

CITY COUNCIL AGENDA ITEM
CITY OF SHORELINE, WASHINGTON

AGENDA TITLE: Discussion of Council Goal 5, Action Step 9 – Engage in an Analysis with Service Providers to Identify What Services and Processes Exist to Connect those Experiencing Homelessness and/or Opioid Addiction with Supportive Services and Identify Gaps That May Exist

DEPARTMENT: City Manager’s Office

PRESENTED BY: Jim Hammond, Intergovernmental Program Manager
Rob Beem, Community Services Manager

ACTION: ☐ Ordinance ☐ Resolution ☐ Motion
 ☒ Discussion ☐ Public Hearing

PROBLEM/ISSUE STATEMENT:

The City Council is committed to ensuring that Shoreline is “a safe place to live, work, and play” for every Shoreline resident, including those experiencing homelessness and/or opioid addiction. To this end, the City Council has expressed a commitment to explore ways to lend its own energy and resources to addressing the challenges created by homelessness and opioid addiction. In 2018, the Council adopted Goal 5, Action Step 9 in their 2018-2020 City Council Goals and Work Plan. This Action Step directed staff to: *Engage in an analysis with service providers to identify what services and processes exist to connect those experiencing homelessness and/or opioid addiction with supportive services and identify gaps that may exist.*

Pursuant to this Council direction, staff surveyed a range of providers who deal with homelessness and/or opioid addiction, seeking on-the-ground assessments of the challenges facing individuals and families dealing with these issues, as well as gaps that make it more difficult to address these challenges. Staff have also undertaken to broadly characterize the homelessness response system and the current challenges it faces, set out the investments already being made by the City of Shoreline, and create a preliminary array of options for the Council to consider as additional steps to take, should it determine a need to do so. The purpose of tonight’s discussion is to provide the Council with an update on staff’s progress on this Action Step and to seek additional guidance in advance of the Council’s 2019 Strategic Planning Workshop, where future Council Goals and Action Steps will be discussed.

RESOURCES/FINANCIAL IMPACT:

This item has no direct financial impact.

RECOMMENDATION

Based on a review of this report and the identified gaps, staff recommends that Council discuss the services and processes connecting those experiencing homelessness and/or opioid addiction to supportive services and identify potential next steps for City staff to explore and/or evaluate.

Approved By: City Manager ***DT*** City Attorney ***MK***

BACKGROUND

The City Council is committed to ensuring that Shoreline is “a safe place to live, work, and play” for every Shoreline resident, including those experiencing homelessness and/or opioid addiction. To this end, the City Council has expressed a commitment to explore ways to lend its own energy and resources to addressing the challenges created by homelessness and opioid addiction. In 2018, the Council adopted Goal 5, Action Step 9 in their 2018-2020 City Council Goals and Work Plan. This Action Step directed staff to: *Engage in an analysis with service providers to identify what services and processes exist to connect those experiencing homelessness and/or opioid addiction with supportive services and identify gaps that may exist.*

The challenges of homelessness and opioid addiction are regional and even national in nature, and Shoreline’s experience reflects a larger trend that is driven by forces that lie well beyond the boundaries of the City. In the big picture, experts say that homelessness response needs to be part of a larger system of efforts that run in parallel. This was summarized effectively by David Wertheimer, Deputy Director of the Pacific Northwest Initiative at the Bill & Melinda Gates Foundation:

Treating the symptom of homelessness through increasing the effectiveness of the crisis response system is, in and of itself, an essential task. Alleviating the symptoms of a serious illness is a critical part of treatment. But we cannot stop there if we want to get to the point at which homelessness is truly rare. That will require that we move upstream from the crisis response system and get to the root issues:

- *The lack of an adequate supply of affordable housing.*
- *The absence of a sufficient number of jobs that pay a living wage.*
- *The inequitable access to educational opportunities and post-secondary degrees and the economic security they can provide.*
- *The failures of our child welfare system, our behavioral health system, and numerous other key components of our core social infrastructure that are unable to meet the full set of needs of our nation’s people.*
- *The ongoing challenges of structural racism and multi-generational trauma, experienced both by recent refugee populations as well as communities that have already spent centuries as Americans.*¹

This report provides a high-level overview of available regional data relating to this subject, a brief description of Shoreline’s current and planned resource commitments, and an attempt to capture, in part, what other agencies and organizations, unaffiliated with the City, are doing to tackle homelessness in Shoreline, with an eye to identifying new opportunities for further action that either exist now are ripe for development.

This report will also summarize discussions with a range of service providers, who provided staff with on-the-ground assessments of the challenges facing individuals and families dealing with homelessness and opioid addiction, as well as ideas for additional

¹ Source: David Wertheimer, *Homelessness: The Symptom of a Much Larger Challenge*, Funders to End Homelessness, Funders Together to End Homelessness, June 28, 2016

investments to help address those challenges. Lastly, this report will outline a range of potential pathways that could be evaluated for additional action or investment by the City of Shoreline. These options are conceptual; any one of them would require significant additional work to understand, among other things, benefits and costs, design parameters and implementation timelines.

DISCUSSION

Homelessness and Opioid Addiction in Shoreline and the Region

Shoreline's challenges with homelessness and opioid addiction mirror those of the central Puget Sound region. A report by McKinsey & Company, commissioned by the Seattle Chamber of Commerce, stated that rent increases in Seattle/King County show a "strong correlation" with homelessness. As summarized by the Seattle Times:

Seattle and King County could make the homelessness services system run like a finely-tuned machine, but without dramatically increasing the region's supply of affordable housing options, solving the region's homelessness crisis is all but impossible.²

In 2017, across King County, 21,700 homeless households (a term which can include single individuals) needed stable housing. Of those, an estimated 8,100, or 36.3%, exited to permanent housing, with the remainder still in need of stable housing. While many of the latter (an estimated 3,800 households) would require supportive on-site services in order to successfully remain in housing, most simply need affordable housing that is getting harder and harder to find.

