



King County Veterans and Human Services Levy Service Improvement Plan



King County

Department of
Community and Human Services

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Prepared by:

King County Levy Planning Team
Strategic Learning Resources, Inc. and
Kelly Point Partners

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Executive Summary

The Levy

In September 2005, the Metropolitan King County Council moved to place on the ballot a measure to create regional health and human services funds to benefit veterans and their families and others in need. Council Ordinance 15279 became Proposition No. 1: Veterans and Human Services Levy. Per that ballot measure, levy proceeds were to be divided 50:50 and expended from two separate funds, one for veterans and their families and the other supporting non-veterans in need.

In November 2005, King County voters approved Proposition No. 1 by a countywide 57.92 percent favorable vote. The regional Veterans and Human Services Levy will generate at least \$13.3 million per year for six years to fund a range of housing, health and human services for veterans, their families and other low-income residents.

Approach

In April 2006, the Council passed Ordinance 15406 providing direction as to how the money from the Levy should be spent, including that “the proceeds shall be used primarily to prevent or reduce homelessness and unnecessary involvement in the criminal justice and emergency medical systems for veterans, military personnel and their families and other individuals and families most at risk.”

Ordinance 15406 called for the County Executive to prepare a Service Improvement Plan to describe how the goals will be met for veterans and other individuals and families most at risk – at the client, service and system levels. A team of King County staff and external consultants was convened to create the Service Improvement Plan. After careful review of related planning documents and extensive consultation with a broad array of stakeholders from multiple systems and constituencies within the public and private sectors, an extensive set of recommendations was constructed, detailed in this report.

Allocation Plan

The Service Improvement Plan contains detailed recommendations related to the allocation of more than \$85 million of Levy funds over the Levy’s six-year lifespan. As stipulated in the ballot measure, funds are divided equally between veteran and non-veteran populations. Annually, at least \$2 million of veterans funds are designated for enhancements to the existing King County Veterans’ Program, and \$1.5 million in non-veterans funds are dedicated to early childhood prevention and intervention. Levy administration costs will total about five percent of the total funds. The remaining investments are divided into two basic categories.

- *One-Time Investments:* Investments must be capital or other one-time expenditures such as housing, training or information systems.
- *Ongoing Service and System Investments:* The vast majority of the Levy funds available on an annual basis are dedicated to supporting ongoing health and human services to help designated target populations countywide.

Regional Focus

The Service Improvement Plan provides the blueprint for planning and resource allocation for the Levy implementation, with target populations and strategic investment areas identified. With the exception of two programs specifically targeting chronic homelessness to be based in Seattle and South King County, the programs and services detailed in the Plan are designated as regional resources to assist those most in need throughout the county. DCHS, as the lead agency, will be responsible for ensuring the best possible access to services for individuals and families countywide, based on need and including geographic and cultural considerations.

Target Populations

Four target populations, primarily low and very low-income residents living throughout King County, have been identified. Selection was based on research of need, input received from community stakeholders, and the requirements outlined in the Levy ordinance.

Broadly, these populations are:

- **Veterans, military personnel and their families in need** who are struggling with or at risk for mental illness, health problems, post traumatic stress disorder, unstable housing or homelessness, and under-employment.
- **Individuals and families who experience long-term homelessness** and are frequent users of hospital emergency departments, have frequent encounters with law-enforcement, and repeated stays in jail or institutions.
- **Individuals who have been recently released from prison or jail**, or are under court supervision and who are striving to maintain their family or re-unite with their children.
- **Families and young children who are at risk** for homelessness or involvement with child welfare, behavioral health or the justice systems because of extreme life circumstances.

The Levy as Investor

Addressing the full range of needs presented by each of the target populations is a far more ambitious task than the Levy funds alone can accomplish. Fortunately, the Levy is one among many local, regional and statewide efforts seeking to improve the lives of King County’s most vulnerable residents. Levy activities should carefully align with efforts targeting the same or similar populations, such as the Committee to End Homelessness in King County and the Healthy Families and Communities Task Force. The Levy will be most successful if it promotes collaboration across funding streams and leverages resources from local, state, and national sources in the public and private sectors.

Compatible Initiatives:

- Committee to End Homelessness in King County
- King County Criminal Justice Initiatives
- Sound Families Initiative
- Washington Families Fund
- Healthy Families and Communities Task Force
- Taking Health Care Home
- SOAR initiatives for children

Investment Principles

The Service Improvement Plan presents the allocation process as a series of investments in housing and human services systems operating throughout King County. As an investor, the Levy must:

- Apply funds to practices and strategies that are known to produce demonstrable and measurable results.
- Provide additional resources to existing programs and activities already achieving the desired results, in order to increase the capacity and geographic “reach” of services.
- Develop strategies to “braid” resources from multiple sources to simplify allocation and management of funds, and increase efficiency and effectiveness at the service and systems levels.
- Leverage the participation of new investment partners.
- Work with other funders to move the system toward a unified set of goals, objectives and reporting.

Service Improvement Plan

Overarching Investment Strategies

The investments of funds proposed in this report can be grouped in a variety of ways: by target populations as described previously; by specific program activities; or by overarching investment strategies. The latter grouping underscores the inter-related nature of the recommendations as they reach across the different target populations and highlights the Levy’s integrated approach to investments.

The establishing ordinance calls for 50 percent of total proceeds to be designated for veterans and their families and 50 percent for others in need. Total allocations honor the requirements of the ordinance.

The five overarching strategies are as follows:

1. Enhancing services and access for veterans
2. Ending homelessness through outreach, prevention, permanent supportive housing and employment
3. Increasing access to behavioral health services
4. Strengthening families at risk
5. Increasing effectiveness of resource management and evaluation

Enhancing Services and Access for Veterans and their Families

King County is home to thousands of veterans, military reservists and members of the National Guard, including men and women who served in World War II, the Korean and Vietnam Wars, the Gulf War and the current conflicts in the Middle East. Levy funds will assist these veterans and their families to re-integrate into civilian life through a variety of services such as homelessness prevention, housing and employment supports, and increased mental health and Post Traumatic Stress Disorder services.

Investments Include:

- Increase capacity of the existing King County Veterans’ Program services
- Expand the geographic reach of the King County Veterans’ Program to include a South County office and mobile outreach services in North and East King County.
- Expand PTSD services for veterans and their families.

The Levy will seek to increase and improve access to services geographically around the county, provide services to help elderly veterans and their spouses living with depression, and work to increase human service provider knowledge of veterans' services to help these men and women access and receive the federal benefits they have earned.

Investments, cont.

- Provide a veteran's resource helpline.
- Provide in-home services to elderly veterans and their spouses experiencing depression.
- Develop increased knowledge of and capacity to serve veterans at a range of mainstream community agency settings.

Ending Homelessness through Outreach, Prevention, Permanent Supportive Housing and Employment

One of the most critical problems facing King County is the lack of safe, decent, affordable housing for the Levy's target populations, including many veterans. Stable housing, linked to the needed array of supportive services, is essential to promoting recovery and employment. The need for appropriate housing is particularly acute for individuals exiting institutions and the criminal justice system, as well as for people who have been living on the streets or in shelters for extended periods of time, or are survivors of domestic violence. The Committee to End Homelessness in King County and its Ten-Year Plan to End Homelessness recognizes these needs, and the Levy's investment strategies have been carefully aligned with the goals, objectives and measurable outcomes contained within the Ten-Year Plan.

Investments Include:

- Expand outreach, engagement and coordinated entry for the highest users of services.
- Develop new units of permanent housing.
- Create a landlord "risk reduction fund" to encourage private sector landlords to rent to higher risk and homeless tenants.
- Increase subsidies and supports for new and existing units.
- Increase access to supports for individuals and families in permanent housing.
- Increase employment service programs and linkages to housing and behavioral health treatment systems.

Increasing Access to Behavioral Health Services

Another significant challenge for King County is the lack of access to mental health and chemical dependency services, especially for individuals who are not eligible for Medicaid and long-term care in the public mental health system. Without access to needed services, the risks of homelessness, criminal justice system involvement, hospitalization and family disintegration are greatly increased.

Investments Include:

- Expand the range of behavioral health services available through community clinics and public health centers.
- Expand the capacity of existing health and behavioral health services for formerly homeless individuals, including the elderly and veterans.
- Develop trauma-sensitive services in a variety of settings for people with PTSD, including children, veterans and survivors of domestic violence.

Strengthening Families at Risk

Many families in King County face circumstances that put them at increased risk of homelessness and involvement in the child welfare, treatment or justice systems. Parents in these families may already be involved with the criminal justice or treatment systems; this increases the risk that their children will also eventually be involved.

Investments Include:

- Increase access to child care, treatment and other essential services for homeless or recently homeless families with parents seeking to maintain employment.
- Pilot specialized services for mothers struggling with maternal depression.

