13 Q The VA wants our veterans, who have served our nation, to  
14 have every opportunity to have the very best health they can;  
15 isn't that correct?

16 A Yes.

17 Q And in fact, every president that you and I can name in  
18 our lifetime has shared that same position; isn't that right?

19 A Well, I believe the recent ones have. I can't speak to  
20 every one in our lifetime. But that's a general statement. I  
21 would not disagree with that.

22 Q And that is presidents from both political parties?

23 A Yes.

24 Q And every secretary of the VA in recent memory has had  
25 that same position; isn't that correct?

1 A The ones that I am familiar with.

2 Q And that, again, regardless of which political party  
3 appointed that secretary to that person's position with the VA;  
4 isn't that correct?

5 A Yes. This is not a partisan issue.

6 Q It's, in fact, the official position of the VA regardless  
7 of political party, regardless of partisanship. It's something  
8 we can all agree on is; isn't that correct?

9 A I would agree with that.

10 Q In fact, it's the position of the VA that it wants our  
11 veterans, who, again, have served our nation, to have every  
12 opportunity to have the best quality of life possible; isn't  
13 that right?

14 A Yes. I believe that we would strive for that.

15 Q And part of that is, again, eliminating homelessness among  
16 the veteran population, correct?

17 A I would agree with that.

18 Q You are a physical medicine and rehabilitations doctor, am  
19 I right?

20 A Yes.

21 Q So when I call you doctor, that is the doctor that you  
22 represent here, right?

23 A Yes. I'm a PM&R physician.

24 Q And can you tell the Court, Dr. Braverman, what a physical  
25 medicine and rehabilitation doctor does?

1 A Sure. A PM&R physician is a physician who takes care of  
2 people kind of in two separate areas. One is a musculoskeletal  
3 area, associated with anything from pain to rehabilitation of  
4 musculoskeletal injuries and/or illnesses. And the second  
5 would be rehabilitation associated with neuromuscular diseases  
6 or trauma, such as spinal cord injuries, strokes, head injury,  
7 and then also things like amputations along the way. So it  
8 actually works very well in regards to taking care of soldiers  
9 or service members and veterans who may have conditions  
10 associated with their service time.

11 Q And that would include service members who have  
12 experienced severe mental illness?

13 A From the specific mental illness piece, the mental illness  
14 itself would more likely be treated by physicians and providers  
15 who treat mental illness, like psychiatrists and psychologists.  
16 But I would say that very many of the conditions that I would  
17 be involved in their treatment with have psychological and  
18 psychiatric impacts, and we would work together to address  
19 those things.

20 Q And there -- I think you anticipated my next question.  
21 Incidentally, when we say "severe mental illness," sometimes  
22 that goes by the acronym, SMI, all caps; isn't that right?

23 A Yes.

24 Q And if an individual service member suffers from SMI, what  
25 are the manifestations of that?

1           How does that present? If a veteran is diagnosed with  
2 SMI, what does that mean?

3 A       So, how I would think of that is that somebody who has a  
4 medical illness, whether that ranges from depression to  
5 schizophrenia to bipolar or other conditions, that it has an  
6 adverse effect on their day-to-day, you know, capability to  
7 carry on the activities of daily living of their lives when  
8 they are not being well treated for their condition.

9 Q       Or not receiving treatment at all?

10 A       Or not receiving treatment at all, yes.

11 Q       And when you say their daily activities, you mean basic  
12 things that you and I take for granted, making decisions,  
13 making plans for the day, just going about what you and I know  
14 is our daily business; isn't that right?

15 A       Well, I think the general spectrum is going to be  
16 different for every person.

17           The most affected, yes, might be in that condition.  
18 Others might be more associated with, you know, anxiety and  
19 other sort of things that make it hard to make decisions, or  
20 need help in making those decisions.

21 Q       Anxiety, depression, confusion, those are all  
22 manifestations that a veteran suffering SMI would potentially  
23 experience; isn't that right?

24 A       It's possible, based on the individual conditions. I  
25 can't generalize what each would be like.

1 Q Do you know what the initials TBI, all caps, stand for?

2 A That would be traumatic brain injury.

3 Q And in your specialty, sir, does that include treating  
4 individuals who suffer from TBI?

5 A Yes. And that also ranges in severity from someone who  
6 had a concussion, otherwise called mild TBI which might be time  
7 limited or, you know, have limited long-term effects, to severe  
8 TBI which might include people who have to be hospitalized or  
9 institutionalized, so there is that whole spectrum along the  
10 way.

11 THE COURT: Get that mic just a little bit closer.  
12 You are doing fine. It's just my hearing. I appreciate it.

13 THE WITNESS: No problem. Is that better?

14 THE COURT: Much better.

15 THE WITNESS: I will project if you would like, too.

16 THE COURT: Much better. Thank you.

17 BY MR. ROSENBAUM:

18 Q Dr. Braverman, assuming an individual veteran who suffers  
19 from TBI -- severe TBI as you just characterized it, if that  
20 person doesn't receive hospitalization or medical treatment,  
21 what is it like for them, living?

22 A Well, again, for the severity of any of these conditions,  
23 it's going to vary based on the severity. So, many people,  
24 even with severe TBI, do very well, have independent lives, and  
25 don't have terrible side effects or impacts on their lives. Or

1 they have secondary therapies, if you will, or I would say  
2 adaptive equipment or devices that allow them to do things like  
3 memory aids and making assistance with calendars and decisions  
4 and other sorts of things.

5           So, there are people who have limitations that may be  
6 corrected with adaptive equipment. There are people who need  
7 caregiver support. It really ranges from individual to  
8 individual. It would be hard to generalize.

9 Q       That adaptive equipment can come from meeting with  
10 physicians like yourself, isn't that right?

11 A       Yes. And the VA is actually very good at providing  
12 adaptive equipment. Probably better than any other health  
13 system to identify the needs of -- methods to assist, you know,  
14 those veterans that have those conditions.

15 Q       They certainly are.

16           And, Doctor, whether it's SMI or TBI or both, there are  
17 individuals who suffer from those who may be suicidal; isn't  
18 that correct?

19 A       Sure.

20 Q       And again, just following up on what you said a moment  
21 ago, one of the great assets of the VA medical system is that  
22 it can address those sorts of manifestations, like suicide;  
23 isn't that right? Possibility of suicide.

24 A       I think that is a priority for the VA to try to prevent  
25 suicide just as it's to try to prevent veteran homelessness.



1 Q Of course it is.

2 And are you familiar with the initials PTSD, all caps?

3 A Yes.

4 Q And what is PTSD?

5 A PTSD is post traumatic distress disorder.

6 Q And you are familiar with the symptoms and manifestations  
7 of PTSD?

8 A Yes.

9 Q Could you describe for the Court what those manifestations  
10 or symptoms are like?

11 A Well, again, there is a wide spectrum of that, but it  
12 could be that people have flashbacks to episodes that were  
13 traumatic in nature for them.

14 There could be hypervigilance, meaning that people are  
15 looking for ways to try to keep safe. There are other  
16 manifestations that may include challenges in social situations  
17 and environments.

18 Misinterpretation of activities that are going on around  
19 them, as if they are threats. And then it may also, in some  
20 cases, manifest in secondary behaviors associated with  
21 substance use disorders, as can any of those situations, those  
22 severe mental illnesses that we talked about, along with, I  
23 guess I would say depression and other symptomology.

24 Q And PTSD and SMI and TBI -- doesn't surprise you to  
25 recognize that participating in war can bring about those

1 conditions; isn't that right?

2 A I would say, certainly for PTSD, there is risk for  
3 traumatic brain injury. SMI may or may not be related to war  
4 time. PTSD, of course, could be related to things other than  
5 war time, as TBI. But yes, all of those are conditions that we  
6 encounter among our veterans.

7 Q And again, sir, it's a point of pride with you and your  
8 colleagues that the VA medical program, the VA medical center  
9 that you were the director of, those are areas of  
10 specialization in terms of dealing with those conditions; isn't  
11 that right?

12 A Yes.

13 Q There is probably no other system in this country that is  
14 more familiar with those conditions or better set up to address  
15 those conditions; isn't that right?

16 A I would say on the whole, that is very likely.

17 Q And based on your training and experience, Doctor, from a  
18 medical standpoint, just repeating what you said a few moments  
19 ago, homelessness is a factor that can affect one's health,  
20 right?

21 A Yes. It may also be affected by one's health.

22 Q Exactly.

23 And not having a home can add stressful situations for  
24 individuals; isn't that right?

25 A Yes.

1 Q And when -- you just now used the word stressful -- I know  
2 I have said it, but you agreed -- when you hear the word  
3 "stress" in the context of homelessness, what sort of stress  
4 does that bring to mind for you?

5 A Well, I think stress is a general concept. I think what  
6 you are thinking of, I would say, is distress. So that's a  
7 physiologic response to something not working the way we would  
8 like it to work. That could be based on any number of things.  
9 It could be your social situation, it could be housing, it  
10 could be the illness that you have, it could be a test that you  
11 have, or sitting in front of an attorney during trial.

12 There is any number of things that could cause stress  
13 along the way.

14 Q Well, you don't disagree that homelessness affects stress,  
15 do you?

16 A I don't disagree with that, no.

17 Q In Los Angeles, over the period of time that you have been  
18 here, you visited six to seven encampments on the streets of  
19 our city?

20 A Yes.

21 Q And the conditions that you and I have been talking about,  
22 you have observed individuals who manifest those conditions,  
23 have you not?

24 A Yes.

25 Q And you would agree, would you not, that those encampments

1 are not conducive to good health, correct?

2 A I would say that there are some people -- so in general,  
3 it's not a place that I would want to be. But at the same  
4 time, there is some comradeship and other things in some of  
5 those encampments that people find reduces their stress.

6 So, I'm not saying that that is the optimal housing  
7 situation for them to be in, but there are lots of different  
8 factors along the way.

9 Q That's a great point.

10 You are not going to ever prescribe, in your  
11 professional capacity, go out and be in an encampment, right?

12 A That's correct.

13 Q But what you are saying is that even within these  
14 encampments, the power of community can do somewhat to mitigate  
15 the pain and suffering that unhoused individuals experience?

16 A I think that is a well put way to say it.

17 Q And for veterans, in particular, being in a community of  
18 veterans, even in encampments, will have some sort of  
19 mitigating factor; is that correct? Should have some sort  
20 of --

21 A For some of those veterans, yes.

22 Q Exactly.

23 A For some of those veterans, yes.

24 Q And thinking, sir, about stable housing situations, if  
25 people don't have stable housing situations, that may well

1 result in their having less than stable access to healthcare;  
2 isn't that right?

3 I guess it may, but I'm not sure that I would document a  
4 causation there. I think that one may be able to access  
5 healthcare in a pretty consistent way whether they are in a  
6 very stable home environment or not.

7 And what I mean by that is, for example, you used an  
8 encampment example. A person who is in an encampment may still  
9 have access on a regular basis for medical care. That doesn't  
10 preclude that situation.

11 There are also homeless people that might be referred to  
12 as, you know, couch surfers or people who live out of their  
13 vehicles or other sorts of things, where, in fact, they are  
14 working, they are doing a lot of things to include healthcare  
15 that is a stable healthcare environment for them. If not a  
16 stable housing environment for them.

17 So there are contributions, but I wouldn't draw  
18 causation for everyone.

19 Q Well, again, sir, in your professional experience, you  
20 have never said to an individual "a good way of getting  
21 stability and healthcare is to couch surf or to live in an  
22 encampment," isn't that right?

23 A Yes.

24 Q And the staff that you supervised at the West LA VA  
25 center, they are not trained to say to individuals, "go situate

1 yourself on different couches or encampments to get access to  
2 healthcare"; isn't that correct, sir?

3 A It is. But what they are trained to say is to maximize  
4 one's ability to get healthcare regardless of the housing  
5 situation that they are in. That is the point I was making.

6 Q One way you have put it -- isn't it true, sir -- that is  
7 that housing is a factor in people's health, and health is also  
8 a factor in people's ability to be housed. Haven't you said  
9 that, sir?

10 A Yes. And what I was referring to, that is, that there are  
11 people who, to the point you were making, may have mental or  
12 physical disabilities that, on the more severe side of the  
13 spectrum, makes it difficult to maintain housing independently,  
14 to pay bills, to fulfill those activities of daily living that  
15 I mentioned without caregiver support or other assistance,  
16 which can drive people to situations that result in  
17 homelessness.

18 Q And another way you have put it, Doctor, is that housing  
19 is an important factor in the rehabilitation of people who have  
20 been injured in war and in service to our country. Hasn't that  
21 been your position, sir?

22 A Well, I guess that also depends on the type of  
23 rehabilitation.

24 So, what I was saying is that one can be successfully  
25 rehabilitated or treated for medical conditions despite being

1 in what you and I might consider an optimal housing situation.

2           Would it be better if somebody was in a very stable  
3 housing situation or a stable socioeconomic environment or, you  
4 know, having the travel means to get around from appointment to  
5 appointment, and other sort of things? All of those play a  
6 factor, so I would not dispute that.

7 Q       It's been, sir, your learning and your experience that  
8 90 percent of veterans who are homeless have some element of  
9 mental health disorder or substance abuse disorder or both;  
10 isn't that correct, sir?

11 A       I think that number is for the people who are getting care  
12 in the VA. I can't speak to all homeless veterans.

13 Q       So what you are telling me is that --

14 A       Among the population of veterans that we serve,  
15 approximately 90 percent have some element of -- history of  
16 substance use disorder or mental health disorder. That is  
17 correct.

18 Q       And in terms of -- sometimes it's both, right? They often  
19 co-mingle; isn't that right?

20 A       Yes.

21 Q       And in fact, your experience on the population that you  
22 were just talking to me about, you said it's about 50 percent  
23 to 70 percent in each category; isn't that correct?

24 A       Yes.

25 Q       And it's been your understanding -- you talked to me about

1 this just a few moments ago -- that individuals who are in  
2 these circumstances frequently turn to substance abuses to deal  
3 with the psychotic or the physical pain that they are  
4 experiencing; isn't that true?

5 A I'm not an expert on why people turn to substance use  
6 disorders, but I can say that there is -- there are some where  
7 that is a factor. I don't know the number for that. I don't  
8 know people's addiction potentials and other sort of things.