In the realm of opioid addiction, Public Health - Seattle & King County reports that the number and rate of deaths caused by drug and alcohol overdose has increased over the past decade. Heroin and/or prescription opioids are involved in most overdose deaths, most of which involve multiple drugs. This trend disproportionately impacts those experiencing homelessness:

Despite constituting less than 1% of the King County population, 14% of all drug and alcohol-caused deaths occurred among people presumed homeless - that is, they were living on the streets or in a shelter, vehicle, or abandoned building at the time immediately preceding their death.³

In Shoreline, available data reflects the larger regional trend. During the period from May 1, 2017 through September 1, 2018, 656 "Shoreline households"⁴ were accessed through the regional homelessness response system. Of those 656 households:

- 52% (338) were single adults,
- 36% (233) were families with children, and

² Source: McKinsey & Company

³ Source: Public Health – Seattle & King County, Overdose Death Report

⁴ "Shoreline" means that the household provided one of the Shoreline-area zip codes as part of their last known address; even those that overlap with Seattle or Lake Forest Park; "Household" can refer either to individuals or families with children.

- 13% (85) were youth and young adults.

Additionally, the Shoreline School District enrolled 382 students in formal McKinney-Vento homeless services in the 2017-18 school year. The summary of Shoreline data is attached to this staff report as Attachment A⁵.

Shoreline's Funding Level for Human Services

Like most cities, the City of Shoreline has historically operated as a funding partner of programs operated by both governmental and nonprofit entities. There is very little that most cities do in terms of direct provision of service for these issues, and Shoreline is no exception to this. Each year the City budgets local and federal funds to support services to persons living homeless or at risk of becoming homeless. This is part of the City's ongoing effort to support services that address the twin issues of living homeless and living with a substance use disorder. In 2016 the City Council set a goal to fund human services at 1% of net General Fund revenues. The staff report for this Council policy direction can be found at the following link:

<http://cosweb.ci.shoreline.wa.us/uploads/attachments/cck/council/staffreports/2016/staffreport031416-9a.pdf>.

This policy both increased funding and focused these increases on addressing, homelessness, mental health and basic needs. As a result, Shoreline's funding in these areas rose from \$352,000 in the 2015-16 biennium to \$626,000 in the 2019-20 biennium. In 2018, agencies reported that they served 8,200 Shoreline residents overall. City funds covered the cost for 1,900 of these people served. Attachment B to this staff report provides the listing of the human service agencies and programs funded by the City of Shoreline from 2015-2020.

Overview of the Current Regional System for Responding to Homelessness

The current regional approach for responding to homelessness is centered on the Coordinated Entry for All (CEA) system, which was established and overseen by All Home. Coordinated entry systems are intended to organize a community's homeless assistance resources to create a person-centered response which "right sizes" the intervention to the individual/family needs (i.e., intensive services and housing are reserved for those with the greatest barriers to housing stability) and provide a rapid return to stable housing. The goal is to make homelessness "rare, brief and one-time."⁶

⁵ Source: King County Department of Community and Human Services

⁶ Source: Barbara Poppe 2016 report to City of Seattle on Homeless Investments

For individuals or families facing homelessness, the first step in finding housing, services or other support is engagement with the CEA system. This system can be accessed through a number of ways, including dialing 2-1-1, going to a designated “regional access point”, or finding a case manager or similar service provider familiar with the CEA system. The first step, upon entry into the CEA system is a comprehensive assessment of needs, issues and resources. CEA staff will then work with the individual/family to find a match with available and appropriate resources. Due to the number of individuals and families in need relative to the available resources, there is a prioritization process (i.e., families with children are given high priority) and, for some populations, the certainty of a wait. However, engagement in CEA gets all individuals or families in need of services into the queue for those services if not directly served. Attachment C to this staff report provides a Homelessness Response Flow Chart that depicts how this response system functions.

In 2017, the King County homelessness system received requests for homelessness services from more 22,126 households, including 17,895 which were identified as newly homeless. In that same year, 6,284 households exited to permanent housing, 2,303 exited to temporary housing, and 583 exited CEA while remaining unsheltered. More than 10,000 households in 2017 exited the system without a known destination. For comparison, in 2012, 11,448 requested services with 10,689 being newly homeless and 4,054 were housed. So, while more people are being housed in recent years, it hasn’t happened fast enough to meet this increased demand on the system.

The CEA system is funded primarily by King County, the City of Seattle and the United Way of King County, which in turn receives funding from state, federal and local sources. Individual nonprofits that operate within the CEA system are funded through a multitude of funding sources, including state, federal, regional and local sources, as well as private fundraising. Shoreline, for its part, provides funding for a part of the CEA system by contracting with nonprofit providers of emergency shelter and transitional housing. These providers include 211-Crisis Solutions (formerly the Crisis Clinic), Hopelink’s Housing and Financial Assistance programs, Solid Ground and Lake City Partners. In the 2019-20 biennium this funding will total \$260,000. These agencies project serving 3,500 individuals in this time frame, most through the 2-1-1 line which does intake for CEA.

Looking Ahead: An Overwhelmed System in Transformation

Historically, services to assist people experiencing homelessness or drug addiction have been carried out by an array of nonprofit entities, local governments, churches and other groups of caring individuals. For decades, such work was coordinated at the level necessary to access local, state or federal funding. However, with the tremendous growth in homelessness, whether fueled by economic dislocation, opioid addiction, or other causes, the past decade has seen multiple regional initiatives take root in an effort to better understand the magnitude and nature of both the problem of homelessness and opioid addiction and to coordinate efforts and efficiently and fairly use available resources. In the housing and homelessness arena, these include [One Table](#), [the Regional Affordable Housing Task Force](#), and [Continuum of Care/All Home](#), among others.