Other children are at risk because their mothers are young, single, have low-incomes and are struggling to secure the necessities of life for themselves and for their children. Some families are at risk due to domestic violence and the need to find safe housing and supportive services. Some families, including recent immigrants, face linguistic and other cultural barriers to participation in community life. Proven and evidence-based practices will seek to support at-risk families, including strategies to promote reunification of families after the incarceration of a parent, support for healthy parental attachments to young children, and early interventions with toddlers who have behavioral problems.

Increasing Effectiveness of Resource Management and Evaluation

While the vast majority of Levy funds are dedicated to capital and direct services, a small amount of funds are reserved for systems development and planning activities that will assure the ability to measure and evaluate the results of the Levy and guide wise investments over the six-year span.

Levy funds offer greater flexibility than other funding sources. As such, they provide an opportunity to address critical system gaps in targeted service areas, create stronger and more reliable information and assessment tools, and opportunities for the development of potential new revenue streams.

- Investments, cont.**
- Expand the capacity of specialized, culturally and linguistically appropriate services for at-risk families to promote healthy early child development.
 - Assist with the complex process of family reunification and stability where one or more parent is exiting jail/prison.
 - Offer training to formal and informal child care providers on evidence-based practices that strengthen parent-child relationships and decrease children’s behavioral issues.

- Investments Include:**
- Process and outcome-based Levy evaluation.
 - Baseline analysis to create a detailed profile of King County offenders with behavioral health treatment needs.
 - Plan and start-up initiatives to create a system of care for youth aging out of foster care.
 - Technical assistance and training related to the implementation of the Safe Harbors Homeless Management Information System.
 - Increased capacity to share information across agencies and programs, in compliance with statutory confidentiality requirements.
 - Development and implementation of common assessment tools for adults, youth, and families across multiple systems.

Levels of investment (in 2006 dollars) for the overarching strategies:

	Veterans	Others	Total
Enhancing services and access for veterans	\$ 12.3 M		\$ 12.3 M
Ending homelessness through outreach, prevention, permanent supportive housing and employment	\$ 15.1 M	\$ 22.2 M	\$ 37.3 M
Enhancing access to behavioral health	\$ 6.5 M	\$ 2.3 M	\$ 8.8 M
Strengthening families at risk		\$ 8.9 M	\$ 8.9 M
Resource management and evaluation	\$ 2.6 M	\$ 3.0 M	\$ 5.6 M
All Strategies	\$ 36.5M	\$ 36.4M	\$ 72.9M

Veterans’ services are included in each of the categories above, not just the first category. The totals, as well as the detailed breakout of investments contained in the report and its appendices, should not be considered final amounts. The county must retain the flexibility and capacity to adjust these allocations over time if necessary, in order to ensure services are provided to meet the identified goals for the designated target populations; ensure that services are provided to those “most in need;” account for actual revenues received (over or under projections); and adjust to any changing demographics or other factors.

Management Plan

Responsibility for management of Levy funds and administration rests with the King County Department of Community and Human Services. The Levy Ordinance requires that DCHS manage the resources as two separate funds (one for veterans and one for non-veterans). The Levy Ordinance identifies two new advisory boards, the *Veterans' Citizens Levy Oversight Board* and the *Regional Human Services Levy Oversight Board*, to guide the allocation and expenditure of Levy funds. DCHS will ensure staffing to assist these two boards.

Managing Levy funds should become a model for how King County can move towards a more integrated approach to regional human services resource management, as suggested by citizen groups such as the Healthy Families and Communities Task Force. Further exploration of this idea may be contained in the work of revising the Framework Policies for Human Services, as required by Ordinance 15406.

Levy Evaluation

The voters approved a six-year Levy. The opportunity to ask the voters to extend the Levy occurs in 2011. To gain voter approval for continuation, it will be necessary to demonstrate the benefits the additional resources have brought to the Levy's priority populations, and to the quality of life in King County.

A strong evaluation component has been built into Levy activities to identify, measure and report the impact of Levy funds over time, and whether or not the Levy has achieved its goals. If it is successful, the community will see:

- Veterans and their families throughout King County accessing a fuller array of services to promote their health and wellbeing
- Reductions in criminal justice involvement and emergency medical service use among homeless people who were previously high users of those services
- Local governments working together in a coordinated approach to identify, engage and house homeless individuals and families with supportive services linked to housing
- Increased access to mental health and substance use treatment
- Previously homeless individuals and families off the streets and living in stable supportive housing
- Improved job readiness and increased employment rates
- Parents involved with the criminal justice system able to receive the services and supports they need to stay out of jail, get jobs and reunite with their families
- Families with young children able to access the services and supports they need to promote healthy child development and wellbeing, school-readiness and pathways to a healthy journey from youth to adulthood
- Easier access to culturally and linguistically competent services

Section I: About the Levy

Tom is a 24-year-old veteran of mixed European and Asian American descent living in Shoreline. He has just returned from two tours of duty in Iraq, where he served as a medic. Prior to enlisting in the Army, he had wanted to be a doctor. Since returning, he has lost all interest in medicine, has bounced from job to job, and is unable to meet his monthly rent and utility costs. He is troubled by continuous flashbacks to images of the carnage of the war and the wounds he treated while overseas. *"I'm doing my best to avoid everyone and everything right now,"* he says. *"I just wish I could feel safe, secure and comfortable, but it just isn't happening for me."*

Joseph is a 40-year-old African-American man living in a shelter in downtown Seattle. He is homeless and has been diagnosed with both schizophrenia and substance abuse. He regularly spends time in the jail, as well as at the hospital emergency room. He is intelligent and articulate, despite the many challenges he faces on a daily basis. For him, being homeless has become a full-time job, just to survive. *"I am not incompetent,"* he says. *"I just need help moving the obstacles out of the way."*

Susan is a single, Caucasian mother with two small children living in South King County. Without relatives, a support system or a car, and juggling a full-time job in a packaging warehouse with the task of getting her children to daycare every morning leaves Susan with little time to meet anything other than the most basic needs of her family. Susan ends each day exhausted and demoralized. *"Poverty is when what you have to offer isn't valued,"* she has said.

Every day in King County, men, women and families with children are struggling to hold their lives together in the face of daunting and frightening challenges. There are simply not enough resources to help those in our region that need assistance to achieve a healthier and more productive life.

About the Levy

In a continuing effort to close the gap, the Metropolitan King County Council in September 2006 approved Ordinance 15279:

"AN ORDINANCE providing for the submission to the qualified electors of King County at a special election to be held in King County on November 8, 2005, of a proposition to provide regional health and human services to residents of King County by authorizing a property tax levy...for a consecutive six year period at a rate of not more than \$0.05 per one thousand dollars of assessed valuation, for the purpose of providing funding to enable the provision of health and human services such as housing, mental health counseling, substance abuse prevention and treatment, employment assistance and other essential regional health and human services for residents of King County and establishing two county citizen oversight boards to review and report on expenditure of levy proceeds."

Proposition One

King County voters had the opportunity to vote on “Proposition No. I: Veterans and Human Services Levy” at the November 8, 2005 General Election. Proposition I ballot language was as follows:

“This proposition would fund services such as housing assistance, mental health counseling, substance abuse prevention and treatment, and employment assistance. It would also fund capital facilities and improvements to coordination of regional services for veterans and military personnel, and their families. It would authorize King County to levy an additional regular property tax of \$0.05 (5 cents) per \$1,000 of assessed valuation for collection in 2006 and levy the tax each year thereafter as allowed by chapter 84.55 RCW for the five succeeding years. Should this proposition be: Approved Rejected”

The ballot language estimated the cost to the average homeowner at “only about \$15 per year.” Needing only a simple majority, and achieving that by a countywide 57.92 percent favorable vote, King County voters approved the Veterans and Human Services Levy, expected to provide at least \$13.3 million per year for six years for housing, health and human services for veterans and their families and other low-income residents of King County. Fifty percent of the proceeds of the levy are dedicated to veterans and their families and the other fifty percent dedicated to a wider array of people in need.

Implementation

Moving to provide guidance on the implementation of the new levy, and the priority areas for funding allocation, the King County Council on April 18, 2006 approved Ordinance 15406:

“AN ORDINANCE providing direction regarding the expenditure of proceeds from the regional human services levy for veterans and others in need, requiring a service improvement plan for the use of these proceeds, [and] clarifying the roles of and process for appointing the members of the citizens’ oversight boards...”

The council ordinance directed the County Executive to develop and submit to the council a six-year strategic service improvement plan and appropriation plan for the investment of the levy proceeds.

Levy Priority Areas

The Council ordinance provides clear direction on its priority areas for Levy expenditures, calling for the Executive’s Service Improvement Plan to address “...*the goals of reducing homelessness and emergency medical and criminal justice involvement and increasing self sufficiency both for veterans and military personnel in need and their families and for other individuals and families in need.*”

The County Council also asked that the Executive, in developing the Service Improvement Plan, consider eight areas of investment for potential allocations.