9 Q But that is not a surprising conclusion to you, is it,  
10 sir?

11 A It's not a surprising conclusion that some people would  
12 turn to substance use to deal with their physical or psychic  
13 pain.

14 Q And that can drive them into homelessness or keep them in  
15 homelessness; isn't that right?

16 A That can be a factor, yes.

17 Q And chronic homelessness -- are you familiar with that  
18 phrase?

19 A Yes.

20 Q Do you have a definition of it, sir?

21 A Well, I don't know if there is a specific amount of time,  
22 but it's somebody who, over a period of time, stays in a  
23 homeless situation, either by virtue of an inability to help  
24 themselves out of that situation, or not having the resources  
25 to get out of that situation, or, you know, having, as you



1 identified, a mental or physical illness that kind of prevents  
2 them from being able to independently resolve that situation.

3 Q It works both ways?

4 A Yes.

5 Q And in thinking about the causes of homelessness, I'm not  
6 asking you to quantify it, but would you agree, sir, based on  
7 your training and your experience that experiencing traumatic  
8 brain injury, that can be a contributing cause to homelessness,  
9 isn't that true?

10 A Well, I think as I -- if one doesn't have the cognitive  
11 ability to take care of themselves, and doesn't have  
12 appropriate assistance in order to do that, then that could,  
13 you know, drive towards or contribute towards homelessness.

14 Q Same thing with respect to PTSD?

15 A Again, if the PTSD was of the severity that someone was  
16 unable to make those decisions or take care of themselves, and  
17 there is a whole chain of events that could be contributed to  
18 that as well with the substance use disorder and other sort of  
19 things that we mentioned.

20 Q You are saying "yes," with that description

21 A There are all possibilities, yes.

22 Q It's not like a one in a million possibility, is it, sir?

23 A The vast majority of people with PTSD, TBI, serious mental  
24 illness are not homeless, so that's kind of where I'm coming  
25 from with this. There are people who are where those

1 conditions contribute to them, but I think it would be unfair  
2 to say if you have one of those conditions then you will end up  
3 as a homeless veteran.

4 Q I understand that, sir. But my question was a little bit  
5 different. I'm saying, it can be a cause to homelessness,  
6 isn't that right?

7 A It can be a contributor, yes.

8 Q And same thing with respect to schizophrenia?

9 A Yes.

10 Q Same thing with respect to severe mental illness?

11 A I would probably classify schizophrenia as severe mental  
12 illness.

13 Q Incidentally, sir, if you think about all the veterans  
14 over all of the years who tragically have become unhoused, that  
15 is not exclusively because of the lack of affordable housing,  
16 is it, sir?

17 A Exclusive? I think in some cases it may be. So, for  
18 example --

19 Q But that's not my question.

20 A Okay.

21 Q My question is: You wouldn't say that affordable housing  
22 for veterans who were in Iraq and Afghanistan and Vietnam and  
23 tragically suffered from traumatic brain injury or severe  
24 mental illness or PTSD, you wouldn't say that if they became  
25 unhoused, it was purely a function of lack of affordable

1 housing, isn't that true, sir?

2 A I can't say that that's true for all of those people you  
3 mentioned, no.

4 I think that affordability absolutely plays a role in  
5 some of those cases.

6 And I will give an example --

7 Q But my question is little bit different.

8 A Okay.

9 Q My question is: Would you say that the ravages of war and  
10 service to the nation can be a contributing factor, other than  
11 affordable housing, for individuals to become unhoused, our  
12 veterans?

13 A Well, my point is that it all may contribute. I can't say  
14 that there is just one magical thing that drives veteran  
15 homelessness, if that's what you're trying to ask me.

16 If you're asking me may all of these things contribute  
17 in different amounts and different ways for different people,  
18 yes. The answer to that is absolutely.

19 Q Could we turn -- can I get exhibit --

20 MR. ROSENBAUM: Excuse me, Your Honor, 154.

21 Let me hold off on that for just a moment, sir.

22 BY MR. ROSENBAUM:

23 Q You are familiar with the phrase "permanent supportive  
24 housing"; is that right?

25 A Yes.

1 Q And if I asked you your understanding of the meaning of  
2 that phrase, the meaning of the word "permanent" is pretty  
3 clear, don't you agree?

4 A Yes.

5 Q Somebody lives in a home or house on a permanent basis?

6 A Yes.

7 Q In fact, that is the core principle of the Housing First  
8 model, isn't that right?

9 A Yes. To get people housed.

10 Q To get them housed in permanent supportive housing?

11 A Well, permanent housing, whether that's supportive or not,  
12 it depends upon the individual's situations and conditions,  
13 ultimately you would like to be able to do it where support  
14 wasn't required.

15 Q The core principle of the VA's homelessness program is, in  
16 fact, the Housing First model, correct?

17 A Yes, where it's appropriate for the individual veteran.

18 Q But permanent that could be a house, it could be a  
19 contract, it could be a lease, but the point is it's permanent;  
20 is that right?

21 A That's the end-stage goal, yes.

22 Q When you had your position with the West LA VA beginning  
23 in September 2019, you spent at least part of your time living  
24 in Los Angeles; is that right?

25 A Yes.

1 Q And you spent part of your time in Texas?

2 A Not until a few years later.

3 Q Okay. So, all of 2019, once you began that position, you  
4 lived in Los Angeles?

5 A Yes.

6 Q 2020?

7 A I lived in -- I became a Texas resident part-time in 2022.

8 Q Okay. So up until then it was exclusively in Los Angeles?

9 A Yes.

10 Q And during that period of time, I'm correct, am I not,  
11 that you were living on the West LA grounds?

12 A Yes.

13 Q You were living in a house on the West LA grounds?

14 A Yes.

15 Q And the reason you were living in a house -- you paid  
16 rent, isn't that right?

17 A Yes.

18 Q And the reason you lived on the West LA grounds was so  
19 that you could be close to the medical center, isn't that  
20 right?

21 A Yes.

22 Q And you were telling me you lived in a house there.

23 Is the area of the grounds you lived in, is that South  
24 Lawn?

25 A No.

1 Q What is it called?

2 A I don't know that there is a name for that particular  
3 area.

4 Q Okay. And that house, sir, it's your understanding that  
5 that house was constructed by the VA, isn't that right?

6 A I believe that's true.

7 Q And do you still live there?

8 A I still live there part-time. Yes.

9 Q And help me out, how long have you lived there?

10 A Since September of 2019.

11 Q And in the neighborhood where you live, there are also two  
12 single-family homes; isn't that correct?

13 A That's one of the homes that I'm in, one of the two  
14 single-family homes.

15 Q Okay. And so far as you know both of those homes were  
16 built by the VA, isn't that right?

17 A I believe so.

18 Q And then there are also in the neighborhood where you are  
19 four trailer-type houses, isn't that right?

20 A Yes.

21 Q And they were brought on by the VA?

22 A Yes.

23 Q And I don't need to know the names of the persons who live  
24 there, but who is living there in terms of, say, what they do?

25 A So then there are also --

1 Q I will get to the other units.

2 A Okay. So in general the people that live there are  
3 executives, the chief of police and I think now the chief of  
4 logistics lives there, previously, the chief of CERS, our  
5 homeless program, has lived there at one time in the past, so  
6 there are VA leaders who need to be close to the campus.

7 Q And close to the medical center?

8 A And close to the medical center.

9 Q And then you started to tell me, there are also two  
10 separate duplex units; is that right?

11 A Yes.

12 Q And maybe you just answered this, but they include housing  
13 for individuals who have the same sort of positions you just  
14 described for the Court, correct?

15 A Yes. Members of the executive leadership team, for  
16 example, the chief nurse or the chief of staff, chief medical  
17 officer, that sort of thing.

18 Q Then there is one very large old house that is described  
19 as the Governor's Mansion; is that correct?

20 A Yes.

21 Q And is anyone living there?

22 A No.

23 Q That is in a state of disrepair?

24 A That's correct. It was previously designated for the  
25 director of the healthcare system.

1 Q Do you know how many bedrooms that house has?

2 A No.

3 Q More than one?

4 A Yes.

5 Q All of the -- and you're smiling because it's --

6 A Big.

7 Q -- big, correct?

8 A Yes.

9 Q And your house, sir, I don't want to get a detailed  
10 description, but how many bedrooms does it have?

11 A It's a three-bedroom house.

12 Q And it has its own plumbing?

13 A Yes.

14 Q It has cooking facilities?

15 A Yes.

16 Q Has a refrigerator?

17 A Yes.

18 Q Has an oven?

19 A Yes.

20 Q Has an air conditioner?

21 A Yes.

22 Q Sometimes your -- again, I don't want to be presumptuous  
23 here, your family that lives in Texas also?

24 A Now, yes.

25 Q Sometimes they visit you there?



1 A My wife did, yes.

2 Q Okay.

3 A My other children are out of the house.

4 Q Okay. And these are all on West LA grounds; is that  
5 right?

6 A Yes.

7 Q There are sidewalks there?

8 A Yes.

9 Q It's a little community?

10 A Yes.

11 Q And that area, sir, can you give me your best estimate as  
12 to how many units -- how many acres that is?

13 A No. I guess if I was just guessing, I'd probably say 3 to  
14 4, but I don't know.

15 Q And the trailers you describe or your trailer types, draw  
16 me a picture of what they look like.

17 A I guess I would -- yeah, I don't know what kind of picture  
18 you are looking for, but maybe I would think of double-wide  
19 trailers and a little bit, you know, larger than that. They're  
20 not houses that would come off of the property, per se. But,  
21 you know, maybe you could think about it as like a double-wide  
22 trailer house.

23 Q Do they have a kitchen?

24 A Yes.

25 Q Do they have bathroom?

1 A Yes.

2 Q Nobody has to go to port-a-potty when they want to use a  
3 bathroom?

4 A No.

5 Q How long have they been in the property, so far as you  
6 know?

7 A I think all of those were around the '50s, 1950s.

8 Q And they're all either constructed or brought on by the  
9 VA?

10 A Yes.

11 Q When you came to the West Los Angeles VA in September  
12 of 2019 -- strike that.

13 Do you know, sir, what sort of housing our veterans  
14 lived in when they were in Iraq and Afghanistan, I don't mean  
15 when they were out on missions, but when they were back. Do  
16 you know what sort of housing they lived in?

17 A Well, I think what you may be describing are what was  
18 called CHUs, standing for Containerized Housing Units, that may  
19 be what you are describing, that's what I was in when I was in  
20 Iraq.

21 Q And do you know what -- what did a unit that you just  
22 describe have?

23 A You know, what those units -- when they -- the reason why  
24 they called them those containerized housing units, think of  
25 those as like the ship containers you would see, you know, at a

1 port, for example.

2 So they were turned into units that for most soldiers  
3 they would have beds, electricity, dresser, you know, place to  
4 store your stuff. Some, usually for higher ranking officers,  
5 may have wet utilities, like a toilet or a sink in there. Most  
6 of the service members that were in these units though would  
7 have shower trailers or other hygiene locations in order to use  
8 the bathroom facilities.

9 Q When you came to the West LA VA, in September 2019, how  
10 many buildings were on the grounds that provided permanent  
11 supportive housing, as you understand that term?

12 A There was one. The Building 209.

13 Q And Building 209 had 52 units of permanent supportive  
14 housing for unhoused veterans; is that correct?

15 A Yes.

16 Q And there were certain restrictions as to who could  
17 actually be in Building 209, isn't that right?

18 A Do you mean in terms of income restrictions?

19 Q Well, I'm glad you raised that, we'll get to that.

20 A Okay.

21 Q But how about age?

22 A I don't recall there being an age restriction in 209.

23 Q You don't know if 55 years was an age restriction?

24 A I don't remember that, no.

25 Q What about mental disabilities, were there constraints as

1 to who could get in this terms of whether they experienced  
2 severe mental disabilities?

3 A I don't remember the specifics of what those requirements  
4 were for mental or for income, but I know that there are  
5 sometimes those limitations. But I don't remember what they  
6 were for Building 209.

7 Q And at the time in September of 2019 --

8 (Interruption.)

9 THE COURT: My apologies, Counsel.

10 MR. ROSENBAUM: I frequently elicit that response  
11 with my questions, Your Honor.

12 THE WITNESS: I thought it was the earthquake that  
13 you caused, I'm sorry. Go ahead. You brought it up.

14 MR. ROSENBAUM: You shouldn't have done that,  
15 Doctor.

16 BY MR. ROSENBAUM:

17 Q Dr. Braverman, at that period of time in September 2019,  
18 isn't it true that to the best of your knowledge, that there  
19 were in the neighborhood of 3,700 unhoused veterans in Los  
20 Angeles?

21 A Yes.

22 Q And for the last -- over the last few years, the number of  
23 unhoused veterans your understanding is it's been between 3,700  
24 and 4,000?

25 A Until this year, yes.

1 Q And the Building 209, Building 209, sir, who built 209?

2 A Well, 209 was an existing building by the VA, that was  
3 built by the VA that was renovated approximately 2012, 2013 to  
4 be used to house veterans in a residential treatment program  
5 called Compensated Work Therapy.

6 Q Compensated Work Therapy is sometimes known as "CWT," all  
7 caps?

8 A Yes.

9 Q CWT, sir -- well, let me strike that.

10 When Building 209 was renovated it was renovated by the  
11 VA, isn't that right?

12 A Yes.

13 Q And when it was renovated, it was renovated so it could  
14 serve as residential housing for the outpatient program of care  
15 that you just described, isn't that right?

16 A Yes.

17 Q And that was a program for therapy to be able to use work  
18 to assist in veterans' physical or mental well-being, isn't  
19 that right?

20 A Yes.

21 Q And that renovation -- so the renovation was about turning  
22 the building into rooms that would be suitable for patient  
23 residents, isn't that right?

24 A Yes.

25 Q And the notion was that that renovation would be primarily

1 for the purpose of providing access to healthcare, isn't that  
2 right?

3 A Yes. I think that's fair to say.

4 Q And the medical treatment that was associated with  
5 whatever disease situation was, that's what made though  
6 individuals a patient, isn't that right, sir?