In May of 2018, the King County Executive and the Mayor of Seattle announced their agreement to move ahead with an effort to “unify the region’s approach to homelessness, including their commitment to create a new independent entity with accountability and authority to strengthen coordination and improve outcomes for people experiencing homelessness”. For the balance of 2018 Seattle, King County and a broad range of stakeholders, including the Sound Cities Association, engaged in a review of current efforts to address homelessness. In December 2018, the Executive and the Seattle Mayor released the results of this work. They will be moving forward with a series of actions including:

- Consolidating the City of Seattle and King County homelessness funding and policy-making under a new joint authority;
- Engaging in a comprehensive digital transformation to create better customer experiences and more usable data infrastructure;
- Redesigning intake processes to be connected, customer-centric, and accessible to and from all available services and supports in the community;
- Creating system-wide customer accountability; and
- Creating a defined public/private partnership utilizing a funder’s collaborative model in which partners come together to fund a specific project and track results.

This will mean a transition from the current governance structure of All Home and will be a significant piece of the work in 2019. However, this transition will not immediately impact the “on the ground activities” of those working to respond to the needs of people living homeless.

Regional Strategy to Address Opioid Addiction

While the epidemic of opioid addiction continues to grow, and efforts to combat addiction face challenges, there is a strong regional consensus about how to tackle the problem. In 2016, the [Heroin and Prescription Opiate Addiction Task Force](#) developed a comprehensive strategy focusing on prevention, expanded availability of timely treatment, and overdose prevention. This strategy still guides the actions of King County agencies, Public Health, and local governments.

Key recommendations from the task force include⁷:

- **Primary Prevention**
 - Raise awareness of the possible side effects of opioid use, including overdose and opioid disorder.
 - Promote safe storage and disposal of medications.
 - Improve screening practices in schools and health care settings to prevent and identify opioid use.
- **Treatment Expansion and Enhancement**
 - Make buprenorphine (a methadone alternative) more accessible and available in communities with the greatest need.
 - Develop treatment on demand for all types of substance use disorders.

⁷ Source: Heroin and Prescription Opiate Addiction Task Force

- Alleviate barriers placed upon opioid treatment programs, including the number of clients served and the siting of clinics.
- **User Health Services and Overdose Prevention**
 - Expand distribution of naloxone to reverse the effects of heroin overdose.
 - Establish, on a pilot program basis, at least two Community Health Engagement Locations where adults with substance user disorders will have access to on-site services while safely consuming opioids or other substance under the supervision of trained health care providers.

Shoreline's Current Commitment of Resources and Other Investments

Each year the City budgets local and federal funds to support services to persons living homeless or at risk of becoming homeless. This is part of the City's ongoing effort to support services that address the twin issues of living homeless and living with a substance use disorder. As noted earlier, these contracts are listed in detail in Attachment B.

Other nonprofit organizations that do not receive City funding are actively engaged in philanthropic work in Shoreline. These include established programs like United We Stand's homeless encampments ("tent cities"), Vision House, Food4Kids (weekend backpacks of food), evening meals at local congregations, and the Aurora Avenue family shelter established by Mary's Place.

For a summary of homelessness-related services provided in Shoreline organized by how they fit into the homelessness response system, see Attachment D. For a summary of opioid addiction-related services and how they fit into the opioid response system, see Attachment E. A map of homelessness and opioid-related services in Shoreline and north King County can be found in Attachment F.

A Major Shoreline Contribution to the Regional Solution: Emergency Shelter and Affordable Housing

For over a decade the City has been actively supporting the development of emergency shelter and affordable housing overall through a wide range of actions. These include:

- Administration and amendment of the City's Development Code to support tent cities, allow emergency shelter as an interim use in vacant properties, and authorize the development of accessory dwelling units;
- Reductions in the costs of affordable housing development, such as property tax exemptions or exemptions from certain impact fees; and
- Upzoning in the light rail station areas and mandating the construction of affordably priced housing through inclusionary zoning.

In addition, Shoreline is making a major contribution to the pool of affordable housing in the region. The City Council has partnered with King County to develop affordable housing with supportive services on land being provided by the City. Funding and project management will be provided by the County. This partnership will contribute approximately 100 new units of deeply affordable housing to the region.

Discussions with Shoreline Service Providers and Key Stakeholders

City staff met with Shoreline-area service providers and stakeholders as part of compiling this report. The discussions were informal and off-the-record, and the insights shared were candid and constructive. Collectively, the stories and insights shared by Shoreline-area providers were consistent with the local and regional data that has been reviewed. They reveal a picture of energy and commitment to serving those in need within the City of Shoreline.

The major challenges posed by homelessness and opioid addiction appear to make it difficult for comprehensive, regional, and sufficiently resourced solutions to be developed and agreed upon. Still, providers are working within their operations to find ways to adapt and do things better. For instance:

- Hopelink has shifted its Financial Assistance model from only providing energy and rent assistance (e.g., providing first and last month rent assistance to help a household lease an apartment) to a more flexible approach to homelessness prevention that addresses the range of circumstances that cause a financial burden which might lead to homelessness or be a barrier to stability, such as car repairs, child care, or storage locker rental,
- The Center for Human Services is making no-appointment-needed assessments available on demand for individuals seeking Substance Use Disorder and/or mental health treatment, and
- Mental Health and Substance Use Disorder treatment programs have naloxone available for all staff to administer.

These small things can make a big difference in outcomes for the individuals affected by them. Additional thoughts from the interviews included:

- There is not enough housing for those who need it.
- There are not enough affordable mental health or addiction resources for those who need or want it, particularly for those un- or under-insured.
- While addiction treatment continues to be emphasized, prevention and education efforts have not kept pace.
- Overdose treatment (naloxone) is easy to administer and should be more widely available.
- There are not enough resources available to help those who are currently housed to remain in housing (food and energy assistance, specifically).
- People who are homeless tend not to travel very far; transportation options are limited, and bus passes are scarce.
- It can be hard to consistently find the same individual, making it difficult to provide consistent engagement. Services and help finding Housing first is the preferred strategy. In describing the successful efforts to make this work, providers' experiences showed that it is critical to have services and supports for most of those who make the transition to living housed.
- There is no City or north King County communities' consensus on how to respond to these twin crises.

From a law enforcement perspective, there was a sense that Shoreline is currently well served by the balanced approach the City is taking to be both sensitive and aware of the conditions faced by people living homeless and to be responsive to other public safety concerns. There is a strong expression of appreciation for the value of working with individuals who are unsheltered and/or dealing with addiction or other behavioral health issues. However, because those issues can also impact public safety, including additional 9-1-1 calls, property crimes, trespass, and the like, it is important to evaluate public safety and demands on law enforcement resource when undertaking study of any new initiatives related to these issue areas.