County Council Priority Investment Areas (Ord. 15406)

1. Help veterans and their families who are in need to benefit from increased access to services that more effectively meet their needs in both the veterans' service systems and other human services systems and that encourage development of new partnerships between veterans' service systems and other human services systems.
2. Improve access to and success in housing and services by creating seamless, user-friendly pathways from local institutions, the courts, emergency medical and public safety services and the street into coordinated and integrated services.
3. Reduce repeated involvement in the emergency medical and criminal justice systems, and increase stability and self-sufficiency by developing and expanding the capacity of supportive housing networks that use housing first strategies and provide integrated support, treatment and employment services.
4. Allow for the timely and appropriate sharing of client information necessary to achieving maximum results with all of the access and service and housing improvement investments.
5. Increase access to and quality of post-traumatic stress syndrome treatment for veterans and others in need.
6. Increase the impact of programs that have demonstrated effectiveness in reducing recidivism in the criminal justice system by adding housing and employment components or increasing capacity, or both.
7. Increase self-sufficiency by adding employment goals and services to existing programs.
8. Reduce the risk of future criminal behavior or dependency problems by promoting healthy child development for children most at risk.

Levy Allocations

Levy funds are to be allocated to two general categories: "veterans" and "other people in need."

"Need" will be a key determinant in the actual distribution of Levy dollars. Discussions of need are found in several county reports, including the King County Human Services Framework Policies and the Human Services Recommendations Reports. The latter called out certain factors that cause individuals and families to be "most in need¹," including the presence of alcohol or drug abuse, chronic mental illness, homelessness, domestic violence or other child abuse or neglect, history of criminal activities, teen parents, risk of poor birth outcomes, and special needs children. Contributing factors included health issues (such as lack of access to health care, dental care or chronic health needs), immigrant or refugee status, institutionalized racism, involvement in child welfare or foster care, isolation and lack of social supports, lack of education, poverty, unemployment, and the lack of stable housing.

¹ Human Services Recommendations Report 2001 Annual Update, Definition of Most in Need, page 26

“Need” may vary among populations and geographic regions. Refinements to the definition of “most in need” may be undertaken as part of the next steps of implementing Ordinance 15406, both by the Executive branch and by the King County Regional Policy Committee.

The King County Department of Community and Human Services has created, per council mandate, two separate accounts to track spending for “veterans” and “others in need.” Within these two accounts, Levy resources fall into two distinct investment categories: “one-time and infrastructure investments” and “ongoing investments.”

One-Time & Infrastructure Investments

King County began collecting Levy funds in January of 2006. As this first year of funding accrues, it creates a pool of money that provides an opportunity for significant, one-time investments. Investments must be in areas or activities that will benefit from a single, large infusion of resources without requiring ongoing, annual investments to maintain them. One-time investment areas can include items such as housing, other capital expenses (e.g., equipment), information technologies, initiatives to promote collaboration and integration, activities related to development and implementation of oversight, and evaluation and accountability structures.

Ongoing Investments

All proceeds are split 50:50 between veteran and non-veteran populations. The vast majority of Levy funds available on an annual basis are dedicated to the housing, health and human service needs of veterans, their families, and other people in need. A summary of expenditures is shown below.

**Table 1
Illustration of Allocation of Levy Funds by Ordinance²**

Levy Investment Formula: \$13.3 Million Annually 2006-2011	
Veterans, Military Personnel and Their Families	Other Individuals and Families Most at Risk
Up to \$1 million for capital or one-time expenses (e.g., housing, infrastructure, etc.)	
At least \$2 million per year for King County Veterans’ Program services	\$1.5 million per year for early childhood prevention and early intervention services
Levy Administration: \$332,500	Levy Administration: \$332,500
Other Available Funds	
\$3,867,500	\$4,367,500

² The exact allocation will vary depending on the revenues collected each year, so these numbers are for illustration purposes only.

Section II: Philosophy and Principles of the Plan

Planning Approach The Service Improvement Plan was crafted by a team of planning consultants (Kelly Point Partners and Strategic Learning Resources) and King County staff from the Department of Community and Human Services (DCHS) and Public Health-Seattle & King County (PHSKC). The team reviewed existing plans and studies, evaluated what is known about the strategies and programs that work best, and consulted extensively with experts from the City of Seattle, King County, Veterans Administration, state government and the University of Washington.

Most importantly, the team met with groups of stakeholders from across the county to learn about needs, barriers, issues, and opportunities for improving the lives of people in need (see Appendix C). Using what it learned, the planning team created a framework for making the most effective use of the Levy funds, including:

- assumptions
- criteria for the overall plan
- criteria for strategies and initiatives
- principles of cultural competence.

Assumptions & Criteria

Assumptions Four assumptions were developed by the Levy Planning Team.

1. *Investments should be limited to a few target areas.* The first core assumption, consistent with council direction, was that it is most important to focus on a few well-defined groups of people in great need and do very well by them, rather than trying to do a little for many people in need. In this way, the Levy can have a greater impact and it will be possible to evaluate this impact over time.
2. *Alignment with other funders/partners will create the greatest positive impact.* A second core assumption is that Levy activities must be carefully aligned with other efforts targeting the same or similar populations. It is not possible to meet the full range of needs presented by the Levy's target populations with the Levy funds alone. However, the Levy is but one funder among many local, regional and statewide efforts working to improve the lives of these vulnerable county residents. Key initiatives identified for partnerships include, at least, the following regional efforts:
 - *Committee to End Homelessness in King County:* A broad-based effort bringing together government, business, social service agencies, philanthropy and faith organizations with citizens and advocates to implement a Ten-Year Plan to End Homelessness in King County

- *King County Criminal Justice Initiative:* A county-based initiative to promote appropriate jail diversion and post-release linkages for incarcerated individuals who need mental health and/or substance abuse treatment, supportive housing and employment services
 - *Sound Families:* A multi-year initiative to provide housing and supportive services to homeless families
 - *Washington Families Fund:* A statewide resource to sustain the delivery of supportive services in permanent housing to homeless and formerly homeless families
 - *Healthy Families and Communities Task Force:* A group of private and public sector leaders charged with defining unmet needs and funding gaps, and proposing a stronger regional response to human service needs in King County
 - *SOAR:* A community collaborative focused on building coalitions to create stronger systems of care for King County children and youth ages birth to eighteen, whose key partners are United Way of King County, the City of Seattle and the King County Children and Family Commission.
 - *Taking Health Care Home:* A foundation-funded initiative that has developed infrastructure to facilitate a permanent supportive housing pipeline for King County, and that is currently focused on strategies to increase employment opportunities for homeless and formerly homeless persons.
3. *The Levy is an investment partner.* Working with these initiatives, the Levy becomes an investment partner, using its funds to promote collaboration across funding streams and to leverage new resources from local, state, and national sources in the public and private sectors. Some of the strategies and allocations in the Service Improvement Plan will be dependent on matching investments from other fund sources and the active participation of existing public and private sector agencies and initiatives.
4. *Funds should be invested where the Levy can measure and show results.* Levy funds should be applied to practices and strategies known to produce demonstrable and measurable results, based on the continuum of evidence-based, research-based, consensus-based and promising practice models. This may include:
- Providing additional resources to existing programs and services already achieving the desired results, in order to increase their capacity and geographic “reach”
 - Developing strategies to braid resources from multiple sources to simplify allocation and management of funds and increase efficiency and effectiveness at the service and systems levels
 - Working with other funders to move the system towards a unified set of goals, objectives and reporting.

Criteria for the Overall Plan

Four broad criteria for the Service Improvement Plan were set by the planning team. The Plan must:

1. *Promote services and system integration by challenging existing fragmentation.*

The Plan will seek to expand the capacity of organizations to coordinate and integrate service delivery, such as through the linking of housing and supportive services for individuals and families with multiple needs. This will be particularly true in the areas of services for veterans and for the homeless.

2. *Fill existing gaps in services and continuums of care, rather than creating new programs that promote systems fragmentation.*

The Plan will build on existing system strengths and programs with proven track records, rather than inventing new programs and services that duplicate successful programs already in place.

3. *Demonstrate high impact and positive results for the selected populations and communities.*

The Plan will meet this criterion if the strategies are thorough, coherent, and evidence-based and the outcomes are measured and positive.

4. *Continue to move King County and local partners towards an effective regional management approach to housing, health, and human services*

A regional approach to managing the Levy will help to promote a consistent approach to contracting, training, standards, information systems, etc., as well as ongoing collaboration and coordination across jurisdictions and agencies. The Plan attempts to balance a regional approach of managing resources and need with a local approach to service implementation.

Criteria for Strategies

The following criteria were used by the planning team to determine which of a wide array of strategies would receive Levy investments. Strategies did not need to meet all criteria, but needed to be aligned with the overarching strategic direction of the Plan. The criteria for strategies called for them to be:

1. *Based on evidence-based practice in which the expected outcomes can be articulated and measured*

Evidence-based programs have established and tested ways of providing services that are known to provide results and that have protocols for evaluating and refining them. Adhering to these models speeds the development of services and offers greater confidence that the investments will make a difference.

2. *Data driven*

Strategies need to be directed to the populations and communities where the greatest differences can be made with respect to Levy goals. To the extent possible, the planning team used information about populations and their needs to target effective strategies.