7 A Yes, just like the domiciliary that we have on the campus.

8 THE COURT: I'm sorry, could you say that again?

9 THE WITNESS: Like the domiciliary that we have on  
10 the campus for residential outpatient treatment.

11 THE COURT: Yeah, they're not the same; is that  
12 correct?

13 THE WITNESS: It's a similar concept, but not  
14 exactly the same.

15 THE COURT: Okay, sir. Thank you.

16 BY MR. ROSENBAUM:

17 Q And I'm glad you just said what you did, you anticipated  
18 my next question. For the veterans who were in Building 209,  
19 there would be case management for them, isn't that right?

20 A I don't know -- well, there would be oversight, I don't  
21 know if I would classify it as case management or not, but they  
22 would be part of that program. I don't know all of the details  
23 of the compensated work there.

24 Q Well, when you testified to me in deposition you called it  
25 case management, did you not?

1 A Well, I would believe that I said that, I just don't know  
2 the specifics, yes.

3 Q And, however, the actual treatment that the individuals  
4 who were in Building 209 receive, that was scattered across the  
5 West LA grounds, isn't that true?

6 A Their -- yes, the work they did was in a variety of  
7 places.

8 Q I appreciate you calling it "work," but that is part of  
9 their treatment plan, isn't it?

10 A Yes.

11 Q And, in fact, they could even cross Wilshire to get that  
12 treatment, isn't that right?

13 A Yes.

14 Q There were treatment facilities also on the north part of  
15 the campus, isn't that right?

16 A Probably, yes.

17 Q And in September 2019, when you took the position as  
18 director of the VA Greater Los Angeles Healthcare System,  
19 you're aware, you were not, that there was a draft master plan  
20 for the design and construction of permanent supportive housing  
21 on the West LA VA grounds, isn't that right?

22 A Yes.

23 Q That was one of your first orders of business was to  
24 familiarize yourself with that draft master plan, isn't that  
25 right?

1 A Yes.

2 Q And that was the only draft master plan that was in effect  
3 at that time; isn't that correct?

4 A Yes.

5 Q Incidentally, sir, that draft master plan, that was a  
6 result of the *Valentini* case; isn't that correct?

7 A That is my understanding, yes.

8 Q In fact, sir, there was no draft master plan or master  
9 plan to address veteran homelessness prior to the *Valentini*  
10 case, isn't that right?

11 A Yes.

12 Q And now let -- and the draft master plan you and I are  
13 talking about, that was dated January 28th, 2016, am I right?

14 A That sounds correct.

15 Q About three years and change before you got to the West LA  
16 grounds?

17 A Yes.

18 Q So we now have Exhibit 154 in front of you. Can you see  
19 that, sir?

20 A Yes.

21 Q And when you and I have just been talking about the draft  
22 master plan that was in effect, that is the plan that we're  
23 thinking about, is it not?

24 A Yes.

25 Q And I wonder, sir, if you could turn to page 3 of that



1 master plan.

2 A Yes.

3 Q And that is the preface; is that right?

4 A Yes.

5 Q And the preface, sir, that is signed by Robert A.

6 McDonald; is that correct?

7 A Yes. The original is signed by him.

8 Q Who was Robert McDonald?

9 A At the time he was the secretary of the Department of  
10 Veterans Affairs.

11 Q He was your boss?

12 A He was --

13 Q I'm sorry, he was not your boss.

14 A Yeah, I wasn't -- well, technically he was because I was  
15 -- well, no, several months later he was when I became the  
16 director in Chicago but, yes, ultimately he would be the boss  
17 of all of us in the VA.

18 Q Incidentally, could we go back to the first page, the  
19 cover page. That's the cover page of the draft master plan?

20 A That looks familiar, yes.

21 Q And at the bottom it says, "VA Greater Los Angeles  
22 Healthcare System," and there's a logo, right?

23 A Yes.

24 Q And then you see it says, "VA healthcare." Do you see  
25 that?

1 A Yes.

2 Q This draft plan, it was a collaborative effort, but this  
3 plan that we're looking at, this document, that was prepared by  
4 the VA, isn't that right?

5 A Yes.

6 Q Okay. Now let's go back to page -- to the preface.

7 Is that in front of you now, sir?

8 A Yes.

9 Q And looking at the last paragraph, the second sentence, it  
10 says, "This land was deeded for the benefit of veterans in 1888  
11 to serve as a home for our nation's heros. This plan brings us  
12 one step closer to getting the land back to its intended  
13 purpose as an inviting, welcoming community for veterans and  
14 their families."

15 I did read that correctly, sir?

16 A Yes.

17 Q And could I ask you now, sir, to turn to page 3, or the  
18 next page. Well, that's what we call a trick question.

19 Looking at what is page 5, do you see where it says  
20 "background"?

21 A Yes.

22 Q And it says, "In March 1888, the United States received a  
23 donation of the land now comprising of the GLA campus from John  
24 P. Jones, Arcadia B. de Baker, and John Wolfskills," and I'm  
25 going to spell that name for the reporter, W-O-L-F-S-K-I-L-L-S,

1 "with the understanding and the intent for the site to be used  
2 to establish a Pacific Branch of the National Home for Disabled  
3 Volunteer Soldiers."

4 Did I read that correctly, sir?

5 A Yes.

6 Q That's part of the document that the VA prepared, correct?

7 A Yes.

8 Q And then the next sentence says, "Shortly after the Korean  
9 War, nearly 5,000 veterans called the campus home."

10 Do you see that, sir?

11 A Yes.

12 Q And, again, that's part of the document that the VA  
13 prepared; is that correct?

14 A Yes.

15 Q Now, could you turn to the section of this report -- of  
16 this report that is titled "Goals and Visions."

17 THE COURT: It's the next page.

18 BY MR. ROSENBAUM:

19 Q Is that now in front of you, sir?

20 A Yes.

21 Q And that's Exhibit 154, page 6; is that correct?

22 A Yes.

23 Q And this is page 2 of the document; is that correct?

24 A Yes.

25 Q And you see that the master plan input goals and vision.

1 When you came to the West LA VA, you read that very closely,  
2 did you not?

3 A Yes.

4 Q That was to be your guiding principles; is that correct?

5 A Yes.

6 Q In fact, that was to be the guiding principles for  
7 everybody on the West LA grounds; isn't that right?

8 A Yes.

9 Q This was the mission.

10 A Yes.

11 Q And, sir, directing your attention to this document, sir,  
12 it says at No. 5, develop a variety of high quality permanent  
13 supportive housing that is tailored to the needs of vulnerable  
14 veteran subpopulations, populations, and then in parentheses,  
15 for example, chronically homeless, severely disabled, aging  
16 veterans with disabilities, females with dependents, and other  
17 veterans suffering from significant trauma and addictions  
18 disorders that have experienced housing instability, closed  
19 parentheses, who have been prioritized to live on-site. Do you  
20 see that?

21 A Yes.

22 Q And going back to the mission plan input goals and vision,  
23 No. 2. Do you see No. 2?

24 A Yes.

25 Q And that says, "Revitalize the site to its intended

1 purpose as a home; a vibrant community that includes the  
2 development of high quality housing, tailored to priority  
3 veteran subpopulations with robust supports that promote  
4 well-being and holistic, strength based services to augment  
5 existing structure of the healthcare services."

6 Did I read that correctly, sir?

7 A Yes.

8 Q And looking at No. 4 of the master plan input goals and  
9 visions, that says, "Make certain that all on-site programs,  
10 activities, resources, and initiatives are offered in a culture  
11 that prioritizes the needs and wants and veterans from every  
12 service era, and their families."

13 Is that correct, sir?

14 A Yes.

15 Q And that was your bible; isn't that right, sir?

16 A That was the plan.

17 Q That was the plan.

18 And again, this plan was prepared and released by the  
19 United States Department of Veteran Affairs; is that correct?

20 A Yes.

21 Q And in fact, prior to your taking this position, you had  
22 conversations about making certain that this vision, input  
23 goals of vision, would in fact be implemented; isn't that  
24 right?

25 A I'm not sure what you mean by prior to taking the

1 position. It was our goal as I took the position, yes --

2 Q Okay.

3 A -- that we would want to implement this plan.

4 Q Okay. And looking at page 4 of this document, sir, you  
5 see where it says Target Populations?

6 A Yes.

7 Q And then it lists three target populations on this page.  
8 Do I have that right?

9 A Yes.

10 Q The first one is severely disabled veterans, including  
11 chronically homeless veterans; is that right?

12 A Yes.

13 Q And then it describes characteristics that lay out the  
14 sorts of disabilities, disorders that unfortunately veterans in  
15 this category have to confront every day; is that right?

16 A Yes.

17 Q And I take it you don't have any disagreement with any of  
18 these target populations for the plan?

19 A No.

20 Q And directing your attention to page Roman Numeral II,  
21 II.6 of what has been marked as Exhibit 154. Could we go  
22 there, please?

23 THE COURT: I'm sorry, could you show me -- tell me  
24 what page that was on again?

25 THE WITNESS: This previous one was on page 4, and

1 the one that is highlighted is this subparagraph 1 under Target  
2 Populations.

3 THE COURT: Okay.

4 THE WITNESS: So the actual document page 4, but  
5 page 8 on the exhibit.

6 THE COURT: Thank you very much. I appreciate it.

7 THE WITNESS: You are welcome. And it looks like  
8 we're jumping to page 44 on the exhibit.

9 BY MR. ROSENBAUM:

10 Q Correct. Do you have that in front of you, sir?

11 A On the screen, yes. Now I have it on the paper as well.

12 Q I appreciate that.

13 And you see the section that is titled in italics,  
14 Permanent Supportive Housing?

15 THE COURT: Thank you.

16 THE WITNESS: You are welcome. Yes.

17 BY MR. ROSENBAUM:

18 Q And it says, "The focus in the draft master plan on PSH is  
19 essential." Do you see that?

20 A Yes.

21 Q And PSH is permanent supportive housing?

22 A Yes.

23 Q And if I continue to use PSH, you will understand that  
24 that is permanent supportive housing?

25 A Yes.

1 Q Then it goes on to say, "Per the terms of the original  
2 grant of the land, housing on the GLA, all caps, campus, was  
3 and is intended to be used as a home for veterans, or more  
4 specifically, based on the 1888 deed, housing for disabled  
5 volunteer soldiers."

6 Do you see that?

7 A Yes.

8 Q And then it said -- I'm reading that correctly? I read  
9 that correctly, sir?

10 A Yes, I believe so.

11 Q Then it says, "The PSH focus is also consistent with the  
12 first ever federal strategic plan; opening doors, which was  
13 originally signed in 2010 and then refreshed in 2015."

14 Do you see that?

15 A Yes.

16 Q Okay. And I take it, sir -- and everything I have been  
17 reading, there is nothing here you disagree with; isn't that  
18 right?

19 A Yes.

20 Q The draft master plan, Exhibit 154, that also established  
21 a timeline for the construction and availability of permanent  
22 supportive housing on the West LA VA campus; isn't that  
23 correct?

24 A Yes.

25 Q And that timeline established certain benchmarks, am I



1 correct?

2 A Well, goals, yes.

3 Q Okay. Those goals had dates attached to them, did they  
4 not?

5 A In general, yes.

6 Q Well, specifically; isn't that right, sir?

7 A Well, I'm not sure what you are referring to.

8 Q Well, I will be happy to help you here.

9 Could we go to page Roman numeral VI.3.

10 A What page in the exhibit number at the bottom is that?

11 Q That's a great question.

12 A 165.

13 Q 165. And you see at the top it says Potential Phasing  
14 Timeline?

15 A Yes. I said there were potential goals, yes.

16 Q And let's also turn to page 15 of the Exhibit 154.

17 THE COURT: Page 15?

18 MR. ROSENBAUM: Yes, Your Honor.

19 BY MR. ROSENBAUM:

20 Q Do you see that, sir?

21 A Yes.

22 Q That's the exact same timeline, potential phasing timeline  
23 that we looked at just a moment ago; isn't that right?

24 A Yes. It looks the same.

25 Q So, it appears twice in the draft master plan?

1 A Yes.

2 Q And let's just, for ease of reference, look at the one on  
3 page 15, the timeline there. Do you see that?

4 A Yes.

5 Q And you see where it says 0?

6 A Yes.

7 Q That is all the way to the left?

8 A Yes.

9 Q That is where the arrow starts. Do you see that?

10 A Yes.

11 Q Then there are -- 1, 2, 3, 4, 5 -- six different points  
12 after that; is that right?

13 A Yes.

14 Q Okay. And 0, sir, what is the date that you understood 0  
15 to represent?

16 A Well, I would think that would be 2016 to '17 after the  
17 passage of the West LA Leasing Act.

18 Q Actually, it passed in 2016; is that right?

19 A Yes.

20 Q Then the first -- well, let's do a lot of work here.

21 With respect to each one of these points -- 60 at  
22 12 months, 150 at 24 to 30 months, 280 at 30 months, 280 at 4  
23 to 5 years, 430 at 6 to 10 years -- those are individual; they  
24 are not -- I'm not accumulating them, right?

25 A Those are serial, increasing numbers.

1 Q Right. And the cumulative numbers, they are at the bottom  
2 of each of one of these blocks; is that right?

3 A Yes.

4 Q So, we go from 0 to 60, to 210, to 490, to 770, to 1,200;  
5 is that right?

6 A Yes.

7 Q And isn't it correct, sir, that the West LA VA has not met  
8 a single one of those guidelines?

9 A Well, the first one, Building 209 was done within a year.  
10 That was 54 units. So that was the first one. After that, the  
11 answer is no.

12 Q Well, even with that one, sir, this number said 60,  
13 doesn't it?

14 A Right. Potential phasing, and it was 60. There were  
15 54 units -- 52 units. So yes, it didn't meet the 60, but the  
16 building was done by that time. The rest have been delayed,  
17 and it's approximately four years behind.

18 Q And actually, sir, just to be -- put a fine point on it,  
19 the -- Building 209 is 53 units for unhoused veterans; isn't  
20 that right?

