



INFORMATIONAL MEMORANDUM

TO: Planning and Community Development Committee

CC: Mayor Ekberg

FROM: Rachel Bianchi, Deputy City Administrator

DATE: ~~March 8, 2021~~ March 29, 2021

SUBJECT: Follow-up on King County's Health Through Housing Presentation

ISSUE

On Monday, February 22, 2021 staff from King County presented to the Council an overview of the Health Through Housing Program. King County is seeking to purchase existing hotel/motel buildings within cities on a voluntary basis to provide rapid rehousing for chronically homeless individuals.

DISCUSSION

King County has indicated – and legislation currently moving forward in Olympia mandates – that implementation of this program within cities must be done on a voluntary basis. Before Tukwila determines whether it will be a “willing city,” staff recognizes that the Council and community have many questions that must be answered. Staff recommends that the Committee develop a preliminary set of questions at the March 15, 2021 Planning and Community Development Committee meeting. A draft list is attached to this memo, which was culled from questions asked at the February 22, 2021 meeting, as well as from public social media posts on the topic and public comment received to date. Staff will return to the Committee on April 5, 2021 with available answers.

In addition, staff recommends that IF the Council is willing to move forward as a “willing city,” that the City remove the Tukwila International Boulevard (TIB) neighborhood and the Central Business District (CBD) from consideration. For various and different reasons, these two areas of the City are not good candidates for this program. The TIB neighborhood continues to be an emerging one, and ongoing planning and zoning deliberations will be coming before the Council later this year. These issues should be resolved to better understand the future of this critical neighborhood in Tukwila. As to the CBD, because this is a critical economic engine for the City and state, and is an employment, retail and entertainment district, it is not a good fit for this program. As Tukwila moves forward with investigating whether to participate in this program, there may be other criteria the Council wants to develop before moving forward with the program.

Attached is a document that builds upon the March 22, 2021 Planning & Community Development Committee discussion and compiles questions from Committee and community members. Staff has inserted the available responses culled from two fact sheets developed by the County, also attached. Questions for which there are no responses will need to be answered in consultation with King County, and some depend on policy direction from the City Council. Ultimately, if there is interest in proceeding with a discussion with the County, some of these issues could be covered in an agreement between the City and County. Staff is seeking direction from the Committee as to whether it should initiate such discussions with the County.

RECOMMENDATION

Staff is seeking Committee feedback and addition to the preliminary questions on the Health Through Housing Program as it relates to Tukwila. In addition, staff is seeking Committee guidance on whether it concurs with the recommendation to remove the two areas specified above from consideration. This discussion should not be construed as designating Tukwila a “willing city,” but is to provide a framework and basic guidance for initiating discussions with the County on a potential role for Tukwila in this program.

ATTACHMENTS

Preliminary list of questions on the Health Through Housing Program with publicly available answers

Health through Housing Frequently Asked Questions (prepared by King County)

Health through Housing Proposal Summary (prepared by King County)

Questions on Health through Housing Program

(compiled from various sources including members of the Council and community)

1. How is it funded?

The State Legislature passed HB 1590 in 2020, which allowed jurisdictions to enact a 0.1% sales tax to provide housing for chronically homeless individuals.

2. What is the goal?

The County's goal is to house 45% of the currently chronic homeless population, while reducing racial-ethnic disproportionality – roughly 2,200 people – by October of 2022

3. What will be the measure(s) of success?

Beyond reducing the number of people experiencing homelessness in a significant way, staff is unaware of other measures.

4. How long will the Health through Housing program last?

The program is expected to go in perpetuity and will be governed by the Initial Health through Housing Implementation Plan upon adoption by ordinance in June of 2021. In 2028 and every eight years after that, the executive will propose an update to the Health through Housing Implementation Plan.

5. How many cities may/will be involved?

Unknown at this time.

6. How many facilities will be involved?

Unknown at this time.

7. Where could such a facility be located in Tukwila?

This depends on the policy direction from the City Council.

8. What zoning designation would the facility use fall under, and would the city consider changing zoning to accommodate this facility?

This depends on the policy direction from the City Council.