Gaps in Shoreline Services Related to Homelessness and/or Opioid Addiction

Overall, the needs within Shoreline mirror the needs within the larger region. However, several gaps applicable (but not unique) to Shoreline were readily identified through the discussions with providers:

1. ***Permanent Housing.*** As both the local and regional information shows, the greatest gap is the availability of housing. A solution to that problem is, at a minimum, regional in nature and far beyond the City of Shoreline's own available resources. Still, that has not stopped the City from taking steps in this direction, particularly with its decision to add density around Shoreline's two future light rail stations and contribution of property for the development of affordable housing at 198th and Aurora.
2. ***Homelessness Prevention Funds.*** Hopelink reports that the funding for homeless prevention is fully allocated by the end of first week of any given month. They estimate that they have a minimum of 10 and as many as 50 clients per month they cannot serve. These clients are put on a wait list for the month and are queued up for assistance in the future. They are also referred to St. Vincent, Shoreline Community Care, the Salvation Army, or the North Helpline. Increasingly, Hopelink is seeing people who are on fixed incomes, like Social Security, who are stuck in a situation and always running short of funds.
3. ***Emergency Shelter Beds.*** This remains an ongoing need as well. Some providers have advocated for increased use of vacant properties, particularly those awaiting development, as temporary shelter sites.
4. ***A Daytime Gathering Place for Homeless Individuals.*** With no place to go or to be during the days, persons living homeless are mobile, within a limited range. While these individuals tend not to go very far afield, they are also difficult to find on a consistent basis, making it harder to provide assistance. Additionally, these individuals often need basic hygiene services, and in the absence of alternatives, public spaces are one of the few safe places for homeless individuals to go. A day services facility in Shoreline could provide a safe environment and basic services and also increase the chances for successful engagement and connection to the larger system of services.

5. **Transportation.** For homeless individuals in particular, many of the needed services are beyond walking distance, and Metro bus passes are a limited resource. In addition, available nighttime shelter, available through the Operation Nightwatch system, is located far and wide around King County, and is difficult for a homeless individual in Shoreline to get to.
6. **Opioid Treatment Services.** There is a gap that relates to the availability of affordable drug treatment services for those who might be considered the “working poor”, with too much income to qualify for Medicaid/Apple Care. In a related vein, access to Narcan (Naloxone), an anti-overdose medicine, along with training to use it, needs to be broadened.
7. **Opioid Use Prevention and Education:** There is a lack of information and education about ways to avoid and/or reduce substance use to replace efforts in the 1980's through the early 2000's that focused on substance use abstinence, which were found to have minimal impact.
8. **Partnership Building Through Community Engagement.** There is a belief that the more that the larger community understands the dynamics of homelessness (and can dispel misconceptions), the more able they are to come together to share information and generate new partners and resources. Agencies' shared positive experiences can bring together business, philanthropy, government, non-profit providers and the community to foster these discussions and to generate commitment to address these issues.
9. **Youth Shelter and Services In or Close to Shoreline.** Youth under 18 do have housing resources available to them, though they are not in Shoreline. Programs such as Safe Place, operated by Friends of Youth and Youth Care, will meet a youth who is facing homelessness in the community and provide transportation to housing located on the Eastside, north in Snohomish County, Seattle, and South King County. There are no resources in Shoreline that address the specific needs of youth. Additionally, individuals between 18 and 24 are dubbed Youth/Young Adults. While these individuals are adults in a legal sense of the word, their housing needs are not well met by the same system that provides overnight and temporary shelter for adults. Through All Home and a new effort dubbed “A Way Home Washington”, regional resources are being aligned to make a push to address youth/young adults' specific needs. This work is just now getting off the ground and specific action steps are still in development.

Next Steps: Identification and Assessment of Options for Additional City Action

As noted earlier, the challenges faced by Shoreline mirror those faced by the larger region and, in fact, by communities across the United States. Everywhere, cities are grappling with these issues. No definitive courses of action have been identified. However, the gaps identified through the interview and research process provide a place to start. Potential City actions to take on any particular task fall into four general categories:

- Contributions to existing regional efforts; likely a small contribution to a large pool.
- Contributions to existing Shoreline-area efforts; specific investments to current activities within the City.
- Creation of a new local initiative.
- Activities oriented toward education or advocacy, either local or regional.

The purpose of this report was to provide information and context within which to contemplate actions. Attachment G to this staff report represents a gap analysis tool that attempts to evaluate what it would take to tackle solutions in each identified gap area. Using the gap categories identified through research and the stakeholder outreach process, staff undertook a preliminary, high-level assessment of some of the key factors that would be looked at in greater depth in any formal benefit/cost analysis of a given course of action. The goal of this preliminary assessment was to provide a very approximate guide to Council of what to expect if choosing to undertake a project that addressed any of the given gaps. In this way, it is intended to inform Council discussion.

STAKEHOLDER OUTREACH

City staff met with Shoreline-area service providers as part of compiling this report. These individuals included:

- Tamarah Lee, Hopelink (homelessness prevention and financial support)
- Johanna Ebanks, Hopelink (homeless prevention and financial support)
- Corinne McKisson, Compass Housing (Ronald Commons manager)
- Stanley Machokoto, Lake City Partners (street outreach)
- Ben Ross, Therapeutic Health Services (opioid treatment)
- Beratta Gomillion, Center for Human Services (behavioral health)
- Marty Hartman, Executive Director, and Dan McGrady, Board member, Mary's Place
- Kelly Dahlman-Oeth, Ronald United Methodist Church (services to persons living homeless)
- Terry Pottmeyer, President, Friends of Youth
- Mark Putnam, Director of YMCA Accelerator (social services) and former Director of All Home
- Chief Shawn Ledford and his Command Staff, Shoreline Police

RESOURCES/FINANCIAL IMPACT

This item has no direct financial impact.