21 A I think it's 54 total, and one for the manager, so 53.

22 Q And West VA --

23 A So, less than 60.

24 Q And west VA didn't meet any of these numbers; isn't that  
25 right?

1 A At the time, that's correct. Yes.

2 Q That would include, sir, veterans who suffer -- who served  
3 in Iraq, unhoused veterans at the time.

4 MR. ROSENBERG: Objection. Confusing.

5 MR. ROSENBAUM: Very confusing. I will restate the  
6 question.

7 BY MR. ROSENBAUM:

8 Q In 2019, there were unhoused veterans in LA. Didn't you  
9 tell me that?

10 A Yes.

11 Q And how many of those veterans have served in Iraq, sir?

12 A I don't know the answer to that.

13 Q How many of those veterans had served in Afghanistan, sir?

14 A I don't know the answer to that.

15 Q How many of those veterans had served in Vietnam, sir?

16 A I don't know the answer to that.

17 Q How many of those veterans suffer from severe mental  
18 illness?

19 A I don't have a specific number for those veterans.

20 Q Do you have a general number?

21 A Well, generally, probably in the neighborhood of half.

22 Q How many of those veterans suffered from PTSD?

23 A I don't know the answer to that.

24 Q How many of those veterans suffered from schizophrenia?

25 A I don't know the numbers for those demographic situations.

1 Q If I ask you about traumatic brain injury or any of the  
2 other conditions that you and I talked about, you are going to  
3 give me the same answer. You don't know; is that right?

4 A I don't know the specific numbers.

5 Q In fact, the VA doesn't seek to calculate those numbers,  
6 does it, sir, to your knowledge.

7 A Well, I think the VA probably has -- well, a number of the  
8 people for whom we take care of that would -- we would be able  
9 to know how many suffer from particular diseases or disorders,  
10 but I don't know that we have that data for folks that we  
11 aren't in contact with.

12 Q Incidentally, sir, in 2011, when the *Valentini* case was  
13 filed, LA was already known as the homeless veterans capital of  
14 the United States; isn't that true?

15 A That may have been true. I was still in the Army then.

16 Q Did you ever do any homework to see if that, in fact, was  
17 the situation in LA?

18 A It was high and that's why there were the various  
19 lawsuits, yes.

20 Q We can agree lawsuits make a difference, can't we?

21 A Well, I'm saying that's the information that I received,  
22 and as the -- just learning about the history of the campus,  
23 that's what I'm aware of.

24 Q Between 2011 and the development of this master plan in  
25 2016, how many unhoused veterans died in Los Angeles?

1 A I don't know the answer to that.

2 Q How many unhoused veterans died between 2016, when this  
3 plan was drafted, and today?

4 A I don't know.

5 Q How many unhoused veterans between 2011 and 2016, had  
6 their conditions worsen as consequence of living on the  
7 streets?

8 A I don't know.

9 MR. ROSENBERG: Objection. Vague.

10 THE COURT: Do you understand the question, sir?

11 THE WITNESS: Not really.

12 THE COURT: Re-ask it, counsel.

13 BY MR. ROSENBAUM:

14 Q How many unhoused veterans living on the streets of Los  
15 Angeles, between 2011 and 2016, had their medical conditions  
16 deteriorate?

17 A I have no way of knowing that answer.

18 Q And the VA has never attempted to find that number out;  
19 isn't that true?

20 A I don't know how one would find that answer out.

21 Q How about between 2016 and today, how many unhoused  
22 veterans in Los Angeles living on the streets, have had their  
23 medical conditions deteriorate?

24 I will take whatever I can get.

25 A I'm sorry. Would you repeat the question.

1 Q Of course. Between 2011 and two thousand -- strike that.  
2 Between the drafting of the master plan -- first  
3 iteration in 2016 -- and today, how many unhoused veterans have  
4 had their medical conditions deteriorate?

5 A Again, I don't know the answer to that.

6 Q If a veteran is on the streets of Los Angeles, that  
7 veteran can be brought in for emergency healthcare, isn't that  
8 true, to LA County General or different hospitals run by the  
9 City or County of Los Angeles; isn't that right?

10 A Veterans can go to -- for emergencies, they may go  
11 anywhere. Some veterans are eligible for VA healthcare, some  
12 veterans are not, so there is distinctions there as well.

13 But I don't know that I can speak to, you know, veterans  
14 that are housed or unhoused and whether their condition  
15 deteriorates over time. I have no way to know that  
16 information.

17 Q You have no way, based on your training and experience, to  
18 know whether or not veterans who are on the streets of Los  
19 Angeles, are going to see that their health conditions would  
20 deteriorate.

21 That comes as a shock to you, sir?

22 A No. I would say that there are some that probably do and  
23 some that don't, but you asked me for a number that I don't  
24 have any idea about.

25 Q Do you think it's 50/50?

1 A I don't know. I really don't have any basis to know how  
2 many people will deteriorate versus how many will stabilize  
3 versus how many will get medical care while they are homeless  
4 and improve. I don't have that information.

5 Q Incidentally, sir, if the veteran is on the street  
6 unhoused and has a heart attack or a stroke or severe medical  
7 conditions, and there is a 911 call, do you know -- is what the  
8 paramedics do is they say, you know, are you -- should I -- are  
9 you eligible for veterans care? Or do they take them to the  
10 closest hospital?

11 MR. ROSENBERG: Objection. Vague, confusing, and  
12 calls for speculation.

13 THE COURT: Sustained. Re-ask the question,  
14 counsel. I don't understand.

15 BY MR. ROSENBAUM:

16 Q There are ambulances that pickup veterans on the street  
17 who suffer serious medical conditions; isn't that true?

18 A An ambulance who comes to anyone who has been called for a  
19 medical emergency will take them to the closest medical  
20 facility to take care of them. Yes.

21 Q Exactly.

22 A Sure.

23 Q Exactly.

24 A It's true whether they are a veteran or not.

25 Q And you know where Skid Row is, sir?



1 A Yes.

2 Q How close are we to Skid Row? Today. Right here.

3 A Here?

4 Q Yes.

5 A Probably a few miles.

6 Q And do you know how big Skid Row is?

7 A I couldn't give you a mileage, acreage, but approximately  
8 six blocks or so square.

9 Q Actually, it's about 50 square blocks; isn't it, sir?

10 A Okay. So it may be.

11 Q And if a veteran on Skid Row who is unhoused, an ambulance  
12 comes to pick him up, and under the circumstances you are  
13 describing, what hospital are they most likely to go to?

14 A I don't know which hospital they would go to.

15 Q Could they go to county general, sir?

16 A I don't know which hospital they would go to.

17 Q Assume with me that they would go to a county run  
18 hospital -- are you with me?

19 A Okay.

20 Q Who picks up those medical expenses?

21 A If it determines that they are a veteran who is eligible  
22 for VA care, the VA would pick up those expenses.

23 Q And has that ever been calculated as to how much that  
24 cost?

25 A Over a year.

1 Q In any of the years we're talking about -- 2019, 2020,  
2 2021, 2022, 2023, this year. Has the cost of emergency  
3 healthcare in hospitals, in this community, ever been  
4 calculated?

5 MR. ROSENBERG: Objection. Vague and confusing.

6 THE COURT: I assume you mean for veterans; is that  
7 right?

8 MR. ROSENBAUM: Correct. Thank you.

9 THE COURT: That's what I'm assuming. Overruled.

10 THE WITNESS: So we have a calculation of the  
11 community care costs for veterans when they get emergency care  
12 and follow on inpatient care in the community, but I don't  
13 believe that it's classified or characterized based on housing  
14 status.

15 BY MR. ROSENBAUM:

16 Q Do you know how much it costs for emergency healthcare for  
17 unhoused veterans on the streets of Los Angeles?

18 A No. I just said I don't have a characterization or  
19 classification of veterans that they receive. I could look up  
20 the number or the cost of emergency and follow on inpatient  
21 care in the community in Los Angeles, but I don't have it  
22 characterized based on housing status.

23 Q So far as you know, no one in the VA has ever made that  
24 calculation; isn't that correct?

25 A I'm not aware of that calculation.

1 Q And if an unhoused veteran who needs emergency healthcare  
2 goes to, say, county general, the doctors who will triage and  
3 assist that unhoused veteran, those are county employees; isn't  
4 that right?

5 A If they are in that hospital, I would -- I assume that is  
6 the case.

7 Q And has anyone, to your knowledge, ever calculated how  
8 much time those county doctors and nurses and intake people  
9 spend on that sort of emergency healthcare?

10 MR. ROSENBERG: Objection. Vague, confusing, and  
11 now assumes facts not in evidence.

12 THE COURT: Overruled. I want to make sure you  
13 understand the question. I understand it, but that doesn't  
14 mean --

15 THE WITNESS: I think the answer is that I don't  
16 have any idea how much time people in other hospitals spend on  
17 their patients.

18 BY MR. ROSENBAUM:

19 Q Or how it takes them from other patients who they would be  
20 otherwise serving; isn't that correct?

21 MR. ROSENBERG: Same objections.

22 THE COURT: Overruled.

23 THE WITNESS: I can't speak to -- you are asking for  
24 the socioeconomic impact of the care of homeless veterans as  
25 opposed to others. I don't have that information.

1 BY MR. ROSENBAUM:

2 Q Looking at the benchmark here, the potential phasing  
3 timeline on Exhibit 154, page 15, that, sir, projects a  
4 possibility of 1,200 units of permanent supportive housing to  
5 be constructed or rehabilitated on the West VA grounds by 2030;  
6 is that right?

7 A Yes.

8 Q And, sir, that six years from today?

9 A Yes.

10 Q And do you have any projections, sir, as to the number of  
11 unhoused veterans in Los Angeles who will not have permanent  
12 supportive housing who will die by 2030?

13 A No.

14 Q Or whose medical conditions will worsen or deteriorate by  
15 2030?

16 A No.

17 Q Incidentally, sir, when you testified in your 30(b)(6)  
18 capacity, what you told me was that you had no idea where that  
19 number 1,200 was arrived at or how it was determined, isn't  
20 that true?

21 A Yes.

22 Q In fact, you told me, sir, that you never -- you were not  
23 aware of anyone ever undertaking any inquiry or investigation  
24 to determine how that number 1,200 was arrived at, isn't that  
25 what you told me sir?

1 A I wasn't aware of that, yes.

2 Q And sir, have you ever heard the phrase "tipping point"  
3 with respect to projections for housing on the VA campus?

4 A I'm not sure of that -- what you mean by that.

5 Q Well, I'm asking you a very specific question.

6 Have you ever heard the phrase "tipping point" used with  
7 respect to the construction of permanent supportive housing  
8 units on the West VA campus?

9 A I don't recall having a discussion about a tipping point.

10 MR. ROSENBAUM: If I may, Your Honor, could I just  
11 ask a few more questions? I know the reporter has been going  
12 on at it hard and your staff has, if I could ask two or three  
13 more questions.

14 THE COURT: Each of you on each side will call the  
15 recess.

16 MR. ROSENBAUM: I don't want to make this a  
17 marathon.

18 BY MR. ROSENBAUM:

19 Q The VA doesn't have any projections of veteran  
20 homelessness past 2024; isn't that correct?

21 A Yes.

22 Q And you have not seen any projections of unhoused veterans  
23 in Los Angeles for say the year 2027?

24 A That's correct.

25 Q Or 2028?

1 A That's correct.

2 Q Or, in fact, any projection for any date past today, isn't  
3 that also correct?

4 A That's correct.

5 Q And, sir, you are not aware of any discussions with the  
6 secretary of the VA, or the undersecretary of the VA, about  
7 undertaking projections of unhoused veterans for any period of  
8 time past today; isn't that right?

9 A Yes.

10 Q And, sir, so far as you know, the VA is not now in the  
11 process of preparing any projections; isn't that right?

12 A No. But I think that we're looking at whether or not  
13 there has been progress based on new initiatives that are in  
14 place.

15 Q All right. But that is not -- that's not the question I  
16 asked you, is it, sir?

17 My question is: You are not aware of the VA being in  
18 the process of preparing any projections as to the numbers of  
19 veteran homeless for any time, isn't that true?

20 A Yes.

21 MR. ROSENBAUM: Your Honor, this is a convenient  
22 time for break.

23 THE COURT: Why don't we take 15 or 20 minutes and,  
24 sir, you may step down and we will see you in about 15 or  
25 20 minutes.

1 THE WITNESS: Okay. Thank you.

2 (Afternoon recess.)

3 THE COURT: Back on the record. All counsel are  
4 present, the parties are present, the witness is present.

5 Counsel, you can continue cross-examination --  
6 I'm sorry, strike that. Direct examination.

7 BY MR. ROSENBAUM:

8 Q Good afternoon, again, Dr. Braverman, are you doing okay?

9 A I am, thank you.

10 MR. ROSENBAUM: Can we go back to Exhibit 154 again,  
11 please. And it's the page with the timeline.

12 BY MR. ROSENBAUM:

13 Q Is that page -- it's page 15, is that in front of you?

14 A Yes.

15 Q I apologize for some bad math here.

16 The last rectangle, that is where the total cumulatively  
17 adds up to 1,200 units; is that right?

18 A Yes.

19 Q And I said to you 2030 as the projected year to reach that  
20 objective, correct?

21 A Yes.

22 Q And you said, "Yes, that's currently the projection." Did  
23 I get that right?

24 A The beginning at the secure mark would be 2030 or so,  
25 2036, would probably be the 10-year part.

1 Q Well, there's what I wanted to say, if we take zero at  
2 2016, and go to the last rectangle, 6 years from 2016 is 2022,  
3 correct?

4 A Yes.

5 Q And 10 years is 2026?

6 A Well, it would be 10 years plus the 5 years, so it would  
7 be 10 to 15 more years.

8 Q I don't think my question is clear. I apologize if I'm  
9 confusing you.

10 A Yes.

11 Q Just looking at page 15.

12 A What I'm saying is the first box is 6 years. The next box  
13 is 4 to 5 more, so that would be 10 more years. Then the next  
14 box is 6 to 10 years, that would be 20, that would take you to  
15 2036 on the high end, it would take to you 2030-ish as you were  
16 saying, on the lower end.

17 Q Well, help me understand this, are you saying that that 6  
18 to 10 years is from the prior where it got to --

19 A -- future development. You mentioned when you were  
20 questioning me earlier that each box was a separate entity that  
21 gets added on to the next one. So the first box of 12, 24 to  
22 30, and 30, that is 60 months plus 12 that's 6 years, add  
23 another 4 to 5 years so that's 10 years or 11, and then add 6  
24 to 20, that's 16 to 21 years, which takes you to 2036.

25 Q So when you took your position that is how you read this



1 document, that you just told me?

2 You didn't read it as 6 to 10 years from the 2016 date?

3 A Correct.

4 Q What is correct, you did not read it that way?

5 A No, because each of these is a separate term of  
6 development so they're additive, they're not concurrent and  
7 that's, in fact, what you said when you started asking me the  
8 question.