9. Is the facility considered a shelter or multifamily housing?

Staff believes it would be considered a shelter.

10. Would the facility be subject to the City's rental housing inspection and licensing program?

Not currently, but that could change depending on the policy direction of the Council.

11. Who qualifies for this housing?

All households served with these funds must earn at or below 30% of Area Median Income and meet the following qualifications, per the authorizing legislation:

- a. Persons with behavioral health disabilities;
- b. Senior citizens;
- c. Persons with disabilities;
- d. Domestic violence survivors;
- e. Homeless or at-risk of being homeless. Families with children' or
- f. Unaccompanied homeless youth or young adults.

Households also must meet one of the following definitions:

- a. A household experiencing chronic homelessness must include an adult with a disability and either be currently experiencing homelessness for at least 12 consecutive months or have experienced homelessness for a cumulative 12 months within the prior three years.
- b. A household at-risk of homelessness describes a household that includes an adult with a disability and meets two additional criteria:
 1. Currently experiencing homelessness for 10-12 months in the previous three years or previously experiencing homelessness for 12+ months within the last five years; and
 2. Include one adult that has been incarcerated within the previous five years, or been detained or involuntarily committed, or identifies as a member of a population that is demographically overrepresented among persons experiencing homelessness.

12. Will there be barriers to becoming a resident?

“Ongoing availability of HTH units to chronically homeless individuals is behavior-based. Each resident receives a code of conduct and a program agreement at the time of entry. These cover expectations for things such as visitors, accessing services, interpersonal behavior, etc. If residents are not able to comply with the code of conduct and the terms of the agreement, they may be asked to leave the program. These rules are balanced with the recognition that many people experiencing chronic homelessness will require support as they transition into their housing, and the goal of the program is to provide emergency housing for people who might otherwise live unsheltered.”

13. Should Tukwila residents be prioritized?

An amendment to HB 1070, which will give the County authority to use these funds for existing construction, requires that the “15% of the units provided at that facility to be provided to individuals who are living in or near the city in which the facility is located, or have ties to that community. The provisions of this subsection ...do not apply if the county is unable to identify sufficient individuals within the city in need of services that meet the criteria...”

14. How many chronically homeless individuals will be served?

The County’s goal is to house 2,200 individuals by October of 2022.

15. Are families eligible?

Yes. See answer to number 11 above.

16. Are there maximum income limits to qualify?

Yes. See answer to number 11 above.

17. How long will individuals or families stay in the units, on average?

Unknown at this time. However, this response from a County fact sheet applies: “Health Through Housing is a housing program. There is no limit on length of stay. However, when appropriate, housing case managers will work with residents on securing alternate, long term housing while providing services to improve residents’ health. This is important so that HTH sites are able to serve new local residents.”

18. Will there be such demand for the program to necessitate a waiting list?

Unknown at this time. However, this would only cover housing for 45% of the current homeless population in King County.

19. Is this long-term or temporary housing? If temporary, what are the next steps for residents to find more permanent housing?

See answer to Number 17 above.

20. If the goal is to help people transition into stability, what is the pathway to this goal?

See answer to Number 17 above.

21. Is this effort meant to respond to houselessness or homelessness (the latter implies a holistic approach including stability, recovery and healthy relationships)?

Staff is unable to answer this question.

22. Will the facility have 24/7 staffing including both security and service providers?

“All Health through Housing facilities will have:

- a. Building Security
- b. Housing Case Management
- c. Connection to Medical and Behavioral Health Services
- d. Assistance in enrolling in entitlement programs and employment programs where appropriate”

23. What wraparound services will be available onsite?

Staff does not have details on this at this time, except what is included in the answer to Number 22.

24. Who will provide these services?

Staff understands that the County is going through a Request for Proposals (RFP) process currently for service providers.

25. Are support services budgeted per unit?

Unknown at this time.

26. Will those refusing services be asked to leave?

See answer to Number 12.

27. Will each individual have a case manager, and what will that case management load be?

Yes; case management unknown and likely up to the provider.