RECOMMENDATION

Based on a review of this report and the identified gaps, staff recommends that Council discuss the services and processes connecting those experiencing homelessness and/or opioid addiction to supportive services and identify potential next steps for the City to explore and/or evaluate.

ATTACHMENTS

- Attachment A: Summary of Shoreline Area Data on Homelessness
- Attachment B: Listing of Human Service Agencies Funded by the City of Shoreline
- Attachment C: Flow Chart of Homelessness Response
- Attachment D: Shoreline Homelessness Services Chart
- Attachment E: Shoreline Opioid Services Chart
- Attachment F: Map of Housing and Opioid Services in Shoreline/North King County
- Attachment G: Gap Analysis Tool for Brainstorming/Evaluating Potential City Actions

Data Request Summary and Results: Shoreline Area

DATA ANALYSIS AND LIMITATIONS:

Data Sources: Homeless Management Information System (HMIS) program enrollments; Coordinated Entry for All (CEA) housing triage data.

Limitations and Data Quality Notes:

- o To determine if a household is from the Shoreline area, we used the Last Permanent Location (ZIP Code) field from HMIS and the Last Known ZIP Code field from CEA. Households were included if they reported that their ZIP Code was from the Shoreline area at the time they enrolled in any program or completed a Coordinated Entry Housing Triage Tool. We do not know if a household's current location is still in the Shoreline area or if they received services there.
- o The 98133, 98155, 98160, and 98177 ZIP Codes were used in this analysis. Note that 98177 and 98133 overlap with Seattle, and 98155 overlaps with Lake Forest Park.
- o Last Permanent Location is no longer a required HMIS data element and may be missing for some households; all data are self-reported.

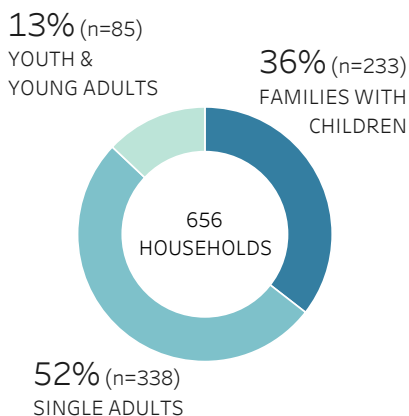
An event is defined as any program enrollment or Coordinated Entry housing triage activity.

Primary Reporting Period: 5/1/2017 - 9/1/2018

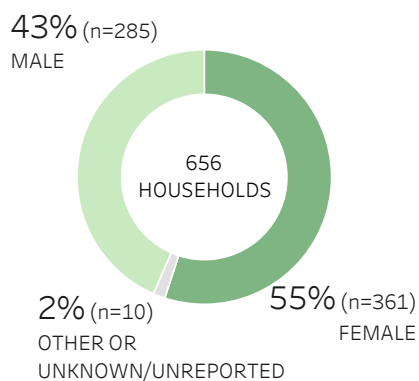
RESULTS:

656 total households with an event during the reporting period

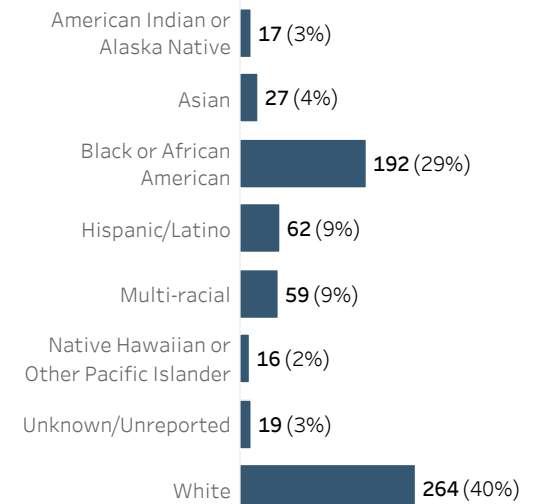
Household Category
(at most recent event)