3. *Building on existing successful programs or structures*

King County is rich with creative and successful programs for people in need. Levy funds will be used to expand the capacity of these programs across the county. This will help limit fragmentation of services, save development time, and strengthen the existing regional health, human services and housing systems.

4. *Likely to attract or leverage other public or private resources*

The most effective and sustainable programs are those that braid funding streams and create public-private partnerships.

5. *Improving access to services for the target population*

Housing and human services systems are currently too difficult to negotiate by people who are hungry, homeless, battling addiction, fleeing domestic violence, struggling with mental illness or dealing with other stressors that compromise coping abilities. Access must be simplified wherever and whenever possible.

6. *Feasible to replicate or expand in the future*

The ability to expand or reproduce a program or strategy in a new part of the county builds on “what works” and offers another step in reducing the fragmentation of services.

Cultural Competence

The effectiveness of the strategies supported by the Levy will depend on the ability of the systems, agencies and individual providers to deliver services in ways that are grounded in the beliefs and attitudes of the diverse communities they serve. There are a disproportionate number of people of color who are homeless, involved in child welfare and criminal justice systems, or at risk for those events. To break this cycle, services must be delivered within the context of cultural beliefs, behaviors and needs presented by clients and their communities.

Furthermore, it must be recognized that the delivery of culturally competent services is not the sole answer to breaking the cycle of racism that results in people of color being disproportionately negatively involved in child welfare,

What is a culturally competent system?

A system that “acknowledges and incorporates – at all levels – the importance of culture, assessment of cross-cultural relations, vigilance toward the dynamics that result from cultural differences, expansion of cultural knowledge, and adaptation of services to meet culturally unique needs.” - Joseph Betancourt, MD, MPH, Institute for Health Policy

homelessness, and criminal justice. Culturally competent services only insure that services to *individuals* are delivered in a sensitive and appropriate manner. To assist in breaking the cycle of disproportionality, racism and cultural barriers must be eliminated at an *institutional* level by examining the larger service strategies, policies, engagement practices, assessment tools, and decision-making patterns.

Language

Cultural competence must address linguistic capacity and competence, especially in light of the large immigrant communities that have made King County their home. Immigrants, and those for whom English is not a primary language, face numerous barriers to integrating into American society that prevent them from accessing services and may cause them to be overrepresented among victims of domestic violence, unstable housing and under-employment. Many immigrants lack knowledge about employment protocols such as how to file for unemployment or Labor and Industry claims. Linguistic barriers may also cause the children of immigrants to be at increased risk of involvement with the child welfare system and juvenile court.

Veterans

Veterans are a distinct group with unique perspectives and needs. In many respects, veterans constitute a group to whom the principles of culturally competent services must be applied. A system that is competent to serve veterans must be able to identify veteran populations and provide services that are tailored to their unique issues and concerns. Asking the basic question of all service recipients, "Have you ever served in the United States military?" is a critical starting point for the delivery of competent veterans services. Having the expertise and skill to understand veteran issues and the complex array of services available to them is a critical next step.

Applying Cultural Competence to Evidence-Based Practice

While one strong criteria for the selection of strategies is that they be evidence-based, there must be a readiness to examine whether evidence-based practices, which may have worked well in the context of one culture, will work as well in the context of another. Some adaptations to evidence-based practices may be necessary for diverse communities. Community-based organizations can offer the cultural competence and connection to community needed for success and must be given opportunity to participate in the implementation of the Levy strategies.

Section III: Whom the Levy Will Serve

Whom the Levy Will Serve

The needs of individuals across King County are extensive and varied, and strong arguments can be made for focusing on any number of populations and communities.

King County Council Ordinance 15406 provided direction in this regard, stating, "There is a need to provide additional direction regarding the use of these proceeds to ensure they achieve the kind of results that will satisfy taxpayers of the county that they have made a wise investment. If these proceeds are spread too broadly across the wide array of needs, there will be little or no impact. The proceeds need to be focused in one or two areas and invested strategically, not just to add new services but to improve the overall capacity and results of existing services and systems."

The ordinance further states, "The proceeds shall be used primarily to prevent or reduce homelessness and unnecessary involvement in the criminal justice and emergency medical systems for veterans, military personnel and their families and other individuals and families most at risk." The ordinance goes on to call for "A small portion of the levy proceeds not specifically designated for veterans...should be targeted to continue to identify and promote the development of effective early intervention and prevention services."

In consultation with stakeholders and upon careful review of the Levy ordinance and the data on unmet need, the Planning Team made difficult choices to focus investments in a few targeted areas, in order to have the greatest impact.

Selected Populations

Four priority populations are identified:

1. *Veterans³, military personnel, and their families.* Many veterans, military personnel and their families are struggling with mental illness, substance abuse, domestic violence, unstable housing or homelessness, under-employment and other issues. These include families of men and women who are currently deployed and who, for one reason or another may not be eligible for VA services⁴, soldiers who have recently returned and are having difficulty resuming with normal daily life, as well as older veterans and their spouses.
2. *Individuals and families who experience long-term homelessness and are frequent users of emergency services, have frequent encounters with law-enforcement, have repeated stays in jail or institutions and may be survivors of domestic violence.* These

³ A definition and discussion of the term "veteran" can be found in Appendix A.

⁴ These families include National Guard, unmarried couples with children, and families who have some income but have suffered a significant drop in income due to the deployment.

individuals often suffer from serious mental illness, addiction to drugs or alcohol, have little employment history, and have either no contact with family or have a seriously dysfunctional family. About one out of four homeless individuals in King County are veterans, many of whom experienced combat in Korea, Viet Nam, the Gulf War and other conflicts in the Middle East.

3. *Parents who have been recently released from prison or jail, or are under court supervision, and who are striving to maintain their family or be re-united with their children.* Most are single women and many are homeless, are attempting recovery from substance abuse and/or mental illness, and have experienced domestic violence or other forms of physical or sexual abuse in their past.
4. *Families and children who are at risk for homelessness and involvement with child welfare, behavioral health or justice systems because of extreme life circumstances.* These are families of first-time teenage or young parents; families with parents who have been involved with the justice system; families and children who have survived domestic violence; families with parents who are immigrants or refugees and isolated due to culture and language; and children whose mother suffers from post-partum depression.

*Conditions in
Common
Contributing to
Need*

Groups of vulnerable individuals and families, while called out separately for the purposes of developing strategies to help them, are not that distinct from each other. They have many conditions and life circumstances in common, including:

- periodic or long-term homelessness
- mental illness, including chronic depression, post-traumatic stress disorder, severe anxiety and schizophrenia
- abuse or addiction to drugs and alcohol, which is often experienced at the same time as mental illness
- other chronic health conditions, often the result of factors such as poor access to health care, long years of substance abuse, lack of good nutrition, and stressful living environments
- extreme poverty
- experience with violence, including domestic violence or sexual assault
- disrupted education
- either no or a poor work history and little or no education
- encounters with police and the courts
- lack of connection to an extended family or community.

*Demographics
and Research*

The Levy Planning Team gathered a significant amount of information and data on the identified priority populations, the nature of services available to them, and the gaps in service provision. This information is available in Appendix B.

Section IV: Input from Stakeholders

Process	<p>The Levy ordinance mandated the “<i>specific involvement of the county veterans' program advisory board, health care for the homeless, jail health, housing and community development, mental health, chemical abuse and dependency, work training, community corrections, parent child health and the children and family commission...[consultation] with the Committee to End Homelessness in King County, the appropriate juvenile and adult justice operational master plan oversight and working groups, SOAR and regional and sub-regional human services planning groups.</i>”</p> <p>The Levy Planning Team met with many constituent groups (see Appendix C) seeking input on priorities and strategies for Levy investment. The team thanks those providers, clients, advocates and other participants for their time, energy and thoughtful contributions.</p> <p>Each stakeholder who participated in the information-gathering phase was invited to review and comment on an initial draft of the Service Implementation Plan. Posted on the Internet, it was also made available to the public. This input was carefully reviewed and, where appropriate, changes were made to the body of this report as well as to the Levy allocation and management plans. A second draft was posted in late August and again public comment was solicited. Again, input was reviewed and applied to the final draft.</p>
Highlights of What We Heard	<p>A detailed summary of stakeholder input can be found in Appendix C, which includes the presentation to stakeholders describing the Levy process and a list of the groups with whom the team met. Highlights of overarching themes expressed through the public comment follows.</p>
<i>Coordination & Collaboration</i>	<p>A strong desire for systems and service providers to work together more effectively was noted by many as a means to reduce fragmentation of services and resources, provide services that more closely fit the needs of individuals and families, and better reflect the cultural diversity of King County’s communities.</p>
<i>Cultural Competency</i>	<p>The increased number of refugee and immigrant populations in South and East King County, and the disproportionate number of people of color involved in the criminal justice system and shelters, raised for many stakeholders the need to increase the cultural competency of systems, programs and staff. Pairing smaller community-based organizations – bringing an in-depth knowledge of diverse beliefs and traditions – with larger regional organizations that have the needed infrastructure, was a strategy suggested by several groups.</p>
<i>Planning</i>	<p>Many stakeholders saw a need for more planning and suggested that the flexibility of Levy funds provides an excellent opportunity to do so. Others felt there was too much funding set aside for planning efforts.</p>

