# 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 <u>RCW 82.14.530</u> (*aka* the Legislature's 2020 <u>HB 1590</u>).

# 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 <u>2020-0311</u> (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 <u>\$96 million</u> from revenue generated in the first two years of the tax. These funds are appropriated for debt service payments for up to <u>\$400</u> <u>million in bonds to finance affordable housing</u>, operating and service expenses for those affordable housing units, and behavioral health treatment.

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#### 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 <u>chronic homelessness</u> 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).