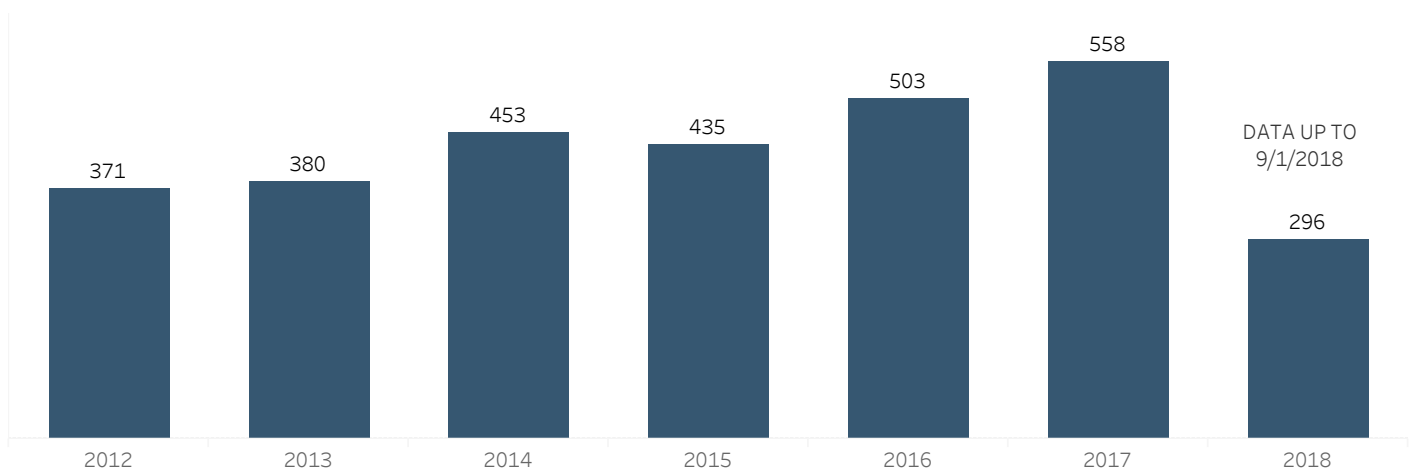
Head of Household Gender



Head of Household Race/Ethnicity



Number of households with an enrollment or assessment/triage activity by year

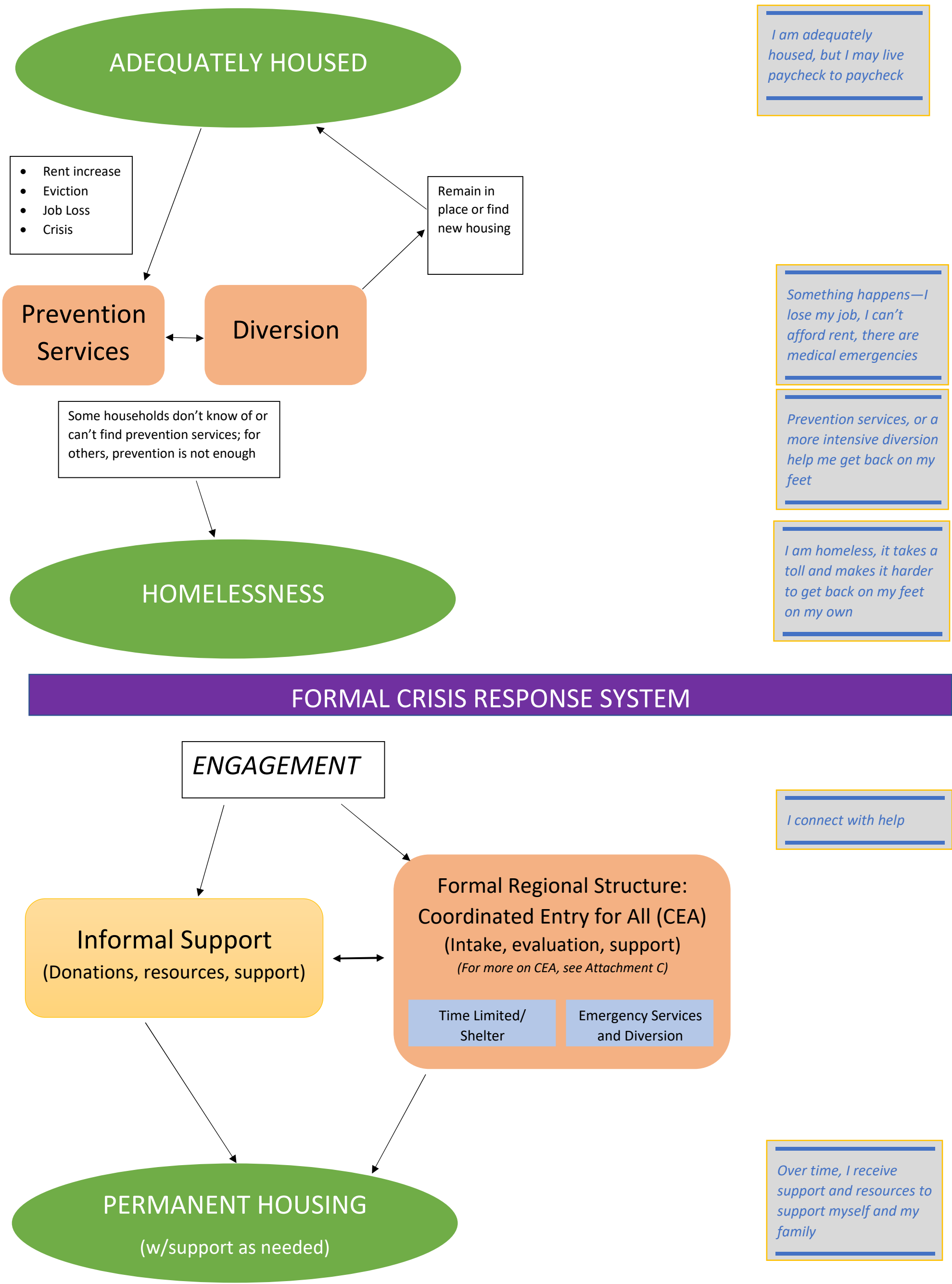


ATTACHMENT B

City of Shoreline's Current Commitment of Resources to Homelessness and Opioid Addiction





Agency Name	Program Name	2015-2016	2017-2018	2019-2020	City Funded	Total Served
Crisis Clinic	Crisis Line; 24/7 access to services for people facing acute and immediate mental health conditions	\$ 7,660	\$ 14,500	\$ 15,000	722	3,700
Crisis Clinic	King County 2-1-1: The single point of entry for accessing emergency housing; On Line and phone resource and referral information about support services and how to obtain them.	\$ 6,940	\$ 19,500	\$ 24,000	385	1,527
Hopelink	Employment: tools and individual coaching during the job search process	\$ 18,500	\$ 20,000	\$ 20,000	11	15
Hopelink	Family Development: homelessness prevention by helping families build strength, stability and resources.	\$ 15,000	\$ 21,000	\$ 22,000	14	62
Hopelink	Family Housing: Shelter & Case Management: short-term home for families in crisis.	\$ 14,000	\$ 40,000	\$ 50,000		6
Hopelink	Adult Education: prepare immigrants and refugees for the U.S. workplace and prepare people who did not graduate from high school to earn a GED or high school diploma	\$ 6,000	\$ 8,000	\$ 12,000	3	16
Hopelink	Financial Assistance Resiliency Program	\$ 74,000	\$ 96,000	\$ 102,000	142	411
Hopelink	Emergency Food: Weekly food bank and emergency bags.	\$ 34,000	\$ 51,000	\$ 92,000	305	2,225
Lake City Partners Ending Homelessness	Winter Shelter and Street Outreach: Overnight shelter November – March; staff on the street engaging with individuals living homeless to connect them with housing and support services	\$ -	\$ 23,000	\$ 52,000	N/A	N/A
Center for Human Services	Behavioral Health: Mental Health and Substance Used Disorder treatment	\$ 144,000	\$ 191,000	\$ 205,500	311	311
King County/CDBG	Homeless Prevention – County Wide	\$ 32,000	\$ 31,000	\$ 32,000	NA	NA
Total		\$352,100	\$515,000	\$626,500	1,893	8,273