<i>Public Education</i>	<p>Stakeholders voiced a need for public education and community relations in order to help the business community, faith, schools and other groups understand how they can be part of the solution and increase the involvement of philanthropic organizations in funding housing, health and human services. Many also noted the importance in keeping the public informed as to how their tax dollars are being spent the results being achieved.</p>
<i>Resource Management</i>	<p>Ideas related to resource management included the following issues and concerns.</p> <p>Levy funds must leverage other funding.</p> <p>It is critical to create a shared vision about the wise use of resources so that the case is built for continued funding beyond this Levy.</p> <p>Public agencies, community groups, and non-profit providers believe there are many programs in the county that are doing ‘the right thing’ but they do not have the resources ‘to do enough of it’. There was strong emphasis on increasing the capacity and geographic reach of existing successful programs and systems.</p> <p>Several stakeholders noted that South King County, which has seen a significant increase in the needs of its residents, has not seen a proportionate increase in resources, resulting in major unmet needs in service infrastructure and program capacity. They felt that Levy investment strategies should help address this shortfall.</p> <p>Concerns were expressed about differences in “need” by subregion. A seemingly overwhelming emphasis on chronic homeless populations restricts access for others in need. There was strong advocacy for access to services for their residents and a request that the needs of all subregions be acknowledged and respected.</p>
<i>Housing and Homelessness</i>	<p>Housing, in the form of emergency shelter beds, transitional living units and most especially, permanent supportive housing, is a critical gap. Supportive services linked to housing is critical. There was clear direction that Levy funds should be used to support the Ten-Year Plan to End Homelessness and align with the efforts of the CEHKC.</p> <p>However, others voiced the opinion that too much Levy funded was dedicated to homelessness and housing. Some, primarily from East King County, requested less money on chronic homelessness and more devoted to homelessness prevention.</p>
<i>Behavioral Health</i>	<p>Another large gap in capacity identified by stakeholders is the lack of access to mental health treatment. The Levy Planning Team heard repeatedly of the difficulties in helping people whose non-Medicaid status, “lower” severity of mental illness, or ineligibility of diagnosis prevented them from receiving publicly funded mental health services.</p>

This barrier to treatment constitutes an enormous obstacle to helping individuals make life changes and move towards recovery.

There was a common view that mental health and chemical dependency services must be more readily available and integrated into other service systems (e.g., primary care), both in terms of the delivery of services and the location of services, if we are to be successful in ending homelessness, reducing recidivism within criminal justice, and reducing use of emergency medical services.

Ease of Access

Many stakeholders spoke about the complexity of the housing, health, and human service systems that create unnecessary barriers to accessing assistance. People struggling to cope with basic survival too often face challenges and barriers when they try to seek help. A strong desire was voiced to make access to services easier, including geographically.

Access for Veterans

Many stakeholders focused on veterans' need for assistance in accessing services and the importance of tailoring services to meet their particular needs. Questions were raised about where veterans' services "end" and community services "begin," with hopes expressed that funds could be braided efficiently for coordination and filling the gaps. Lack of geographic access was a key point for veterans.

Strengthen Families at Risk

A major message from stakeholders regarding families at risk was to focus on strengthening the skills and relationships between children and their formal and informal caregivers. Stakeholders urged that dollars be spent in ways that build upon existing programs and services for families most at risk. Several noted that among the families most at risk are those fleeing domestic violence situations and urged services and supports to assist these families.

Other Specific Strategies

Each group the Levy Planning Team met with put forth strategies for reducing recidivism in the jail system, decreasing emergency medical costs, supporting health in early childhood development, increasing self-sufficiency through employment, and reducing homelessness. All were of great value to the planning team.

Section V: Overarching Investment Strategies

Overview

The use of Levy funds has been approached from the perspective of investing, rather than spending money. The goal is to use Levy funds to create future benefits for the community. The framework for the investments is grounded in a set of investment principles.

Investment Principles

The following core investment principles have been used to guide the development of the Service Improvement Plan and allocation of funds:

- Levy funds will be dedicated countywide to those most in need.
- Levy funds will be used most effectively when they are invested in activities that meet the philosophies and principles of Section II.
- Levy funds can be used to fill in service and housing gaps created by the ‘silos’ of state and federal government funding.⁵
- King County will work to identify investment partners whose funds can be joined with Levy resources.
- By sharing investment opportunities, King County will increase the impact of Levy investments.

Overarching Investment Strategies

Individuals in need may “fit” into one or more target population groups. For this reason, the Levy Planning Team believed it was more effective to focus on investment strategies that could transcend any particular population group.

This section describes the five overarching investment areas in which Levy funding will be invested in an effort to help target populations achieve healthier and more productive lives. They are:

- Enhancing access to services for veterans and their families
- Ending homelessness through outreach, prevention, permanent supportive housing and employment
- Increasing access to behavioral health services
- Strengthening families at risk
- Increasing effectiveness of resource management and evaluation.

With very few exceptions, the investments do not include references to any specific community agency that may be involved in this work. Instead, descriptions are offered in a more generic format in order to convey the goals of each area of activity, rather than to identify what agency might be funded. DCHS, as manager of the Levy funds, holds responsibility for defining need and developing procurement plans to mobilize each of the investment areas.

⁵ Gaps can include difficulties accessing housing (e.g., criminal history) and ineligibility for mental health services (e.g., non-Medicaid status) as examples. Levy funds can be the ‘glue’ that binds other funding streams together.

Overarching Investment Strategies



Enhancing Access to Services for Veterans and their Families

\$12.3M

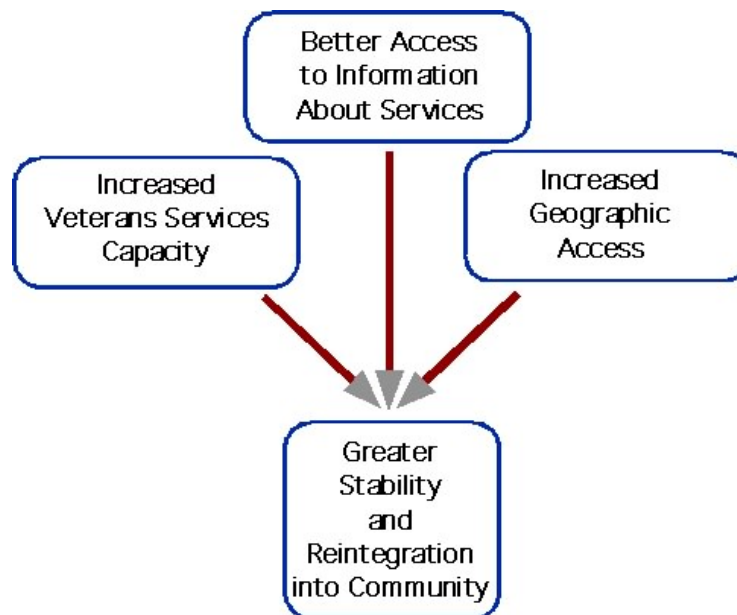
Overview

King County is home to more than 150,000 veterans, military reservists and members of the National Guard, including men and women who served in the Second World War, the Korean and Vietnam Wars, the Gulf War and the current conflicts in the Middle East. Services for these veteran populations are not only a way of honoring those who have served their country, but are also often a critical component in helping them re-integrate successfully into the community upon discharge from the military.

The approved ballot measure calls for 50 percent of all proceeds to be “designated for the provision of health and human services for veterans and military personnel, and their families.” **The Service Improvement Plan honors that promise.** Appendix D shows the distribution of dollars for veterans’ assistance across all five of the investment areas.

Levy investments described in these two pages speak to the enhancement of programs and services specifically for veteran populations. The overall goals of these investments is to increase access to information about services, increase geographic access to services throughout the county, and link veterans to those services that will help them to attain and sustain a stable and more successful life in the community.

Figure 3
Increasing Access for Veterans



Increase access to services

Expand geographic range of the King County Veterans' Program: The King County Veterans' Program in downtown Seattle serves Seattle-area veterans well, but is less effective in helping the large numbers of veterans living in other parts of the county. The strategy to address this issue has two components: 1) Establish a new King County Veterans' Program office co-located with Work Source Renton; and 2) Create a mobile "veterans outreach on wheels" with a home base at Work Source Renton and targeted other outreach locations throughout the county. These efforts will give Veterans' Program staff the means and resources necessary to bring veterans services more effectively to residents of South, East and North King County.

Increase the capacity of current King County Veterans' Program services, and enhance and improve the Web site providing information on those services: Coupled with increasing the geographic range of veterans' services, Levy funds will be used to increase the service capacity of existing programs with proven track records. These programs include the Veterans' Incarcerated Project (VIP), Post-Traumatic Stress Disorder services, employment services, and financial assistance. In addition, the Veterans' Program will improve its Web site to provide information on available services and provide links to other relevant service systems.