9 Q I see. Let's go to the next page, please.

10 You see the sentence says, "Specifically after  
11 legislative enactment the proposed timeline involves developing  
12 490 units within the 30 months, 280 additional units within 4  
13 to 5 years, and 430 additional units within 6 to 10 years - all  
14 totaling 1,200 units."

15 I did read that correctly, sir?

16 A Yes.

17 Q So actually what this timeline said, was that between  
18 2022, and 2026 there would be 1,200 units of permanent  
19 supportive housing on those grounds. Isn't that what it said,  
20 sir?

21 A I think you could read it either way. Yeah.

22 Q And you read it the other way, sir?

23 A Well, no, my -- my -- that's why I said the 2030 sounded  
24 accurate is my expectation was that that 1,200 would be  
25 completed by then. So that's why I said "yes" when you asked

1 the question earlier.

2 Q So when you carried out your duties, you were carrying out  
3 the duties to get those grounds, the 1,200 units, by 2030?

4 A I was carrying out the duties to get to those 1,200 units  
5 as quickly as I could once I got there and identified that we  
6 weren't where we needed to be.

7 Q But --

8 A And it didn't matter what the time frame was, it was to  
9 get them as quickly as possible and try to get them back on  
10 track from the original plan because we were 4 to 5 years  
11 behind.

12 Q Were there others who agreed with you that it didn't  
13 matter what the timeline said?

14 MR. ROSENBERG: Objection, misstates prior  
15 testimony.

16 THE WITNESS: That's not what I said.

17 THE COURT: I will sustain that objection.

18 THE WITNESS: Yeah, I'm sorry.

19 THE COURT: Restate it, counsel.

20 BY MR. ROSENBAUM:

21 Q Dr. Braverman, are you aware of the issue regarding the  
22 landfill?

23 A Yes.

24 Q What is your understanding of that issue?

25 A So my understanding of the issue is a couple of months ago

1 we were notified actually by an inspector that came on the  
2 premises that there was a new law that had been established, I  
3 guess about a year or so ago, that for any kind of construction  
4 that was within 1,000 feet of certain types of landfills,  
5 needed to have an environmental closure plan and that this just  
6 came to light a couple of months ago. And then the team  
7 started identifying what would be required in order to build  
8 that closure approval through the County.

9 Q A couple of months ago, May or June, somewhere in that  
10 neighborhood?

11 A That sounds about right.

12 Q And, Dr. Braverman, what has the VA done since then to  
13 investigate this landfill issue?

14 A Yes, so to at least my level of understanding as the, you  
15 know, network director, first was to understand the issue to  
16 try to find out why we didn't know about it before to identify  
17 what would be required in order to close or to do that  
18 environmental closeout.

19 We were originally surprised because we had done  
20 environmental studies on everything before so I believe -- and  
21 I don't know the specific details, but I believe that GLA is  
22 either in discussions with or has contracted a consultant in  
23 order to identify what requirements would be needed to build  
24 such a plan.

25 There has been some discussion specifically about what

1 parcels are included within that thousand foot radius from the  
2 various landfill, you know, I guess area, if you will. There  
3 was one building, for example, Building 210, that was thought  
4 to be initially in that zone, one recently had a ground  
5 breaking and that permits wouldn't be allowable, but we  
6 resolved that issue because it's outside the thousand foot  
7 zone.

8           And then there's other discussions with the County about  
9 buildings that are already in progress. In the meantime, like  
10 I said, the VA is working with experts, consultants, and/or  
11 contractors. I don't know the specific details for that, the  
12 GLA team can tell you that, to, you know, identify what kinds  
13 of core sampling and other sorts of things will need to be done  
14 in order to close out the environment survey requirements.

15 Q       What's your understanding of what parcels are involved?

16 A       The parcels that are, you know, within the thousand square  
17 foot, most of those are the ones they're building along  
18 MacArthur Field and the areas that are just to the west of 208,  
19 and 205 and that I guess, quad, if you will, or triad of  
20 facilities there. So the ones that are in the process of  
21 getting constructed and renovated across the street and the  
22 ones that are in the area between there and the Arroyo where  
23 some of that landfill is.

24 Q       What is your understanding as to the number of parcels?

25 A       I don't know exactly how many parcels, I would have to

1 look at a map to see that, but based on --

2 Q Well, good fortune there is a map to your right. Do you  
3 see that?

4 A Yes.

5 MR. ROSENBAUM: With Your Honor's permission, could  
6 Dr. Braverman point out the parcels that he believes are  
7 affected by this landfill issue on the map that is to his  
8 right?

9 THE COURT: You can stand up if you'd like to and  
10 take a closer look, some of it's hard viewing.

11 A Yeah, I don't -- so, what I could say I don't know the  
12 whole circle of the radius, but, generally we would be talking  
13 -- sorry, I will get back to here, we would be talking.

14 BY MR. ROSENBAUM:

15 Q Why don't you say it out loud so we can hear you?

16 A I will, I'm thinking in my head out loud. Great, perfect,  
17 thank you so --

18 THE COURT: To orient yourself why don't you find,  
19 Building 209, 208, 205.

20 THE WITNESS: Yeah, so these are up here, Building  
21 209, 208, 205 is down here so --

22 BY MR. ROSENBAUM:

23 Q Dr. Braverman, I don't mean to cut you off -- I do mean to  
24 cut you off, but can you speak a little more slowly so the  
25 reporter can get you.

1 A Yeah, thank you. I'm used to that when I'm in the chair.

2 So these buildings that are listed as 671 MacArthur, 651  
3 MacArthur, the blue buildings, some of which haven't been  
4 constructed yet, 701 MacArthur. 701, 11 and 722 -- 711 and 722  
5 Bonsall, those would be the buildings that are impacted at the  
6 moment.

7 Q Thank you.

8 A To my -- at least looking at that area and estimating  
9 where 1,000 feet radius would be.

10 Q I take it, sir, that in your current position you are  
11 asking for periodic updates from your team; isn't that right?

12 A Yes.

13 Q And do you have an estimated number of units that the  
14 buildings you just talked to us about would include how many  
15 units?

16 A I don't know the number offhand.

17 Q Do you have a ballpark number, sir?

18 A Yeah, I would estimate in the 3 to 400 number.

19 Q And could it be around 500?

20 A I guess it could be, like I said, I don't know the exact  
21 number.

22 Much of those are not slated to start right away, so  
23 what we also don't know, to be honest, at least I don't know,  
24 is a specific time frame for how long it would take to resolve  
25 the issue with the County, and how much would actually be held

1 up as a result.

2 What I know is the one that was supposed to start with  
3 construction that is not being held up, that was the Building  
4 210.

5 The -- there is a question at the moment about occupancy  
6 permits for some of the MacArthur Field area.

7 The ones west of MacArthur Avenue, those are the next  
8 ones to be completed that were slated for this fall and winter  
9 and there's still some discussion as to whether those, in fact,  
10 will be impacted since they were started before this law was  
11 enacted.

12 Q You don't know one way or the other?

13 THE COURT: Show me 210 so I know --

14 THE WITNESS: So Building 210 --

15 THE COURT: Point right to it. Get up if you could  
16 be so kind and just to point. You may have trouble because,  
17 remember, they've taken these buildings and put street names on  
18 them now street addresses.

19 THE WITNESS: I think Building 2 is this one called  
20 790 Bonsall, Building 210.

21 THE COURT: Okay.

22 THE WITNESS: Over here to the right, so that  
23 thousand foot radius fell inside that Building 210.

24 BY MR. ROSENBAUM:

25 Q This was my fault, Doctor, if you turn the page that you

1 were just referring to --

2 THE COURT: There's a map hidden behind it, sir.  
3 Would somebody come up and help him?

4 THE WITNESS: Turn this page.

5 THE COURT: Yeah, let them do that for you, you  
6 don't have to do that. There we go.

7 THE WITNESS: Sure.

8 BY MR. ROSENBAUM:

9 Q We do this to all of our witnesses, Dr. Braverman.

10 A And I got it and that had some of the additional units on  
11 there, so I appreciate that, but I think I got the right  
12 building, 210.

13 Q Are there other buildings that are identified, that you're  
14 referring to, that this map helps you with?

15 A So 300 may also be included in that, I don't know exactly  
16 where the guideline is, so that --

17 THE COURT: Point to 300.

18 THE WITNESS: This is Building 300, which is the old  
19 kitchen, so that is slated as a mixed use building as well, so  
20 that may be where you got to the 500 number versus my 400  
21 guesstimate.

22 THE COURT: Now, on this old map.

23 THE WITNESS: Yes.

24 THE COURT: Exhibit Number -- what exhibit?

25 THE WITNESS: 1P291.



1 THE COURT: I want you to point to the area you  
2 believe -- even though it may not be as updated, this is a much  
3 older map, show me approximate area of MacArthur.

4 THE WITNESS: This is the MacArthur Field area up  
5 here.

6 THE COURT: Okay.

7 THE WITNESS: These are the buildings -- actually,  
8 these are the buildings that I was describing, the ones in  
9 MacArthur Field. This is the Arroyo area that has the  
10 landfill.

11 THE COURT: You have got new construction along  
12 MacArthur what's called MacArthur Field --

13 THE WITNESS: Right, renovation.

14 THE COURT: -- and you may have an impacted building  
15 you are circling now?

16 THE WITNESS: Right, renovation in this 156 to 158  
17 area, potentially 300, but that might be outside the radius,  
18 like I said, I haven't seen the specific circle map other than  
19 to know that 210 was considered to be outside based on the  
20 discussions I had in the last couple of weeks with GLA.

21 BY MR. ROSENBAUM:

22 Q I think you may have answered this, I don't mean to be  
23 disrespectful to you, but I take it from your testimony sitting  
24 here today you cannot tell me if and when these issues will be  
25 resolved; isn't that correct?

1 A I would say -- I would say I can't tell you when I would  
2 use the word "if," I would say the "when." So I don't know  
3 when, but I think they will be resolved and I think it will be  
4 differentially resolved depending upon the phasing of the  
5 particular projects and that sort of thing, so -- and I don't  
6 know if there's -- I will stop there. Yeah, I don't know the  
7 answer.

8 THE COURT: Who is going to make this final  
9 decision? In other words, if you are in a sense moving in, is  
10 it the County, is it the -- I don't understand.

11 THE WITNESS: No, so this a -- so the issue is the  
12 County and a couple of different agencies --

13 THE COURT: Name them.

14 THE WITNESS: Part of the County -- well, I know  
15 that I believe it's the Public Health, is one.

16 THE COURT: Okay.

17 THE WITNESS: I don't know the other for sure, but  
18 there's construction permits that are provided and then there's  
19 occupancy permits.

20 THE COURT: Right.

21 THE WITNESS: And my understanding is that the group  
22 that controls those are different, at least that's what I  
23 heard. I didn't hear the level of detail that you are asking,  
24 but we have some folks that can respond to that.

25 And that they are County agencies that I -- would be the

1 ones to make the decision on whether the environmental closeout  
2 plan is adequate or not.

3 That would be based on either the plan that we provide,  
4 which includes the information that's historic that we already  
5 have, versus if there's a requirement for other core soil  
6 samples or other sorts of things and then based on the soil  
7 samples, what remediating actions might be necessary.

8 And, you know, I don't have a timeline for that. That  
9 is one of the things that the team is exploring to figure out  
10 what all of that will take. I don't know what level of  
11 bureaucracy gets involved in the review process or the back and  
12 forth, or any of that. That is why the VA is engaging in  
13 consultants to help figure that out for groups that have  
14 already gone through that process.

15 It won't be a week. It might be a year. It might be  
16 something in between that, but I don't think it should be too  
17 much longer than that from what the folks have estimated.

18 BY MR. ROSENBAUM:

19 Q Can you tell us with 100 percent certainty that it won't  
20 been more than a year?

21 A I can't tell you that because I didn't even know that was  
22 an issue three months ago. So, no, I can't tell you what the  
23 length of time would be.

24 But I think it does speak to, you know, the overall  
25 challenges that we've had building housing on the campus.

1 There have been episodes --

2 Q Doctor, the work that was going on on the sites that  
3 you've talked about, am I correct, sir, that that work has  
4 stopped?

5 A I don't think that is correct, so not to my knowledge.  
6 No.

7 Q Has any of the work stopped?

8 A Not to my knowledge. No.

9 Q But in terms of the moving in, we don't know when or if  
10 that's going to happen?

11 A They haven't requested the occupancy permits yet, so until  
12 it's time to request those, that may be -- at least my  
13 understanding that's when there's a potential challenge, and I  
14 think the team is trying to, you know, identify ways to avoid  
15 that in discussions with the County and discussions with, you  
16 know, the experts in this area, but to my knowledge, no work  
17 has been stopped anywhere.

18 Q I asked you, sir -- strike that.

19 Have unhoused veterans been notified about the impact of  
20 the notification regarding the landfill?

21 A I don't know. I'm sorry. Go ahead.

22 MR. ROSENBERG: I'm going to a object, assumes facts  
23 not in evidence to the extent there are any unhoused veterans  
24 who are already in line for this housing.

25 MR. ROSENBAUM: Well, that's a good question.

1 THE COURT: I'm not sure I understand the question,  
2 or the answer right now, frankly.

3 BY MR. ROSENBAUM:

4 Q Let me start over.

5 Were unhoused veterans notified about being eligible for  
6 these facilities so far as you know?

7 A I don't know where the VA was in the process of building  
8 lists of people who would potentially move into those  
9 facilities. I don't know the answer to that.

10 Q Okay. Doctor, we were talking before we took the break  
11 about certain data.

12 Am I correct, sir, that you have not seen any data as to  
13 the number of years that unhoused veterans in Los Angeles have  
14 been unhoused?

15 MR. ROSENBERG: Objection, vague and confusing.

16 THE COURT: I was just saying that.

17 BY MR. ROSENBAUM:

18 Q What I'm interested in is an unhoused veteran can be on  
19 the streets different spans of time, a month, a year, 2 years,  
20 5 years, 10 years, et cetera; isn't that correct?

21 A I would say that's correct, yes.

22 Q My specific question, I'm sorry for the lack of clarity,  
23 to your knowledge the VA doesn't have any data as to the  
24 different durations of time that unhoused veterans have been on  
25 the streets; isn't that correct?