28. How will residents be located in the facility (ex. will families be separated from individuals, will genders be separated, will certain areas be off limits to certain other residents)

Specifics are unknown at this time.

29. How will safety be ensured for residents both in and near the facility?

The County indicates there will be 24/7 on-site security.

30. How will safety be ensured for businesses near the facility?

The County indicates there will be 24/7 on-site security.

31. Will common kitchens be built at the facility?

Unknown at this time.

32. Will drug and/or alcohol use be permitted in the individual units?

Unknown at this time.

33. Is it possible that children would be cohoused with people experiencing alcohol or drug use disorder?

Unknown at this time. However, best practice in shelters is to have separate facilities for families with children.

34. How will a recovery culture be promoted?

Unknown at this time.

35. Will there be drug tests or background checks to screen for criminal behavior including sex offenses?

Unknown at this time.

36. Will residents have restrictions on access to come and go from the facility during certain times of day?

No.

37. Will there be safeguards in place to ensure there is no illegal drug or sex work activity onsite?

The County indicates there will be 24/7 on-site security.

38. What will be enforcement strategies from illegal activities in units or in/on the surrounding premises?

Unknown at this time.

39. Will the facility require increased city services in the form of Police/Fire, and how would such increases be funded?

Unknown at this time.

40. Have the challenges faced by other communities with similar programs been adequately explored?

The County has not yet implemented this program.

41. Once a facility is acquired by the County, will the city have the ability to alter how it is operated or ask the County to stop operating and sell the property?

Unknown at this time. Presumably there would be an opportunity to negotiate such language in an Interlocal Agreement (ILA) or some other agreement between the City and County.

42. Is there an exit strategy for the city if the facility proves to be not a good fit for the community?

See answer to Number 41.

43. Are there impacts from losing property tax revenue that would otherwise be collected from the commercial property?

No.

44. Does the County plan to use future funding for constructing affordable housing or transitional housing?

The funds associated with this program are restricted to the qualifications outlined in the answer to Number 11 above.

45. Which 10 cities were identified to be approached with the Health through Housing proposal?

Unknown at this time.

46. Will there be volunteer opportunities for community members who want to help?

Unknown at this time.

Health Through Housing (HTH) Frequently Asked Questions

Objective: By June 2021, local jurisdictions and King County will create up to 1,600 emergency housing and permanent supportive housing units for chronically homeless households.

1. What process will King County use to acquire a HTH emergency housing facility? (RFP, direct County purchase, etc.)?

King County is committed to working with local jurisdictions to identify HTH properties. While the ultimate path to acquisition will likely depend on each individual property and jurisdiction, King County is planning to acquire buildings directly and then transfer properties to partner agencies for long-term operations and potential future ownership. King County does not anticipate using a general RFP process to identify and acquire properties.

2. Are there specific zoning or permitting requirements or best practices for HTH emergency housing?

Zoning and land use requirements differ by jurisdiction, with each city governing its own policies. One objective of working directly with local jurisdictions to identify properties is to ensure that the eventual HTH sites comply with existing local codes, allowing for rapid acquisition and use. HTH facilities are housing for the purpose of zoning and permitting.

3. What types of buildings is King County looking for with HTH?

King County is working with local service enriched housing providers to identify the necessary property characteristics. For example, while properties with internal corridors are preferred, they may not be necessary in all cases. Non-congregate, single-room settings are the preferred building type to ensure that HTH is providing housing, as required by the state statute that authorizes HTH.

In addition, the ideal building would have

- Units with private bedroom and bathroom
- Recent construction, 1990 and later
- ADA accessibility, including elevators

4. What services will be on site at HTH facilities and how frequently will they be available? (as many details as possible)

All HTH projects will have the following services:

- 24/7 staffing
- Building Security
- Housing Case Management
- Connection to Medical and Behavioral Health Services
- Assistance in enrolling in entitlement programs and employment programs where appropriate

5. Will there be rules for residents? (i.e curfews, visitors, etc)

Ongoing availability of HTH units to chronically homeless individuals is behavior-based. Each resident receives a code of conduct and a program agreement at the time of entry. These cover expectations for things such as visitors, accessing services, interpersonal behavior, etc. If residents are not able to comply with the code of conduct and the terms of the agreement, they may be asked to leave the program. These rules are balanced with the recognition that many people experiencing chronic homelessness will require support as they transition into their housing, and the goal of the program is to provide emergency housing for people who might otherwise live unsheltered.