Increase access to information about services

Provide a dedicated telephone resource for veterans: The new "2-1-1" telephone system has created a centralized and coordinated resource for referral and linkage to a broad range of regional housing, health, and human services in King County. The significant complexity of multiple veteran-serving agencies makes it difficult for veterans and their family members to find or access services, and there is a real need for centralization of these information. Veteran stakeholders specifically indicated that they would be more likely to use a call-in number uniquely dedicated for their use. However, it needs to be researched further whether or not this activity would be a separate information and referral service, or more likely within the existing "2-1-1" system.

Provide training and information for community providers on the Veteran's Administration system services and linkages: The federal Veterans Administration (VA) and the range of services they provide often remains a mystery to many community-based providers. The VA system is, in many ways, disconnected from mainstream services. Additional training and information about the VA system, the services it provides, and ways to link veterans to these services will help providers in other health and human service settings to increase access to veterans services for their eligible clients. Community providers will help to open these doors to service by consistently asking all clients if they have ever served in the U.S. military.



Ending Homelessness through Outreach, Prevention, Permanent Supportive Housing and Employment

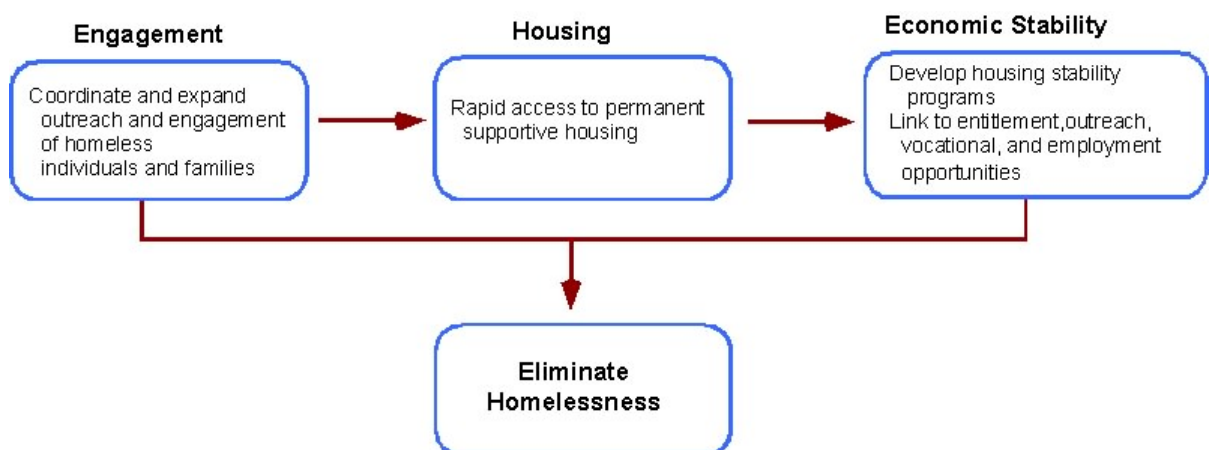
\$37.3M

Overview One of the greatest problems facing King County is the lack of safe, decent, affordable housing for the Levy's target populations, including many veterans. Stable housing, linked to the needed array of supportive services, is critical to promoting recovery and employment.

The need is particularly acute for individuals exiting hospitals and the criminal justice system, as well as for people who have been living on the streets or in shelters for extended periods. These individuals include many veterans who are homeless or at risk of homelessness, and includes individuals and families fleeing domestic violence. Numerous studies have documented reductions in emergency medical and criminal justice involvement after homeless people with disabling conditions get into stable housing and appropriate supportive services. The Committee to End Homelessness in King County and the Ten-Year Plan to End Homelessness recognize these needs, and the Levy's investment strategies have been carefully aligned with the goals, objectives and measurable outcomes contained within the Ten-Year Plan.

A primary goal for Levy investments is to help break the cycle of homelessness in ways specifically proven to help control the growth in costs in expensive after-the-fact health and criminal justice systems. Levy investments will expand the capacity to reach, engage and house the most compromised homeless individuals throughout King County and get them on the road to recovery and employment.

**Figure 2
Breaking the Cycle**



Partner in initiatives to identify, engage and house long-term homeless populations

The purpose of outreach is to connect or reconnect a person who is homeless to needed health, mental health and substance abuse services, social services and housing. Numerous studies have documented that outreach and engagement activities are particularly effective with chronically homeless individuals.

Two efforts, one focused in Seattle and one in South King County, are funded to expand outreach and engagement directly linked to placing the highest need chronic homeless people into supportive housing.

South King County: The goal is to build infrastructure and capacity in South King County for coordinated, effective outreach and engagement of chronically homeless persons and provide linkages to housing. This investment strategy has two parts. The first begins to address the underserved parts of King County outside of Seattle that report extensive homelessness in both urban and rural settings by expanding outreach and engagement staff to focus on veterans and people with chronic substance abuse. This activity would build upon existing PATH outreach activities now focused on those with serious mental illness. Need and support for some sort of mobile medical services program as part of a continuum of services could be investigated for its feasibility.

The second part of this strategy is to improve coordination of existing systems through development, monitoring, and leveraging opportunities of these expanded services through the South King County Human Services Planning Group and the South King County Forum on Homelessness. Additional coordination with funder-partners and dedicated “housing first” placements can be increased through both existing and new supportive housing resources.

Seattle: Investment will create a triaged list of the homeless high utilizers of sobering, courts, jails, and the health system and coordinate their entry into an array of existing and new set-aside housing units, housing vouchers or other placements. Existing outreach and engagement programs will be re-organized in a new coordination model linked to housing placements to help reduce the numbers of homeless people cycling through expensive medical and criminal justice systems and living on the streets and in the shelters of downtown Seattle. The model could be based on the most successful elements of programs like Philadelphia’s Outreach Coordination Center and San Diego’s Serial Inebriate Program and Homeless Outreach Team.

Levy funds would pay for developing and maintaining the high utilizer list, outreach to identify and engage these individuals, staffing, data system support, and tracking case status. Existing local funds related to these functions would be reprogrammed to align with this “umbrella” initiative, thus making better use of existing resources and using Levy funds strategically to initiate the change. Portions of the new Levy-funded supportive housing (see next section) would be dedicated to this high utilizer initiative.

Increase permanent housing with supportive services

Increase permanent housing units for veterans and other persons in need:

The largest single investment of the one-time and ongoing capital dollars available from Levy funds (more than \$14 million in 2006 dollars) is for the development of new, permanent housing throughout King County. This housing will be linked to the supportive services required by the tenant populations to assist them in sustaining housing tenure over time.

Develop a Landlord Risk Reduction Fund: Landlords are reluctant to rent apartments to individuals and families they perceive to be high-risk, either because of poor rental histories, poor credit issues, previous criminal justice system involvement, or the presence of mental illness or substance use disorders. The creation of a risk reduction/insurance fund to cover the costs of delinquent rental payments or damage done to units gives housing providers a tool to persuade landlords to rent to higher risk tenants, thereby making it easier for them to find permanent housing.

Increase the availability of supportive services for existing or new permanent housing: This strategy has several parts. The first is to provide a major ongoing investment in supportive services countywide for residents of permanent housing. This can be accomplished through a major investment in the new coordinated Request for Proposal process initiated for supportive services and housing operating costs. Supportive housing is a successful and cost-effective combination of affordable housing with services that helps people live more stable, productive lives. It costs essentially the same amount of money to house someone in stable, supportive housing as it does to keep that person homeless and stuck in the revolving door of high-cost crisis care and emergency housing, but yields outcomes that are far more humane.

The funds in this Levy investment area are to purchase the needed on-site services delivered directly at housing sites throughout King County. These services will be provided by the housing organization and/or other service agencies, depending on the needs of the tenants in a given supportive housing building. On-site services may include case management, life skills, money management, on-site health care and wellness services, on-site chemical dependency and mental health services, help with making and keeping appointments at community agencies, and related services.

Many of the services to be increased through other Levy investments (e.g., behavioral health and employment) will vastly improve access for supportive housing residents. Residents will also continue to access major state and federal assistance programs for which they are eligible. Levy funds would pay for the needed on-site services in housing that are not funded by or the responsibility of other systems of care.

The second investment is to enhance the capacity of the King County Criminal Justice Initiative to locate, secure and provide the supportive *housing options needed by ex-offenders* who are homeless and re-entering the community from jails throughout King County.

The third investment is to contribute to *permanent housing placement supports* for single parents with young children who have criminal justice system histories who are exiting transitional housing. Single parents with young children who have been placed in transitional housing as part of re-entry from incarceration will require both transitional and ongoing supports to ensure successful tenancy in permanent housing.

Prevent homelessness from re-occurring

Develop a countywide housing stability program for veterans and other persons who are at risk of homelessness: Many individuals and families face short-term emergencies that, left unresolved, may put their housing at risk. An expensive prescription for a sick child, an unexpected car repair, a high utility bill – any of these may create situations that put a household in the difficult position of being unable to make a timely rent payment. Housing stability programs provide relief on an emergency basis to renters facing this type of crisis who would otherwise have the resources to pay their rent. It allows low-income renters to preserve their housing and ultimately prevents homelessness.