1 MR. ROSENBERG: Objection, confusing.

2 THE COURT: Do you understand the question, sir?

3 THE WITNESS: So I would say that I don't know what  
4 demographic data VA has in general when it comes to the  
5 circumstances of our homeless population. I don't know the  
6 answer to that.

7 BY MR. ROSENBAUM:

8 Q Including how long they've been on the streets?

9 A Including how long, comorbid, health conditions, any of  
10 that. I think that when veterans become known to the VA and  
11 they get entered into their by-name list and they get followed  
12 by the VA team, they can capture that information, but I don't  
13 know that there's an existing summary that speaks to an overall  
14 population based on the number of years of homelessness. I  
15 don't know.

16 I don't -- I don't know. I'm not aware of that data,  
17 but I don't follow that data at my level.

18 Q You don't follow that data when you had the position from  
19 2019 to 2023; isn't that correct?

20 A Yeah, I said I don't know about that data. I don't know  
21 if the CERS homeless program team would have some of that  
22 information, but I -- I'm not aware of that information.

23 Q Okay. You have spoken, have you not, Dr. Braverman, about  
24 AMI and veterans' disability compensation?

25 A Yes.

1 Q You've been eloquent about it.

2 A Well, thank you.

3 Q You are welcome.

4 You have spoken in the past, sir, that about AMI and  
5 veterans' disability compensation as it, in fact, affects  
6 eligibility for permanent supportive housing; isn't that  
7 correct?

8 A Yes.

9 Q And, specifically, you have spoken about how it affects  
10 eligibility for permanent supportive housing on the West VA  
11 grounds and in project-based housing throughout the community;  
12 isn't that right?

13 A Yes.

14 Q You know that "AMI" stands for Area Median Income?

15 A Yes.

16 Q And you're aware that for unhoused veterans with  
17 disabilities, there are percent AMI maximums in order to be  
18 eligible for permanent supportive housing on the West LA VA  
19 grounds; isn't that correct, sir?

20 A Yes. In general.

21 Q And for Buildings 209, 208, 207, and 205?

22 A Yes.

23 Q And the same is true with respect to unhoused veterans  
24 with disabilities, there are percent AMI maximums for  
25 project-based permanent supportive housing in Los Angeles that

1 is not on the West LA grounds; isn't that correct?

2 A Yes. And that's all variable depending upon their types  
3 of financing and the restrictions associated with that  
4 financing.

5 Q Exactly right. And that type of financing, that is not  
6 financing that is a function of the VA; isn't that right?

7 A Yes, that's correct.

8 Q That is financing that is governed by state and local  
9 entities that deal with affordable housing; isn't that right?

10 MR. ROSENBERG: Objection, confusing and it assumes  
11 facts not in evidence.

12 THE COURT: Overruled. You can answer the question  
13 if you know.

14 THE WITNESS: So the way I would answer that is the  
15 first piece is a determination of how the developers acquire  
16 their financing, and if the developers acquire their financing  
17 assistance through tax credits and other means that have been  
18 supported by the governments -- the local city, county, and  
19 state governments, then it's those entities that are putting  
20 the restrictions on eligibility of the people who are living in  
21 those units.

22 And the reason I answer it that way is because in some  
23 parts of the country, there are enhanced use leased buildings  
24 that are developed by developers that don't use that type of  
25 funding and don't have all of those restrictions, that varies



1 from municipality to municipality.

2 BY MR. ROSENBAUM:

3 Q In fact, sir, before you came to Los Angeles you had a  
4 similar position in terms of the head of medical center in the  
5 Hines project, isn't that right?

6 A Yes, the Hines VA -- well, they called it a hospital there  
7 because of the rules, but, yes, the hospital in the large  
8 complex VA hospital outside of Chicago.

9 MR. ROSENBAUM: And just for the reporter's benefit,  
10 Hines is H-I-N-D-S?

11 A H-I-N-E-S.

12 BY MR. ROSENBAUM:

13 Q Oh, my. Okay, that generally wasn't your question.

14 The HINES project, do I have that right? What should I  
15 call it?

16 A It's the Edward Hines, Jr., VA Hospital is the name of the  
17 organization, it was incorporated as a hospital versus a  
18 medical center that's a whole other story.

19 So, yes, it's the large complex medical center out in  
20 the west part of Chicago.

21 Q That is about 10 miles from Chicago?

22 A Yes.

23 Q And the sort of funding that you just talked to the Court  
24 about, that didn't have these sort of restrictions, there were  
25 two buildings at HINES for unhoused veterans, isn't that right?

1 A Yes, there were two permanent supportive housing and  
2 enhanced lease buildings on the HINES campus.

3 Q They were not financed, so far as you know, by the use of  
4 the tax credits that you have just been talking to the Court  
5 about, isn't that right?

6 A I don't know all of their financing, but this issue about  
7 AMI and income eligibility was not an issue when I was at  
8 HINES.

9 Q Now, coming back to what is an issue here, that you just  
10 told us was a function of the sort of financing that private  
11 developers utilize for purposes of bidding on housing on the  
12 West LA grounds, do I have that right?

13 A Yeah, in general terms. I'm not an expert on all of the  
14 ways in which they get finance, but that's the general model.

15 Q The VA doesn't -- you didn't tell -- strike that.

16 The VA didn't tell these developers what sort of  
17 financing they had to get, isn't that right?

18 A Yes.

19 Q They were just on their own to get the financing, and they  
20 just went about it whatever way they chose to go about it;  
21 isn't that right?

22 A I don't know if that's completely true.

23 I think when you talk with Brett Simms he may be better  
24 able to answer that. I think the ability and likelihood for  
25 developers to be able to come up with financing is part of the

1 negotiation that goes into who gets the, you know, the lease  
2 for the parcels, but as far as the specific manner, I don't  
3 think that we require a specific manner to get that funding.

4 Q Okay. And so you were 30(b)(6) on this question, were you  
5 not?

6 A On this general -- this general idea of tax credits and  
7 the impact of those restrictions on eligibility for veterans,  
8 yes.

9 Q And, again, sir --

10 A But in terms of the requirements for financing, I don't  
11 know that level of detail.

12 Q Yeah. And, sir, just to be very clear the developers,  
13 once -- they can choose the sort of financing they want in  
14 order to decide how much property they want to secure, how they  
15 want to finance it, how much risk they want to take. That is  
16 their call; isn't that right?

17 MR. ROSENBERG: Objection, assumes facts not in  
18 evidence, and compound.

19 THE COURT: Overruled. You can answer that  
20 question, sir.

21 THE WITNESS: Yeah. I don't know how they make the  
22 decisions about the types of financing vehicles that may be  
23 available to them.

24 BY MR. ROSENBAUM:

25 Q Well, they didn't consult with you, did they, sir?

1 A That's probably why I don't know.

2 Q And so far as you know, they didn't consult with anyone in  
3 the VA; isn't that correct?

4 A I don't know if that was part of their communication with  
5 the Office of Asset Enterprise Management leadership that  
6 managed those leases, I don't know the answer to that.

7 Q The -- just to complete the picture here, for permanent  
8 supportive housing units, your understanding is that  
9 service-related disability compensation is counted as income  
10 for purposes of the determining eligibility; isn't that right?

11 A At least until last week.

12 Q Well, we will get to that.

13 A Okay.

14 Q And that's a function of the fact that you've just been  
15 telling me about, private developers of the buildings on and  
16 off the grounds, in fact, receive their funding through state  
17 and local grants and tax credits; isn't that right?

18 A No. I think you asked if disability compensation was  
19 included in income calculation, that's not a function of the  
20 types of financing, that's a function of the rules in place for  
21 determining eligibility for housing.

22 So, what those -- what the limits are in terms of 30,  
23 40, 50, or 60 percent or even 80 percent AMI is a number. What  
24 goes into that calculation, at least up to now, has been a  
25 function of, you know, HUD treasury policy, if I understand it.

1 Q I really appreciate the correction, my mistake, thank you  
2 for correcting me.

3 A Sure.

4 Q The service-connected disability compensation, that  
5 results from diseases or injuries that our veterans incur  
6 during their service or resulting from their service or that  
7 their service contributed to; isn't that right?

8 A Yes.

9 Q And the higher the disability rating that a veteran  
10 receives, the higher their compensation?

11 A Yes.

12 Q But it's not exactly linear; isn't that right?

13 A No. It increases at a faster rate towards the higher end  
14 of the disability percent determination.

15 Q Perfect. So that smaller amounts get lower amounts of  
16 money?

17 A Yes.

18 Q And then there's a bigger jump when you get to 80 and 90  
19 and 100 percent service-connected disabilities?

20 A Yes.

21 Q And to your knowledge, disability compensation for  
22 veterans is not considered income by the IRS?

23 A Not -- I believe that to be the case, yes.

24 Q That's been that way forever; isn't that right, sir?

25 A I don't know. Forever is a long time, but as long as I

1 have been aware of the situation, it's not been included as  
2 income.

3 Q Okay. Now, under this system, as an example, 100 percent  
4 or more disabled has, as a rating, isn't going to be eligible  
5 for 50 percent or lower ceilings; isn't that right?

6 MR. ROSENBERG: Objection, confusing.

7 THE COURT: I understand it. I want to make sure  
8 you do.

9 THE WITNESS: I do. So for a 100 percent  
10 service-connected single veteran I believe it's now under  
11 50 percent of the current AMI in Los Angeles. It's not under  
12 50 percent in other municipalities, but it is under 50 percent  
13 in Los Angeles.

14 BY MR. ROSENBAUM:

15 Q Thank you. And what is incongruous to you is that the  
16 disabilities that unhoused veterans have some -- have in some  
17 cases, which is based on their service, are contributing to  
18 their being homeless; isn't that correct?

19 A So what is -- if I may explain my position, that might  
20 help answer some of your questions to -- so what is incongruous  
21 to me and this is what I have said publicly, is that generally  
22 the higher one's disability compensation within the VA, the  
23 more services that people are eligible for and that if we are  
24 -- if disability compensation is resulting in an ineligibility  
25 for homeless housing on that basis alone, that it's not

1 congruent with the way we treat veterans who have more  
2 disability. And that, yes, in some cases, that very same  
3 disability is contributing to the causes that are, you know,  
4 generating their homeless situation.

5 Q Thank you, sir.

6 And I'm just going to -- I don't think I can say quite  
7 as eloquently as you did, but what you are telling us is that  
8 that's inconsistent with the general principle you revere, that  
9 veterans are usually eligible for more services as they become  
10 higher rated in disability as opposed to lower; isn't that  
11 right?

12 A Yes.

13 Q And so under the system unhoused veterans are going to be  
14 ineligible for units and buildings on the campus and on other  
15 units throughout the county, correct?

16 A That may happen in some instances, yes.

17 Q And, in fact, sir, to your knowledge, the position you so  
18 eloquently just articulated, that is shared by the secretary of  
19 the VA; isn't that right?

20 A Well, I think the position of the secretary is that, you  
21 know, veterans shouldn't be penalized for eligibility based on  
22 their service-connected disabilities.

23 Q It's also the position of the undersecretary, so far as  
24 you know?

25 A As far as I know.

1 Q And are you aware that the position of the VA in this  
2 litigation was to support that policy and practice?

3 MR. ROSENBERG: Objection, Your Honor, I'm not even  
4 sure what that question means. It's confusing.

5 THE COURT: I think it's ambiguous also, just  
6 restate the question. Restate the question. I'm not taking  
7 the question from you, I'm not sure the witness understands,  
8 I'm not sure I do.

9 BY MR. ROSENBAUM:

10 Q It's okay.

11 MR. ROSENBAUM: Let's put on -- is it 217? 218,  
12 please.

13 BY MR. ROSENBAUM:

14 Q Dr. Braverman, do you have what's been marked as  
15 Exhibit 218, in front of you?

16 A Yes.

17 Q Have you seen this document before?

18 A This particular document, no. But I'm aware of the -- I  
19 have seen reports about the release.

20 MR. ROSENBAUM: Your Honor, I'm now jumbling this,  
21 but I don't want to forget this, we were going through  
22 Exhibit 154, and I want to move that into evidence.

23 THE COURT: Received. That is the 2016 master; is  
24 that right?

25 MR. ROSENBAUM: Exactly right.



1 THE COURT: Received.

2 (Exhibit 154 received into evidence.)

3 BY MR. ROSENBAUM:

4 Q Let's go back, so have you -- I don't want to -- I don't  
5 want to talk to you about something that seems unfamiliar to  
6 you.

7 Have you -- at any point read this?

8 A No.

9 Q If, with the Court's indulgence, you could take a moment  
10 and read this please to yourself?

11 A Sure.

12 THE COURT: While he's reading that, Counsel,  
13 perhaps out of curiosity and your cooperative statement with  
14 each other, do you know how long this policy existed?

15 In other words, the IRS does not count service-connected  
16 disability. The VA, for some historical period of time,  
17 counted service-connected disability as income.

18 I don't know whether that started, you know, after  
19 Korean vets, Vietnam vets. This is a change now in this  
20 administration. It wasn't the change perhaps in the past  
21 administration or the administration before. I'm just curious  
22 how long this issue has been teed up, and was this issue teed  
23 up -- I understand it was in the *Valentini* case, correct?

24 MR. ROSENBAUM: Correct.

25 THE COURT: So I notice this is 2011 since your

1 filing, it would have been teed up during what I would say in  
2 the Obama administration and the Trump administration and now  
3 with the Biden-Harris administration, we have this  
4 pronouncement.

5 Does anybody have any idea far this goes back?

6 Silence means we don't. Fair enough.

7 It's more for curiosity if this was a position taken way  
8 back when and how soon this was teed up.

9 It has certainly been on table for the Obama  
10 administration, the Trump administration and now the  
11 Biden-Harris administration.

12 MS. WELLS: Your Honor, we'll make sure that we do  
13 address that point at some point in our testimony.

14 THE COURT: Again, I'm not sure that turns on  
15 anything, I'm just curious how long this has been with us.  
16 Because it is somewhat of an anomaly, obviously, and I will be  
17 blunt about it, why the IRS would not count service-connected  
18 disability. But the VA, under whatever time period -- and  
19 folks have changed, it's a different VA, different leadership  
20 administration to administration. You happen to be on the  
21 latter, brunt end of that, but I'm just curious how far this  
22 went back and how this came into play for so long.