6. What is the expected size of a Health Through Housing property?

To ensure the most effective staff and service to resident ratios and to create financially sustainable facilities, desirable properties likely include 75-100 units. King County's recent experience is that few facilities with more than 150 rooms will offer effective staff and service to resident ratios.

7. How many staff will be at each site?

Ultimately the number of staff will depend on the size of each property and the characteristics of its particular residents. However, all HTH facilities will have 24/7 staffing, including security, as well as sufficient staff to provide the case management and other services discussed in Question 4.

8. Is there a time limit on how long a household can remain at a HTH property?

Health Through Housing is a housing program. There is no limit on length of stay. However, when appropriate, housing case managers will work with residents on securing alternate, long term housing while providing services to improve residents' health. This is important so that HTH sites are able to serve new local residents.

9. What are the HTH goals for residents?

The goal for every resident is permanent housing and improved physical and behavioral health. For many residents residing in HTH units, with appropriate support and connection to assistance, they will likely be able to live independently.

10. How will you ensure long term upkeep of the properties?

A key component to Health Through Housing is providing the long term operating and service support, ensuring that both residents and the property are supported. In a unique characteristic of the HTH program, the same funding source has the ability to fully fund capital, operating, and services needs for every HTH unit.

11. How will King County ensure that funding will be sustainable?

Health Through Housing is expected to be a long term (permanent) funding source. King County is committed to maintaining operating and service support for every unit for as long as the property is part of the HTH program.

Health through Housing Proposal Summary

The King County Executive is proposing Councilmanic enactment of a *Health through Housing 0.1% Countywide Sales Tax* authorized under [RCW 82.14.530](#) (aka the Legislature's 2020 [HB 1590](#)).

GOAL: HOUSE 45% OF CHRONIC HOMELESS POPULATION (based on HMIS)

By October 2022, house 2,000 King County residents who are experiencing or at risk of chronic homelessness—while reducing racial-ethnic disproportionality—by:

1. acquiring single-room settings like hotels while economic conditions are favorable,
2. putting them into immediate service as emergency and affordable housing,
3. funding operating and supportive services within housing, including behavioral health services, to keep people healthy and housed; and
4. converting acquired single-room settings into permanent supportive housing over time while continuing to develop additional affordable housing.

Why this concept, why this instrument, why now?

- **Housing is a Foundation for Health: Single Room Housing is Healthier; Congregate Shelters are Not a Long-Term Solution**

Our COVID-19 deintensification actions show that the basics that underpin health for most of us would do the same for people without a home: the ability to sleep in a bed, to use a bathroom, to feel safe, and to have the dignity of a place to be are foundations of health, preventing problems that we must otherwise treat at even greater personal and financial cost.

- **A Temporary Opportunity to Make an Immediate & Lasting Difference**

COVID-19 provides TEMPORARY economic conditions to purchase single-room properties like hotels that we can immediately convert to emergency housing—we must be nimble enough to leverage this window for change. We have a chance to immediately increase housing stock for less money than is normally possible. This window will close.

- **Reframing the Housing vs. Shelter False Policy/Funding Choice**

We can invest in immediate emergency housing for King County residents—people and resources that would otherwise go to congregate shelters or unsheltered homelessness—and then re-develop the purchased properties to build permanent supportive housing for even more people over time. The same resources can provide emergency housing now and support long-term affordable housing goals.

- **We Center the Most Affected. Nothing is More Regressive for a Person Than Experiencing Homelessness.**

Attempts at more progressive revenue sources have failed, leaving the sales tax as the only available tool. Meanwhile, the status quo is costing our society, community, and budgets.

What is proposed?

Upon a majority vote of the King County Council, proposed ordinance [2020-0311](#) (sponsored by Councilmember Joe McDermott) will implement a 0.1% sales tax across King County for affordable housing, housing-related services and behavioral health treatment. Current forecasts estimate the tax will generate \$65-70 million/year.