Link educational, vocational and employment opportunities to housing and supportive services: Employment is a key to financial and family stability and meaningful participation in community life. Taking Health Care Home (THCH), in a report issued in July 2006, outlines a series of strategies to promote increased employment opportunities for homeless and formerly homeless people. Levy investments can contribute toward implementation of selected recommendations, including 1) expansion of existing education, employment and vocational training programs targeting people who are homeless or formerly homeless; 2) expansion of child care services that enable parents to work; and 3) provision of dental care vouchers for persons seeking employment whose ‘bad teeth’ pose an impediment to finding or keeping jobs.



Overview One of the greatest challenges facing King County is the lack of access to mental health and chemical dependency services, especially for individuals who may not be eligible for long-term care in the public mental health system due to their lack of Medicaid eligibility. Without access to needed services, the risks of criminal justice system involvement, hospitalization and family disintegration are greatly increased and the cycle of repeated or prolonged homelessness continues.

The goal of these Levy investments is to fill gaps in services and provide a continuum of care for people who have been homeless or are at risk for homelessness. The specific strategies recommended would provide services for a range of conditions from minor depression to serious chronic mental illness and/or addiction and serve both persons who are mobile and comfortable using community health clinic services as well as those who, for physical or emotional reasons, are best served at home. All strategies build on programs that already exist in the community.

Expand behavioral health services through primary care and other providers

Enhance the integration of mental health and chemical dependency with primary care at existing community clinics and public health centers: Many individuals with significant behavioral health needs regularly seek primary care services from the existing network of community clinics and public health centers. This includes individuals who are not generally eligible for enrollment in the publicly funded mental health system, or who may be unwilling to seek services from an identified mental health or chemical dependency treatment program. Levy investment can expand the ability of these clinics and health centers to provide behavioral healthcare as part of primary care for veterans in need and for children and adults who are homeless or at risk of homelessness. This will greatly enhance the clinic's effectiveness at promoting stability among their patients, encouraging recovery and preventing homelessness.

Invest in training in trauma sensitive services and PTSD treatment: One of the greatest unmet service needs of veterans, school age children of veterans, people with histories of homelessness, individuals and families who have experienced domestic violence or physical or emotional abuse, and individuals who have been incarcerated is the recognition and treatment of post-traumatic stress disorder. Levy funds can be invested in 1) raising awareness of trauma issues and the skills needed to address them, and 2) to support the creation of trauma-informed and trauma-sensitive programs across jails, courts, emergency services, schools, social services, primary care, and housing programs. A number of programs in King County already possess a significant level of expertise on this topic and can act as resources for this training countywide.

Train behavioral health providers to use evidence-based practices for PTSD

Train behavioral health providers to use evidence-based practices for Post Traumatic Stress Disorder: As is the case with primary care providers, behavioral health providers in the mental health and substance abuse systems and other service systems, are in need of training and the cultivation of skills to effectively identify and address trauma and post traumatic stress disorder in both veteran and non-veteran populations (as discussed on the previous page). Training with a behavioral health context would focus on the implementation of evidence-based practices and the cultivation of trauma-sensitive mental health and substance abuse and other case management and human services throughout King County.

Expand and extend availability of in-home mental health services

Invest in services to treat depression in chronically ill and disabled elderly veterans, as well as elderly who have transitioned from homelessness to permanent housing: Many elderly individuals –veterans and their spouses and non-veterans – experience depression when their disabilities or infirmities isolate them from health care, counseling and the supports that are available in the community. The PEARLS program is an evidence-based program developed through a research grant with the University of Washington and offered through Seattle’s Aging and Disability Services (which serves the whole county as the Area Agency on Aging). PEARLS has demonstrated that the provision of in-home counseling and support can aid with depression and promote greater community involvement, thereby reducing the risk of homelessness and the need for more costly inpatient and custodial care services.



Overview Critical needs for families include strong maternal-child attachments, economic self-sufficiency, and connection to community and/or extended families and other indigenous supports. Many families in King County face circumstances that make these conditions unlikely, putting them at increased risk of involvement in child welfare, behavioral health treatment or justice systems.

Strategies focused on early intervention and prevention, and based on either evidence-based or promising practices, are recommended for Levy investments. These strategies focus on young first-time mothers, single parents exiting the criminal justice system, and recent immigrants who are isolated from services and face linguistic and/or other cultural barriers to participation in community life. Each strategy builds on successful programs and initiatives provided in different areas of King County.

Support maternal-child attachment and maternal health

Expand Nurse Family Partnership and add linkages to employment opportunities: The Nurse Family Partnership, a nurse home visiting program, is a proven early intervention with young, first time pregnant mothers. Favorable results include fewer emergency room visits, less child abuse and neglect, increased employment, less use of public assistance, fewer arrests among both mothers and their children, reduced substance abuse by mothers, increased school readiness by children, and fewer behavioral problems in children. This program is currently provided at various sites in King County. The Levy investment expands the program where it is needed, and adds the capacity to link young mothers to training and employment opportunities.

Pilot new services for maternal depression: Severe maternal depression occurs most frequently in low-income mothers and is a serious deterrent to the development of healthy maternal-child attachments and early child development. Evidence-based interventions can be offered through the community clinics and public health centers where low-income mothers are most likely to seek services. This initial Levy investment is suggested as a pilot program in five sites, to be integrated and coordinated with the overall Levy investment in behavioral health services in primary care sites. Criteria for selection for the sites would include numbers of childbearing women served at the site, progress in implementing universal screening for mood disorders and domestic violence, geographic diversity, and capacity for gathering data to evaluate the interventions.

Support healthy early childhood development and parenting

Expand the availability of programs that promote healthy early development through responsive, nurturing caregiver-child relationships and improve language and culturally based access to services. Curricula and training programs for those who care for children (both professional care givers and the family, friends or neighbors who provide child care), such as *The Incredible Years* and *Promoting First Relationships*, have been shown to improve child behavior, readiness to learn, and the ability of parents to nurture and guide their young children. These and other proven programs expand the reach of early intervention activities and are in place in a number of agencies in the King County area. Their capacity, however, is limited. An ongoing Levy investment could greatly increase the number of children and families who would benefit from them.

There is a policy level commitment to providing services in culturally competent ways and decreasing the cultural and linguistic barriers that low-income, non-English speaking immigrant families face. This is especially important for human service organizations working in those King County communities with significant and growing numbers of immigrants. An example of one program working to increase access is a new pilot Family Resources Navigator/Coordinator program for immigrant families in East King County, the recommendation for which came out of a community-based study of immigrant family needs. It is designed to help connect clients to services more effectively and to provide a centralized resource database for interpreters, translators, and cultural experts. Within the Levy's pool of funds for early intervention and prevention, modest investment in programs that increase access to services for immigrant families could reap considerable benefits and reduce the likelihood for needing more costly services later.

Provide early intervention and supports for parents exiting the criminal justice system

Provide service enhancements for single parents exiting the criminal justice system, living in transitional housing. Parents returning to the community following episodes of incarceration are at increased risk for homelessness, relapse into patterns of substance abuse, psychiatric decompensation, recidivism, and loss of child custody or involvement with Child Protective Services. Specialized supportive housing and services targeting this population can help stabilize and re-unify young families, and address the histories of physical trauma, domestic violence and sexual abuse that are so often present for these individuals. Numerous initiatives in King County are working to address the re-entry needs of this population. An investment of Levy funds will help to insure that the proper configuration and intensity of supportive services are available.

Invest in education and employment programs for single parents exiting the criminal justice system. People exiting the criminal justice system often have difficulty finding and maintaining the jobs that are critical to promoting family stability and preventing recidivism. In addition to the

stigma that is often associated with ex-offenders, many individuals in this group need extensive employment supports if they are to succeed in breaking the cycles of criminal activity, homelessness, substance abuse, etc. This is also true of parents involved with Child Protective Services. Services needed include educational assistance toward high school graduation or a GED, vocational training and skills enhancement, job placement and supports, child care services that enable parents to work, substance abuse and mental health counseling, dental care, etc. With both real and anticipated cuts to existing employment system budgets, including reductions in funding for the Workforce Development Council programs, services to this population are in jeopardy. A modest investment of Levy funds in this arena will contribute to critical strategies that can help prevent ongoing episodes of incarceration for this target population.

Provide treatment for parents involved with the King County Family

Treatment Court for child dependency cases: The King County Family Treatment Court serves the parents of children who have been placed in the custody of the Department of Social and Health Services, in part due to the parents' alcohol/drug abuse. The vision of this court is to promote the health, safety and welfare of children in the dependency system by actively intervening to address the drug, alcohol and other ancillary service needs of families through an integrated, culturally competent, judicially managed collaboration that facilitates timely reunification or an alternative permanency plan.