23 But, you know, I have already ruled that this is facial  
24 discrimination. My only hesitancy was whether I was waiting or  
25 not, but it was pretty clear to the Court after your arguments,

1 and I decided to hand down that decision earlier on rather than  
2 wait.

3 So, we will leave that to the two of you if you could  
4 help me. If not, that is fine.

5 BY MR. ROSENBAUM:

6 Q Have you had a chance to read --

7 A Yes.

8 Q This is Exhibit 218?

9 A Yes.

10 Q And how many pages is --

11 A Three.

12 Q Anything in here that came as a surprise to you?

13 A No.

14 Q And this Exhibit 218, it's dated August 8, 2024?

15 A Yes.

16 Q Do you remember when you learned this information?

17 A When it was -- I mean, when I learned the information,  
18 when it was released. I mean, as far as the specifics.

19 Q Have you completed your answer?

20 A Yeah. I mean, I learned about it when it was publicly  
21 released to the specifics of the recommendations.

22 Q Okay. And you are aware that Judge Carter issued a ruling  
23 on this matter in July?

24 A Yes.

25 Q About a month -- several weeks to a month before this

1 press release?

2 A Yes.

3 Q Now, do you see the sentence in here -- can you go to the  
4 second page for me, please?

5 Do you see where it says on page 2, quote: Every  
6 veteran deserves a roof over their head, and the Biden-Harris  
7 administration is doing everything we possibly can to end  
8 veteran homelessness, said White House domestic policy advisor,  
9 Neera, N-E-R-R-A, Tanden, T-A-N-D-E-N.

10 Do you see that?

11 A Yes.

12 Q How long has the white house known about this policy, sir?

13 MR. ROSENBERG: Objection, Your Honor. This  
14 potentially calls for information protected by executive  
15 privilege.

16 THE COURT: No. Overruled. You can answer that  
17 question, if you know.

18 THE WITNESS: I don't know how long, you know, the  
19 White House has been involved. And the White House -- I don't  
20 know with whom within the White House you are speaking of  
21 either.

22 BY MR. ROSENBAUM:

23 Q Well, you are aware that Dr. Harris went to meetings of a  
24 committee at which he made a presentation on this issue, and  
25 there were representatives from the White House that were

1 present. Isn't that true?

2 A Like I said, I don't know who you are considering to be  
3 the White House versus anybody in any of the administrations of  
4 the executive branch, but I'm saying, yes, we have raised this  
5 issue for several years. But I don't know how far back any  
6 awareness goes. That's what I'm saying.

7 Q When you say you have raised this issue for many years,  
8 you have raised it with HUD for many years; isn't that correct?

9 A I personally have raised it with VA leadership. What  
10 meetings they have had with HUD, I can't speak to. But I know,  
11 as you mentioned, that, you know, Dr. Harris has made  
12 presentations to the Interagency Council. We have had some  
13 meetings with HUD to identify potential changes in this policy  
14 and what those ramifications may be. But they're a separate  
15 agency, and they get to decide what their priorities, rules,  
16 budget, and all of that may entail.

17 So, we can make suggestions on the impact of policies,  
18 but we can't drive their policy from the VA side.

19 Q And that's been going on for years?

20 A Well, my involvement in that really came to light as we  
21 were getting ready to --

22 Q My question --

23 A -- house veterans into 205, 208, and 207, and we had  
24 veterans that were in our CTRS community that we identified  
25 that wouldn't be eligible for those buildings, and we thought

1 that they would be among the most likely beneficial recipients.  
2 That's when I started raising the issue to my leadership and  
3 making some of these public statements that I thought that we  
4 had a policy that was incongruent with the goals that we have  
5 in the VA.

6 Q And as you dug into this issue, you learned that the VA  
7 had been talking over this issue with HUD for years; isn't that  
8 right?

9 A I heard that it had come up before. I don't know how many  
10 years. Yes.

11 Q And had been talking it over with the White House for  
12 years; isn't that correct?

13 A Yeah, like I said, I don't know the definition of the  
14 White House, so that's what I'm struggling with to answer. But  
15 yes, it's a known issue, but I don't know what, at that level  
16 -- I have never been at that level -- so I don't know at that  
17 level what kinds of discussions were involved at the  
18 Interagency level because I wasn't involved with those at the  
19 time.

20 Q Now, directing your attention, sir, to page 2 of what has  
21 been marked as Exhibit 218.

22 I'm looking, sir, at the third full paragraph. It's a  
23 paragraph that begins with "HUD."

24 Do you see that? "HUD has been working with the U.S.  
25 Department of the Treasury to determine the effect of the

1 alternative income definition for HUD-VASH participants seeking  
2 housing subsidized by low-income housing credits."

3 And that is LIHC, and HUD-VASH has a hyphen between HUD  
4 and VASH. Did I read that correctly, sir?

5 A Yes.

6 Q The next sentence says, "Treasury expect to issue guidance  
7 on this issue in the near term."

8 Do you see that?

9 A Yes.

10 Q Do you know when that guidance is going to be issued?

11 A No.

12 Q Do you know what "near term" means?

13 A No.

14 Q Do you know if near term means before this case is over?

15 A I don't. I don't know how long that will be either.

16 THE COURT: I'm anxious to find out when the case is  
17 over myself.

18 THE WITNESS: Exactly. But no, I don't know. Those  
19 are --

20 BY MR. ROSENBAUM:

21 Q Do you know -- do you have any knowledge of what that  
22 guidance is going to read like?

23 A No.

24 Q Do you know if Treasury has indicated to anyone at the VA  
25 what the content of that guidance will be?

1 A I don't know personally. No.

2 Q You haven't been informed as to what that guidance will  
3 be; is that correct?

4 A Yes.

5 Q Yes, it's correct you haven't been?

6 A Yes, it's correct I have not been informed.

7 Q To your knowledge, nobody under you has been informed as  
8 to what that guidance would be?

9 A I believe -- well, I don't know if anybody else has  
10 information other than what I have, but I'm not aware of it.  
11 No one has told me what the expectation is in regards to  
12 guidance or time frame.

13 Q Thank you.

14 Now, the next sentence says, "HUD will also encourage"  
15 -- strike that.

16 This press statement, that press statement was issued  
17 under an embargoed status to media the night before it was in  
18 fact issued.

19 Isn't that true, sir?

20 A I believe you. That is a typical way in which these  
21 things work.

22 Q And it was issued the night before the first VA witness  
23 testified in this case; isn't that true, sir?

24 A I don't know when the first VA witness testified in the  
25 case.



1 Q You know who Sally Hammitt is?

2 A Sure. I don't know when she testified. I don't know if  
3 she was first. I just don't -- I mean, I'm not -- I'm not  
4 aware of those details, but I am aware that this came out on  
5 Thursday, and people were informed on Wednesday that it was  
6 coming out.

7 Q See this sentence now that says, "HUD will also encourage  
8 state and local government to make corresponding changes in  
9 their subsidy programs to ensure that all veterans experiencing  
10 homelessness have access to supportive housing."

11 Do you see that sentence, sir?

12 A Yes.

13 Q Do you have any idea what that means?

14 A What my interpretation of this is that the first step is  
15 to say that for eligibility -- or income calculations,  
16 disability compensation will no longer be used as a general  
17 process.

18 What I think this also means is that there may still --  
19 because that's a federal guideline -- there may still be some  
20 local, state, rules or laws associated with these tax credits  
21 that might have to get untangled in regards to the eligibility  
22 to fit within these new rules that HUD just established.

23 And because there is always differences between state,  
24 local, and federal interpretations and judgments and rules  
25 associated with that -- I can give examples of that -- but, so

1 I would say that this is the -- my Braverman interpretation is  
2 this is the absolute first step that had to happen in order for  
3 that to be -- for disability compensation to no longer be  
4 considered an income for any of these tax credits or other  
5 financing mechanisms.

6 Q But there are more steps to go; isn't that correct?

7 A I would think there would need to be interpretation by  
8 state and local agencies to be in line with this requirement.

9 Q And you have no idea when or if that is going to happen;  
10 isn't that true, sir?

11 A I don't know when or if that is going to happen.

12 What I will say is that --

13 Q Let me --

14 THE COURT: I want you to finish your answer.

15 THE WITNESS: What I will say is that we have good  
16 evidence that state and local legislative groups and agencies  
17 would be more likely than not to enact processes that would  
18 enable disability compensation to not be included in income,  
19 because they have already -- in several cases at the City  
20 council level, at the State legislative level -- done other  
21 actions within these limits to enable veterans to utilize units  
22 at higher levels than what previous law allowed. So I will  
23 give some example, if I may.

24 MR. ROSENBAUM: Could I -- Your Honor, I would like  
25 to just ask my questions.

1 THE COURT: Sure.

2 MR. ROSENBAUM: He's got competent counsel that can  
3 go into anything he wants.

4 THE COURT: Okay. That's fine.

5 BY MR. ROSENBAUM:

6 Q The changes at local and state that you are referring to,  
7 none of them involved removing disability compensation as  
8 income for purposes of these finance system; isn't that right?

9 A Yes. Because it was a federal rule and they tried to work  
10 around the federal rule because they couldn't overrule the  
11 federal rule. But now that that federal rule may no longer  
12 exist, that's why I'm pretty optimistic that they will take  
13 whatever steps are necessary in order to make this work at  
14 those levels.

15 Q But none of that will happen today.

16 THE COURT: Counsel. I'm going to ask a question,  
17 because some of this is just information that I understand you  
18 are not going to be privy to.

19 I have already found facial discrimination. The  
20 question is what will I do to that because we're going to get  
21 to that portion in injunctive relief regardless of any other  
22 decision.

23 I understand from counsel, I think, that Treasury is  
24 going to issue guidance at some point.

25 So, the VA is somewhat bound right now waiting for

1 Treasury.

2           What I got an uncomfortable feeling about is how this  
3 can play out with the guidance, you know, in good faith, it's  
4 coming. But from a Court's perspective, I might not agree with  
5 it. In other words, there is limitation that can be set by  
6 Treasury in the future as I am deciding whether or not  
7 injunctive relieve should be employed, and I can't wait for  
8 Treasury, or hopefully they will get ahead of me. I also want  
9 to understand, so you know before I ask the question to you,  
10 that there is the first step. You have got to have the  
11 decision by the VA to get the guidance from Treasury --

12           THE WITNESS: Decision by HUD.

13           THE COURT: I mean HUD. Okay.

14           -- to then have it reflect on your local entities  
15 to decide what to do.

16           Now, you know I have been asking counsel for both sides  
17 to get together since January or February to settle this  
18 matter, so you know how uncomfortable I am at the last moment  
19 being left with good faith or maybe Treasury changing.

20           Why hasn't also service-connected disability been  
21 removed -- in other words, let's say you are 50 percent  
22 service-connected disability rating. Treasury can come back in  
23 the future and issue guidance that this Court might not agree  
24 with.

25           I may be the first person out deciding injunctive

1 relief, you know, in a local case in Southern California, but I  
2 guarantee it will have some impact.

3 Now, I'm going to ask you do you have any information of  
4 any discussion about removing all service-connected disability,  
5 or is this going to be some kind of equation to the best of  
6 your knowledge, that leaves some people, quite frankly,  
7 standing outside, in terms of their benefits?

8 THE WITNESS: So, I'm not sure I completely  
9 understand your question.

10 THE COURT: Let me make it clear. I'm inartful.  
11 Let me say it again.

12 Why is there -- should I be concerned that I am going to  
13 get a limitation of 80 percent or 70 percent and have to work  
14 with the AMI on the local level, and why hasn't all  
15 service-connected disability been removed?

16 THE WITNESS: I see. So --

17 THE COURT: Whether I'm 100 percent or 50 percent or  
18 whatever. Because IRS has done that, they are not counting it.

19 THE WITNESS: No. I think this is an all, it's not  
20 a partial. The 80 percent --

21 THE COURT: Can I read this with confidence that  
22 this is an all?

23 THE WITNESS: Yes.

24 THE COURT: Okay.

25 THE WITNESS: And I think what 80 percent means is

1 that when you take other income that people have -- my  
2 paycheck, for example -- that if my income that I have earned  
3 income or, you know, interest income or Social Security income,  
4 if that combination, without any VA disability compensation  
5 exceeds 80 percent, then --

6 THE COURT: So, no matter what I write in terms of  
7 injunctive relief whether the Treasury has issued guidance or  
8 not, I also may be at the whim of local calculations, let's  
9 say, and how the local folks compute my income.

10 THE WITNESS: Right.

11 THE COURT: I mean --

12 THE WITNESS: I think what the issue, when you hear  
13 from Dr. Harris -- he's got more expertise on this than I do  
14 for the specifics -- but my understanding, at my level, is that  
15 some of the bonds and tax credits were put together initially  
16 through guidance associated with HUD and Treasury.

17 THE COURT: Okay.

18 THE WITNESS: And that there may be some limitation  
19 on whether certain of those tax credits -- excuse me -- may or  
20 may not adhere strictly to the new HUD definition. Treasury as  
21 to say, yes, it will.

22 THE COURT: I want to apologize to both of you. It  
23 was fresh on my mind. I appreciate, counsel, your forbearance,  
24 and you have answered. Now I'm going to turn it back over to  
25 you.

1 MR. ROSENBAUM: You know, I'm really glad you raised  
2 exactly what you raised.

3 THE WITNESS: Yes.

4 BY MR. ROSENBAUM:

5 Q Where this press release says, "HUD will also encourage,  
6 state and local governments to make corresponding changes,"  
7 that is not the same thing as HUD will also mandate state and  
8 local governments to make corresponding changes, because HUD  
9 can't do that; isn't that right?

10 A Yes.

11 Q And so, sitting here today, you cannot tell Judge Carter  
12 with a 100 percent certainty that in determining eligibility  
13 for unhoused veterans with disabilities for permanent  
14 supportive housing either on the VA grounds or in the  
15 community, that that will not be counted as income; isn't that  
16 true, sir?

17 A I can't say it with certainty, but I would say it with  
18 very high likelihood because of the efforts that these  
19 organizations have already put forth to work around that  
20 initial limit, which now has been removed.

21 So, I would be shocked if that didn't come to pass.

22 Q Well, sir, have you had any conversations with any of the  
23 State and local entities about what they are going to do?