FLOW CHART/MAP OF HOMELESSNESS RESPONSE



Attachment D


Shoreline Homelessness Services

	Prevention 	Emergency and Transitional 	Emergency Services 	Permanent Housing 
Who is served	People at eminent risk of becoming homeless	Households with specific financial and service needs to be addressed so that they can attain permanent housing (e.g. Domestic violence survivor, unaccompanied or parenting pregnant youth, early stages of recovery) Length of Stay Goal: 90- 150 days	People experiencing homelessness - sleeping in places not meant for human habitation (e.g. vehicles, outdoors, tents)	People able to maintain themselves with and without supports
Goal	Keep people in housing.	Find Housing, Connect to formal systems of services	Provide immediate shelter, safety and hygiene. Connect to formal systems of services	Stable, affordable housing
Org's Providing Services in Shoreline	Hopelink Mary's Place Compass Faith Community	Vision House Hopelink Mary's Place	United We Stand - -Tents Hopelink - Food Faith Community City – Showers (Spartan, Pool) Dale Turner – Showers Lake City Partners	KCHA Compass Housing Provail Private Landlords willing to accept subsidy payments Pvt landlords with tax incentives
Services Provided	One time/Short Term Financial Assistance: Rental assistance, Utility Assistance, Emergency Repairs, Legal Aid	Housing, Case management aimed to prepare households to move into permanent housing, working with households to increase income. Formal System Access Point	Day services: Hygiene, laundry, food, engagement. Overnight Shelter Encampments Safe Parking Food/Meals Access to CEA	Roof over head For some, wrap around supports as needed

Attachment D

	Prevention	Emergency and Transitional	Emergency Services	Permanent Housing
Where they live	Shoreline residents	Throughout the region	People on the street in our community	In Shoreline
Challenges Issues Gaps	Housing cost increase Limited funding for assistance	Lack of supply of housing Limited Trans Shelter Capacity Disfavored service Transportation	Transportation Availability of services Lack of accessible shelter	Cost of new construction Availability of funding for development
Extent of Gaps	Eviction prevention – regulatory Hopelink turns away min of 15 people/mo, Runs through \$ in first days of month.	Wait for referral to housing program 186-228 Days-	Shelter only Oct – March Nearest Day Center 125 th /Lake City Way Wait for referral to housing program 186-228 Days average length of stay 57 days	
Shoreline's Contribution	Hopelink 2015-16 \$114,000 2017-18 \$145,000 2019-20 \$156,000	Hopelink – Housing-Shelter 2015-16 \$ 14,416 2017-18 \$ 40,000 2019-20 \$ 50,000	Lake City Partners; Winter Shelter- Outreach 2015-26 -- \$0 2017-18 – 23,000 2019-20 -\$52,000	
Community Support	Individual acts of philanthropy, e.g., donations, individual advocacy, support solving problems, getting resources	Finding landlords who could make units available to formerly homeless;	Church parking lots for tent cities, vehicles;	

Attachment E

Opioid Services, Source: Heroin and Prescription Opiate Addiction Task Force, King County 2016 

	Prevention	Treatment	Health Services /OD Prevention
Who is served	Overall Population with a particular focus on youth	People seeking treatment for Substance Use Disorder (SUD) and addictions	People with an active substance use disorder and addictions
Goal	Prevention and appropriate use	Sobriety and addiction recovery	Harm reduction and saving lives
Orgs Serving Shoreline	<ul style="list-style-type: none"> • Therapeutic Health Services • Center for Human Services • Community Psychiatric Clinic • Valley Cities Mental Health • Private Physicians • King County Public Health • Shoreline Police • Shoreline Fire • Schools: Public and Private 	<ul style="list-style-type: none"> • Therapeutic Health Services • Center for Human Services • Community Psychiatric Clinic • Valley Cities Mental Health • Private Physicians • King County Public Health 	<ul style="list-style-type: none"> • Therapeutic Health Services • Center for Human Services • Community Psychiatric Clinic • Valley Cities Mental Health • Private Physicians • King County Public Health • Shoreline Police • Shoreline Fire
Services Provided	<ul style="list-style-type: none"> • Public Awareness • Safe Storage and Disposal • Screening and early Identification 	<ul style="list-style-type: none"> • Screening for SUD • In-patient and out-patient SUD treatment • Mental and physical health services • Medically Assisted Treatment- MAT (buprenorphine/methadone) 	<ul style="list-style-type: none"> • Naloxone kits to reverse OD • Emergency medical response • Engagement and referral to treatment
Where people live	Shoreline	Across the Region	Shoreline
Challenges/Issues/Gaps	<ul style="list-style-type: none"> • Little funding for general community education • Little emphasis on funding prevention 	<ul style="list-style-type: none"> • Delays as people wait for assessments and treatment • Lack of residential treatment slots • Limited access to MAT • Limited number of SUD treatment professionals • Transportation 	<ul style="list-style-type: none"> • Ready access to Naloxone, e.g. available at community centers, libraries, schools. Requires placement and training of facility staff. • IV drug use and resultant waste in public spaces – sharps

Attachment E

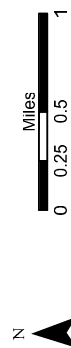
	Prevention	Treatment	Health Services /OD Prevention
Extent of Gaps	Only two schools engaged in pilot screening training (Kellogg-Shorecrest)		Naloxone Kits to Police, Fire and treatment agencies only. Not yet in other public spaces and with families
What Shoreline Does	<ul style="list-style-type: none"> • Safe Disposal sites – Police • Promote Safe Storage and Return in Currents 1x/yr • County Funding through regional levies • MIDD • Best Starts • Vets/Seniors HS Levy 	Funds SUD treatment and MH services @ CHS 2015-16 \$ 144,000 2017-18 \$185,000 2019-20 \$234,000 County Funding through regional levies MIDD Best Starts Vets/Seniors HS Levy	<ul style="list-style-type: none"> • County Funding through regional levies • MIDD • Best Starts • Vets/Seniors HS Levy • MIDD

