



King County



November 2, 2015

King County, the cities of Seattle and Bellevue, the Sound Cities Association, and United Way all endorsed a [new 4-year homelessness strategic plan](#) in July 2015. This effort, renamed **All Home**, includes more than 500 stakeholders – people experiencing homelessness, nonprofits, businesses, faith leaders, and residents. Our collective vision is to make homelessness rare in King County, to eliminate racial disparities, and, if one becomes homeless, to make it a brief and one-time occurrence only.

King County Executive Dow Constantine’s Local Proclamation of Emergency includes actions that are **consistent with the All Home strategic plan** to address immediate human needs and the root causes of homelessness.

The **short-term actions to address immediate human needs** are:

- Expanding shelter in Seattle by at least 50 beds,
- Providing 20 new housing vouchers for those exiting Drug Court,
- Increasing mental health treatment for high-needs youth in housing programs,
- Increasing incentives for landlords to rent apartments to homeless veterans,
- Increasing support for the Law Enforcement Assisted Diversion (LEAD) program that has successfully reduced the cycle of homelessness and involvement in the criminal justice system,
- Expanding the Peer Bridger program to include housing vouchers for homeless individuals experiencing involuntary inpatient psychiatric hospitalization, and
- Acquiring a mobile medical van to bring health services to homeless around the county.

The **longer-term actions to address the root causes of homelessness** are:

- Adding capacity for evaluation, treatment and detoxification facilities in Seattle and South King County, and
- Evaluating publicly-owned land and buildings for potential use for alternative housing, such as tiny homes.

The Local Proclamation of Emergency also includes these requests of the governments of Washington State and the United States:

Washington State

- Allocate additional resources for mental health and substance use disorder treatment;
- Set Medicaid rates for inpatient treatment at an amount that is sufficient to provide effective treatment;
- Identify State-owned property to host authorized encampments, vehicle parking, emergency shelter, and housing;
- Allocate intervention and other resources to address the public health and safety crisis associated with unauthorized encampments on State property along I-5, I-90, and SR-99, including implementing physical changes to those areas to minimize ongoing and long-term public health and safety risks;
- Increase the amount and expand allowable support services in the Consolidated Homeless Grant (CHG), including Housing and Essential Needs Program and stabilize funding for CHG;
- Restore the Housing Trust Fund to pre-recession levels; and
- Authorize additional financing tools to expand affordable housing and ensure affordability and protections for tenants.

United States

- Increase funding for affordable housing – including capital and operating funding for permanent housing for the homeless and our most vulnerable extremely low-income residents — and for rental assistance and voucher programs;
- Increase funding for the interrelated system of homeless support services for all populations and address the funding gap created by the shift in priorities of McKinney funding toward housing and housing related services, including funding for mental and behavioral health, chemical dependency, employment and family support services, in the budgets of the Dept. of Health and Human Services and Dept. of Labor;
- Extend the terms of the existing Moving to Work Program, which provides flexibility for the Seattle Housing Authority and the King County Housing Authority to design local services for housing and employment support for low-income families;
- Eliminate the Institutions for Mental Disease regulation limiting Medicaid reimbursement to facilities with more than 16 beds;
- Update 42 CFR Part 2 – Confidentiality of Alcohol and Drug Abuse Records to mirror HIPAA regulations and support care coordination and primary care integration;
- Approve Washington’s Medicaid Transformation Waiver request, which includes creating a supportive housing benefit that would allow the use of Medicaid funds to pay for support services delivered in permanent supportive housing; and
- Reengage with 10 cities, including Seattle, to implement the requests they submitted for waivers and regulatory flexibility under the 2012 “Dedicating Opportunities to End Homelessness” initiative, which was launched by the Dept. of Housing and Urban Development and the U.S. Interagency Council on Homelessness.

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