The ordinance authorizes funding for the following:

- Affordable housing;
- Behavioral health-related facilities;
- Operations and maintenance costs of affordable housing, facilities for housing-related services, or newly constructed evaluation and treatment centers;
- Operation, deliver, or evaluation of behavioral health treatment programs and services or housing-related services;

The Executive's proposed 2021-22 budget appropriates **\$96 million** from revenue generated in the first two years of the tax. These funds are appropriated for debt service payments for up to **\$400 million in bonds to finance affordable housing**, operating and service expenses for those affordable housing units, and behavioral health treatment.

Health through Housing Proposal Summary

How will funds be spent?

Proceeds collected in 2021 are directed by the County's 2021-2022 biennial budget. Proceeds collected in 2022-2028 will be governed by the **Initial Health through Housing Implementation Plan** (Initial Plan), upon adoption by ordinance. In 2028 and every eight years after that, the executive will propose an update to the Health through Housing Implementation Plan.

Ongoing Implementation Plan

The Implementation Plan will:

- Describe goals, strategies, performance measures, reporting requirements and annual expenditures
- Include goals and performance measures for the annual reduction of racial and ethnic demographic disproportionality among persons experiencing chronic homelessness
- Establish composition and responsibilities of a **Health through Housing Advisory Committee** to provide advice to the executive and council and report annually on the accomplishments and effectiveness of programs funded with the revenues. The committee will include:
 - Persons who have experienced homelessness;
 - Persons representative of racial and ethnic communities demographically disproportionately represented among persons experiencing chronic homelessness;
 - Residents of unincorporated areas and of cities with populations greater than 60,000 persons; and
 - Representatives from other county, city, and sub-regional boards, commissions or committees.

INITIAL Implementation Plan (by 6/30/2021)

The Executive will consult with the Affordable Housing Committee and the CEO of the King County Regional Homelessness Authority to develop the Initial Plan.

1. **The paramount goal of the Initial Plan is creation and ongoing operation of 2,000 permanently affordable homes** with housing-related services for eligible households that are experiencing chronic homelessness or that are at risk of experiencing chronic homelessness.
2. The Initial Plan will also support the creation and operation of a mobile behavioral health intervention program as an alternative to the use of law enforcement. This program will connect clients to housing created or operated with Health through Housing revenues. A portion of expenditures for 2022-2028 will also support and build the capacity of community-based organizations serving communities that are disproportionately demographically represented among persons experiencing chronic homelessness.
3. Specify the process to site affordable housing and behavioral health facilities funded from 2022-2028.

Who will be served?

All households served with affordable housing, or facilities providing housing-related services, with these funds must earn **at or below 30% of Area Median Income** and meet the following qualifications (required by RCW 82.14.530):

- Persons with behavioral health disabilities;
- Senior citizens;
- Persons with disabilities;
- Domestic violence survivors;
- Homeless, or at-risk of being homeless, families with children; or
- Unaccompanied homeless youth or young adults.

Households must also meet one of the following definitions:

- A household experiencing **chronic homelessness** must include an adult with a disability and either be currently experiencing homelessness for at least 12 consecutive months or have experienced homelessness for a cumulative 12 months within the prior 3 years.
- A household **at-risk of chronic homelessness** describes a household that includes an adult with a disability and meets two additional criteria:
 1. currently experiencing homelessness for 10-12 months in the previous 3 years or previously experienced homelessness for 12+ months within the last 5 years; and
 2. include one adult that has been incarcerated within the previous 5 years, or been detained or involuntarily committed, or identifies as a member of a population that is demographically overrepresented among persons experiencing homelessness.

How will you make decisions about siting housing and facilities?

- Use an **equity and social justice impact review process** and **consult with cities** in which capital projects will be located.
- Prioritize 2021 proceeds for sites/services within a city that submits a written statement of support.
- Plan to spend at least 30% of funds collected in cities with over 60,000 residents in the community that generated those funds (consistent with RCW 82.14.530).