24 A The conversations that I have had --

25 Q My question is: Have you had any conversations with state

1 or local entities as to what they will do in light of this  
2 press release?

3 A So, I was trying to answer.

4 I have not had any since this press release came out.

5 Q Okay.

6 THE COURT: What that means -- did you have some  
7 before?

8 THE WITNESS: Yes. That's what I was trying to get  
9 to get to.

10 THE COURT: Answer the question.

11 THE WITNESS: So, as we were talking about  
12 alternatives with local agencies with legislative stakeholders,  
13 there was a great belief that if disability income --  
14 disability compensation was no longer counted as income, then  
15 that would resolve the eligibility issues and that folks would  
16 support that.

17 One of the challenges was also to try to ensure, though,  
18 that that disability compensation was included in the  
19 contribution calculation for the subsidy that people would get,  
20 so that they would still be eligible but they would still pay a  
21 fair share based on the amount of money that they had. Part of  
22 the reason for that was because of the budget that was  
23 available or is available to HUD for these subsidies.

24 And if all of the sudden every veteran didn't have to  
25 pay, you know, any funds associated with that disability



1 compensation --

2 THE COURT: Any service-connected --

3 THE WITNESS: Service-connected disability

4 compensation, right. So -- but every veteran who no longer  
5 would have their disability -- service-connected disability  
6 compensation counted towards contribution, then that would be a  
7 huge offset that all of a sudden the government would pay, that  
8 isn't affordable and -- you know, billions of dollars. I don't  
9 know the exact amount.

10 But if we could get the disability compensation taken  
11 out of the income calculation for eligibility, we would be able  
12 to ensure that that, in and of itself -- that disability, that  
13 compensation by the government for their service to their  
14 nation, wasn't a detriment to being eligible for supportive  
15 services through HUD-VASH.

16 Q Do you see anything in this press statement that says that  
17 is a done deal?

18 A That it's a done deal?

19 Q Yes.

20 A No. I said there needed to be evaluation and work done to  
21 make sure that that was the case, but I believe that this is  
22 the biggest step that had to happen.

23 Q And do you see anything in this press release that tells  
24 us when these various steps are going to take place?

25 A I don't. I have answered that. I don't know the answer

1 to that.

2 Q Incidentally, following up on one of Judge Carter's  
3 questions, this process, this has been in existence as long as  
4 you have been in the VA; isn't that right?

5 A Yes.

6 Q Okay. Dr. Braverman, you would agree, would you --

7 MR. ROSENBAUM: I will move this into evidence, Your  
8 Honor.

9 THE COURT: Pardon?

10 MR. ROSENBAUM: Exhibit 218, I would like to move  
11 into evidence.

12 THE COURT: That is 218?

13 MR. ROSENBAUM: Correct.

14 THE COURT: Received.

15 MR. ROSENBAUM: Thank you.

16 (Exhibit 218 received into evidence.)

17 BY MR. ROSENBAUM:

18 Q Dr. Braverman, you would agree, would you not, that in  
19 thinking about veteran homelessness, one of the things we know  
20 --

21 MR. ROSENBAUM: That's all right. Every time I  
22 change subjects.

23 THE COURT: I'll disclose to you, the drone strikes  
24 in Ukraine. Keep up.

25 BY MR. ROSENBAUM:

1 Q You would agree, would you not, sir, that in thinking  
2 about ending veteran homelessness, one of the things we know,  
3 to use your words, is that there is great potential for  
4 recidivism for many veterans who go into permanent supportive  
5 housing?

6 A I'm sorry. I was thinking about the drones in Ukraine.  
7 Could you repeat that -- since the Braverman part of my family  
8 comes from Ukraine. I'm sorry. Could you repeat the question.

9 Q Sure. You would agree that in thinking about veteran  
10 homelessness, one of the things we know, in your words, is that  
11 there is great potential for recidivism for many veterans who  
12 go into permanent supportive housing?

13 A Yes.

14 Q And that's one reason why supportive wraparound services  
15 are so important in order to maintain stability to stay in  
16 housing; isn't that right?

17 A Yes.

18 Q And if we could just reduce this to a mantra, you want to  
19 get the veterans into permanent supportive housing right away,  
20 and you want to keep them there; is that correct, sir?

21 A In some cases. In some cases they have to go into other  
22 transitional housing programs first in order to get treatment,  
23 sobriety, et cetera, so they will be more successful once they  
24 get into permanent housing.

25 Q Thank you so much for that correction.

1           We need to get them into some sort of treatment plan or  
2 program or housing, and then we got to keep them there. And we  
3 have to do it right away, agreed?

4 A       As quickly as they are willing to participate and do that,  
5 yes.

6 Q       And as quickly as the VA can; isn't that right, sir?

7 A       Yes.

8 Q       And when you testified, sir -- well, isn't it true, sir,  
9 that many -- strike what I said, please.

10           Many unhoused veterans, sir, have not had healthcare for  
11 quite a while; isn't that right, sir?

12 A       Yes. I believe that there are many that have not had  
13 healthcare, yes.

14 Q       And the conditions that they live in on the streets, you  
15 have said now many times, don't contribute to healthy  
16 individuals; isn't that true, sir?

17 A       They can be a barrier and obstacle, yes.

18 Q       A huge barrier; isn't that right?

19 A       Probably, yes.

20 Q       And that is more reason why wraparound services, as part  
21 of the VA's permanent supportive housing program, getting  
22 unhoused veterans into healthcare is so beneficial and so  
23 important for these veterans; isn't that true, sir?

24 A       Yes. That definitely makes a difference.

25 Q       Yeah.

1 Do you know how many veterans died on the streets during  
2 the pandemic?

3 A No. I'm sorry.

4 MR. ROSENBERG: This objection is as to where.

5 MR. ROSENBAUM: In Los Angeles.

6 THE COURT: Sustained. In Los Angeles.

7 THE WITNESS: No.

8 THE COURT: County or city, counsel?

9 MR. ROSENBAUM: Both. City, county, or both.

10 THE WITNESS: No.

11 BY MR. ROSENBAUM:

12 Q Okay. Or within the catchment area?

13 A No.

14 Q Or West LA.

15 During the pandemic, the VA in Los Angeles utilized ride  
16 share to be able to transport veterans to the hospital on VA  
17 grounds or back to where the veterans needed to go; isn't that  
18 correct?

19 A Yes.

20 Q And the VA determined that that was a very beneficial  
21 service for getting veterans to and from their appointments;  
22 isn't that true?

23 A Yes.

24 Q There were veterans unhoused veterans, sir, who did not  
25 have the wherewithal, or could not afford transportation, or

1 didn't own transportation, or didn't qualify for beneficiary  
2 travel; isn't that correct sir?

3 A I'm sorry. Could you repeat that.

4 Q Sure. I can even break it down. There were veterans who  
5 did not have the wherewithal to get that transportation; isn't  
6 that true?

7 A Probably, yes.

8 Q And there were veterans who could not afford that  
9 transportation; isn't that true? Unhoused veterans.

10 A Yes.

11 Q And there were veterans who didn't have cars or other  
12 means of transportation; isn't that true?

13 A Yes.

14 Q And you know what beneficiary travel is?

15 A Yes.

16 Q There were veterans, unhoused veterans who didn't qualify  
17 for beneficiary travel; isn't that true?

18 A Yes.

19 Q There were veterans who lived miles and miles and miles  
20 away from the West VA campus who didn't have the capacity to  
21 arrange transportation; isn't that true, sir?

22 A Yes.

23 Q That is still true today; isn't it, sir?

24 A Yes.

25 Q And do you know what the cost of this ride share service

1 was to the VA?

2 A No. I don't know specifically.

3 Q Does every veteran who was in project based permanent  
4 supportive housing off campus have a car?

5 A Probably not.

6 Q That is true back in the pandemic and it's true today;  
7 isn't that true, sir?

8 A I believe that to be true. I don't know how many have  
9 cars.

10 Q And the VA -- strike that.

11 The service that -- the ride share service we're talking  
12 about, that began in late 2020; isn't that right, sir?

13 A Yes.

14 Q And it ended in May 2023; isn't that correct?

15 A Yes.

16 Q And it has not been renewed; isn't that right?

17 A Yes.

18 Q And sir, isn't it also true, that the VA has never  
19 calculated the cost to veterans health in not having  
20 transportation?

21 A The cost to health? I don't know of any such calculation.

22 Q Or even the financial cost in terms of how their  
23 conditions deteriorated and what that meant, even in economic  
24 terms, to what it costs for treatment, assuming they ever got  
25 treatment. That's never been calculated has it, sir?

1 A I don't know what attempts -- there are calculations from  
2 health services researchers and other sort of things, but I'm  
3 not aware of specifics to that end.

4 Q Dr. Braverman, are you familiar with the program that goes  
5 by the acronym cap D, cap E, cap M, cap P, cap S?

6 A No.

7 Q You are not familiar with the DEMPS program?

8 A Oh, I'm sorry. I was thinking you said "cap D." I didn't  
9 realize you were spelling out an acronym.

10 Q My mistake?

11 A Yes, I'm familiar with DEMPS, D-E-M-P-S. It was the cap  
12 piece that got me confused. I'm sorry. I'm familiar with  
13 DEMPS.

14 Q DEMPS stands for Deployment Emergency Medical Personnel  
15 System, am I right?

16 A Yes.

17 Q And DEMPS was a program that contacted a number of  
18 veterans and helped them get into permanent supportive housing,  
19 am I right?

20 A We used that program to do that, yes.

21 Q And it was a program that utilized VA case managers and  
22 social work assistants; isn't that true?

23 A Yes.

24 Q And these were case managers and they were social workers  
25 who were part of the VA team; isn't that right?



1 A Yes.

2 Q They were VA employees?

3 A Yes.

4 Q They know and they care about these vets. That is their  
5 job; isn't that right?

6 A Sure.

7 Q And, sir, the travel cost for DEMPS, that was borne by the  
8 VA; isn't that right?

9 A Yes.

10 Q And the VA case workers and the social workers, they  
11 worked rotations, and those rotations could be two weeks, four  
12 weeks, six weeks; is that right?

13 A Yes.

14 Q And, sir, in your official capacity, you thought DEMPS was  
15 great, isn't that right, a very beneficial program?

16 A I thought that what we used DEMPS -- what we used for that  
17 six week period of time was beneficial to help get more  
18 veterans engaged in our homeless outreach and search for  
19 housing, yes.

20 Q Do you know how many veterans were assisted?

21 A I don't know the specific number, no.

22 Q Do you know the number of unhoused veterans who were  
23 assisted?

24 A Well, all of the veterans that were assisted in this  
25 program were unhoused.

1 Q Perfect.

2 And the DEMPS program, as you and I have been discussing  
3 it, it was not extended; isn't that true?

4 A Yes.

5 Q Yes, it's true it was not extended?

6 A Yes.

7 Q And how long was it actually in operation?

8 A For approximately six weeks.

9 Q And your understanding is that the reason given for the  
10 decision not to extend, it was resource utilization; isn't that  
11 right?

12 A Not completely. So, that was part of it, but in a broader  
13 sense, the DEMPS program is designed for emergency response  
14 that usually we think of in terms of hurricanes and earthquakes  
15 and floods and that sort of thing. So there are great time  
16 limited responses, and so this was a pilot to try to utilize  
17 that system to increase the number of homeless veterans with  
18 whom we could provide outreach and search for housing. These  
19 take employees from other healthcare systems across the country  
20 to come, in this case to Los Angeles, and assist.

21 But there is a limit to how much that can happen until  
22 it starts to degrade the operations at other facilities.

23 And at the same time, we need to make sure that that  
24 remains available for some of these environmental emergencies  
25 that occur along the way.

1 Q Exactly where I was going, sir.

2 So, in other words, the employees who came in, they were  
3 taken from someplace else.

4 A Yes.

5 Q And they were not replaced?

6 A Not during the time that they were working with us.

7 Q All right.

8 MR. ROSENBAUM: Your Honor, I can keep going. This  
9 is a breaking point. I don't want to -- whatever you would  
10 like.

11 THE COURT: Each side will call their time to  
12 recess, okay. Is this good for you?

13 MR. ROSENBAUM: Good for me.

14 THE COURT: Okay. Sir -- now, 8:30 tomorrow still  
15 good for all of you? Comfortable?

16 MR. ROSENBERG: Yes, Your Honor.

17 THE COURT: Not 5:30. I'm just joking. Okay. 8:30  
18 then.

19 Dr. Harris, you may be testifying, apparently. I have  
20 already heard one objection concerning executive privilege.  
21 I'm not sure what your testimony will be. If we're going to  
22 run into that issue, let me do start doing some research.

23 First of all, I have overruled the initial objection  
24 because I don't think it's well-founded in terms of when you're  
25 meeting. But the content may have executive privilege attached

1 to the actual content, so kind of give me a heads-up so I'm  
2 making the best rulings possible, and I'm foreseeing -- when  
3 will you be testifying? After the break, do you think, the  
4 following week?

5 MS. WELLS: No. We understand that Mr. Harris is  
6 going to be -- Dr. Harris will be a witness after Dr. Braverman  
7 is finished.

8 THE COURT: Dr. Braverman, why don't you go home and  
9 come back at 8:30. Let me engage counsel for just a moment.  
10 This doesn't have anything to do with you. Drive safely, okay?

11 THE WITNESS: Okay.

12 THE COURT: See you tomorrow at 8:30.

13 Why don't you two meet and confer for just a  
14 moment, so I'm not taking your time, then forewarn me and maybe  
15 we have some research we need to do tonight. So just have a  
16 little discussion -- how many objections we're going to run  
17 into, what kind of content there might be, what the concerns  
18 are -- so I can give you my best ruling. I will sit here while  
19 all of you folks meet.

20 If we need to get some briefing tonight, so be it. If  
21 we need to get some argument tonight, we will.

22 (Off-the-record discussion between counsel.)

23 MR. ROSENBERG: Your Honor, we still need to confer  
24 some more regarding the privilege issue that the Court  
25 identified, but it will not arise, certainly, tomorrow. So,

1 let's --

2 THE COURT: Then stay focused. Go home. Get some  
3 rest. I want your best focus on both sides, then.

4 8:30. Okay. Have a good evening.

5 MR. ROSENBERG: Thank you, Your Honor.

6 (The proceedings concluded at 5:26 p.m.)

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