Housing & Opioid Services

Legend

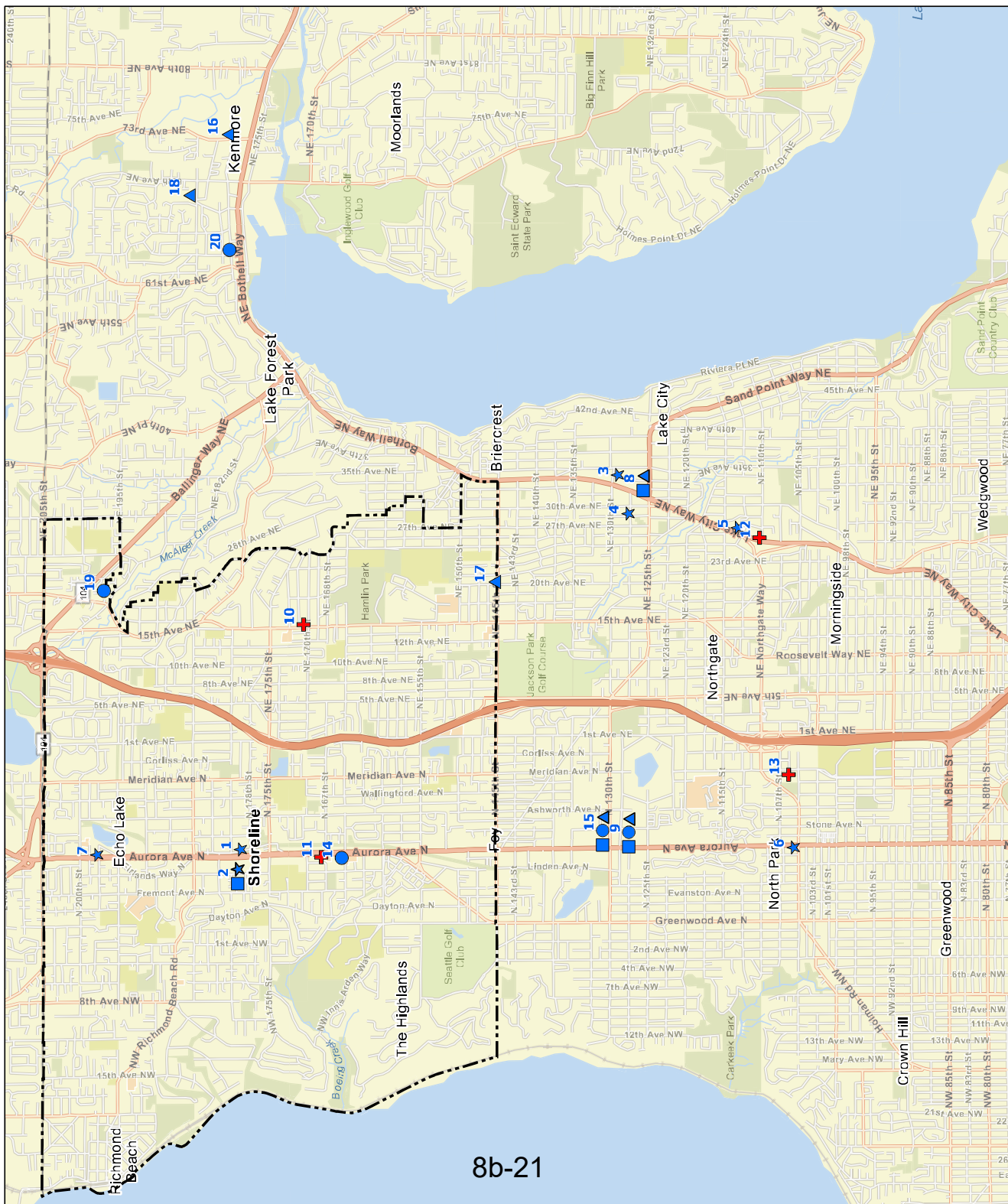
- Prevention
- Emergency and Transitional
- ▲ Emergency Services
- ★ Permanent Housing
- ✚ Opioid Services

Identifier	Location
1	Compass Housing Vets Center
2	Ronald Commons
3	McDermott Place
4	Tony Lee Apartments
5	Meadowbrook View
6	Aurora House
7	198th & Aurora
8	God's Little Acre/Lake City Partners
9	Mary's Place - NSeattle
10	Center for Human Services
11	Therapeutic Health Services
12	Community Psychiatric
13	Valley Cities
14	Mary's Place - Shoreline
15	Mary's Place - NSeattle
16	Mary's Place - Kenmore
17	Prince of Peace
18	Northlake Lutheran
19	Vision House
20	Hopelink Housing



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Gap Analysis/Evaluation Tool for Potential City Actions Regarding Homelessness and Opioid Addiction

Gap	Cost	Overall Level of Effort	Staff Resource	Current Partner in Shoreline?	Time Frame to Implement	Impact: Long/Short Term	City Commitment: Long/Short Term	Notes
1. Permanent Housing	\$\$\$\$	High	Low	Yes	Long	Long	Short	Projects come along infrequently
2. Homelessness Prevention Funds	\$ - \$\$\$	Low	Low	Yes	Short	Long	Short – Long	Scalable to resources
3. Emergency Shelter Beds	\$\$	Low	Low – High	Yes	Short	Short	Long	Scalable to resources
4. Daytime Gathering Place	\$ - \$\$\$\$	High	High	No	Long	Short	Long	Scalable to resources
5. Transportation	\$ - \$\$	Medium	Low	No	Medium	Short	Long	Scalable to resources
6. Opioid Treatment Services	\$ - \$\$	Low	Low	Yes	Short	Short	Short – Long	Scalable to resources
7. Opioid Use Prevention and Education	\$ - \$\$	High	Low	Yes	Long	Long	Short – Long	Scalable to resources
8. Partnership Building Through Community Engagement	\$	High	High	Yes	Short	Long	Medium	
9. Youth Shelter and Services	\$\$\$	Medium	Low - High	No	Long	Long	Medium	New service; focus of regional work