Components of the Family Treatment Court program include the following: integrating parental substance abuse treatment with dependency case processes; early intervention; comprehensive services; increased judicial supervision; a holistic approach to strengthening family function; individualized case planning; ensuring legal rights, advocacy and confidentiality; regularly scheduled staffing and court reviews; graduated sanctions and incentives; measuring of program outcomes; program sustainability; a collaborative, non-adversarial cross-trained team; and judicial leadership. This program faces a one-year funding gap as new funding streams are put in place to secure its stability over time. A one-time investment of Levy funds will help prevent the loss of this critical program.



Increasing the Effectiveness of Resource Management and Evaluation

\$5.6 M

Overview Although the vast majority of Levy funds are dedicated to capital projects and direct services, a small amount of Levy funds are reserved for evaluation, systems development, and related activities that assure the ability to measure the results of the Levy and invest wisely over its six-year span.

Planning and Evaluation

Comprehensive process and outcome based evaluation of Levy activities:

The Levy evaluation, described in Section VI of this report and defined in the Levy ordinance will be critical, not only in guiding Levy investments but in determining the success of Levy-funded efforts. It will also help to inform the public about the uses of their tax dollars and the impact of these efforts on both the target populations and the larger King County community.

Cross-systems planning and start-up initiatives for youth aging out of the foster care system: The gap in housing and supportive services for youth between the ages of 18 and 21 poses numerous problems for King County and greatly increases the risk of homelessness, substance abuse, and criminal justice system involvement for these youth. The Levy proposes an investment in a process and start-up initiatives to create a framework for a system of care for these young people that maximizes existing resources and identifies gaps in funding that must be addressed to better serve this highly vulnerable population. Systems to be involved would include child welfare, juvenile justice, mental health and substance abuse treatment, education, employment, and housing.

Create a profile of offenders in King County with mental illnesses and co-occurring substance use disorders: The King County Department of Adult and Juvenile Detention (DAJD) has become a default system of care for many people with mental illnesses and co-occurring substance use disorders, including a large proportion of people who are homeless. The data currently available fails to provide a comprehensive portrait of this population, nor does it describe with any precision the nature of their treatment, housing and supportive service needs. A modest effort to gather and analyze data from the multiple systems touched by these clients will greatly assist in the planning of a coordinated, integrated, regional response to the needs of this group.

Planning, training and service design efforts to be determined and carried out over the life of the Levy: Maintaining the flexibility to answer new questions, develop or refine strategies, and provide needed training is a good use of the Levy's funding flexibility. A small annual investment represents a placeholder for addressing both unpredictable events and creative opportunities.

Information Systems

Facilitate the Homeless Management Information System (HMIS): The Safe Harbors HMIS will be a critical tool in determining the nature, patterns and extent of homelessness in King County, as well as the precise treatment, housing and supportive service needs of homeless people. Mobilization of Safe Harbors will require modifications to the application to make data entry tasks less complex for providers, as well as additional training of providers' data entry staff on the application and related policies and protocols. Technical assistance will be provided on the most efficient ways to enter timely, accurate and complete data. An investment of Levy funds, which can decrease over time, will help ensure effective implementation and management of this critical systems tool.

Enhance DCHS information systems to support administration and evaluation of the Levy: As noted in the Levy implementation ordinance, information technology system improvements are needed to support the Levy data collection and evaluation.

Consultation and training related to information sharing: Collaborative efforts among numerous systems in King County have been greatly constrained by cautious interpretations of HIPAA and other statutes pertaining to confidentiality of patient records and information sharing. The restrictions of HIPAA were never meant to prevent access to needed care, but rather to protect the privacy of individual patients. Numerous jurisdictions across the nation have taken advantage of training and technical assistance offering reasonable and lawful strategies to increase information sharing opportunities that improve service delivery to clients involved in multiple systems. A small investment of Levy funds can help promote this level of expertise among multiple systems in King County.

Enhancement of collaboration and coordination

Develop a common data set for assessment of adults, youth and families seeking a range of housing, health and human services: Efforts to promote increased cross-systems coordination and service integration are hampered by the absence of standardized tools and data elements for collection of service needs data about adults, youth and families. Levy funds invested to develop a comprehensive approach to the assessment of need for clients entering a variety of systems, including community health clinics, can improve access to needed behavioral health and other services, prevent decompensation or serious illness, expedite communication, and minimize duplication of intake efforts across multiple systems. The Levy can support the use of these tools through training and contracts.

Facilitation of ongoing partnerships: Effective collaboration and partnerships are the cornerstones of any initiative to reduce fragmentation, braid resources, and integrate services. A modest Levy investment can provide opportunities for efforts along these lines.

Financial Plan

The Levy implementation ordinance (Ordinance 15406) spells out the requirements for a financial plan, calling for

“... an allocation plan for levy proceeds for each year of the six-year levy period. The allocation plan shall separate the fifty percent of levy proceeds earmarked for regional human services for veterans and military personnel in need and their families from the remaining funds not specifically targeted to individuals and families with a military background. Within these two overall categories for the use of levy proceeds, the allocation plan shall show the projected use of levy funds for each of the priority investment areas broken down further by ongoing versus one-time investments.”

The financial plan for the Levy is complex. The allocation tables reflect the best current estimates of resources that will be available over the life of the Levy; they are not firm commitments. The county must retain the capacity to adjust and fine-tune these allocations over time, in order to meet identified goals for the designated target populations, as well as the complexities of implementation and cash flow. One of the greatest strengths of the Levy is its flexibility. As specific needs become clarified and strategies refined, the allocation plan can be expected to change.

Revenue Estimates

The adjusted Levy revenue estimates have not been finalized but it is estimated the Levy will generate more than \$85 million over the six years as show below.

**Table 6
Revenue Expected Over the Life of the Levy**

Expected Revenue (in millions)	
2006	\$13.7
2007	\$14.2
2008	\$14.2
2009	\$14.6
2010	\$14.9
2011	\$15.3

Allocation of Revenue to Investment Strategies

The financial plan (in 2006 dollars) is shown in Appendix D. It reflects the desire to assure continuity of funding for Levy investment strategies into 2012, in the event the Levy is renewed by King County voters. Levy revenues become available in spring and fall of each year. Therefore, if a second levy is approved there will be a gap in funding, which should be planned for from the onset.

The following summary table shows the aggregated investments in 2006 dollars (i.e., not inflated) over the life of the Levy, organized by the overarching strategies. For the more specific and year-by-year allocations (in 2006 dollars), see Appendix D.

Table 7
Six-Year Allocation Totals for One-Time & Ongoing Funds by Overarching Levy Strategy
(in 2006 Dollars)

Enhancing Access to Services for Veterans and their Families	
<i>Increase Access to Services</i>	
Expand geographic range of King County Veterans' Program	700,000
Increase capacity of current King County Veterans' Program services	10,907,580
Subtotal	11,607,580
<hr/>	
<i>Increase Access to Information about Services</i>	
Provide dedicated phone resource for veterans	500,000
Provide training for community providers on VA services and linkages	200,000
Subtotal	700,000
TOTAL	\$12,307,580
<hr/>	
Ending homelessness through outreach, prevention, permanent supportive housing and employment	
<i>Initiatives to identify, engage and house long-term homeless people</i>	
Identify, engage and house long-term homeless people who make highest use of expensive public safety and emergency medical systems	3,750,000
Subtotal	3,750,000
<hr/>	
<i>Increase Permanent Housing with Supportive Services</i>	
New Units	
Veterans	6,262,500
Other persons in need	7,592,500
Subtotal	13,855,000
<hr/>	
<i>Permanent Housing – Operations and Supportive Services</i>	
Landlord Risk Reduction Fund	
Veterans	500,000
Other persons in need	500,000
Investments in supportive services and operating costs	6,250,000
Enhance housing and supportive services for ex-offenders who are homeless	2,500,000
Permanent housing placement supports for single parents with children	440,000
Subtotal	10,190,000
<hr/>	
<i>Prevent Homelessness from re-occurring</i>	
Develop housing stability program	
Veterans	2,500,000
Other persons in need	2,500,000
Link educational, vocational, employment opportunities and supports to housing	4,550,000

Subtotal	9,550,000
TOTAL	\$37,345,000

Increasing Access to Behavioral Health Services

Expand behavioral health services through primary care and other providers

Enhance the integration of mental health/chemical dependency treatment services with primary care at Community Health and Public Health Clinics

Veterans	3,800,000
Other persons in need	2,500,000
Invest in training programs for trauma sensitive services and PTSD treatment	375,000

Subtotal	6,675,000
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Expand and extend availability of in-home mental health services

Train behavioral health providers to use evidence-based practices for PTSD	1,250,000
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Invest in home based services for depression in chronically ill and disabled elderly

Veterans	448,000
Other persons in need	448,000

Subtotal	2,146,000
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TOTAL	\$8,821,000
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Strengthening Families at Risk

Support maternal-child attachment and maternal health

Expand Nurse Family Partnership and add linkages to employment opportunities	2,000,000
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Pilot new services for maternal depression	2,500,000
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Subtotal	4,500,000
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Support healthy early childhood development and parenting

Establish pool of funds to invest in early childhood intervention and prevention best practices (examples include but not limited to community-based home visiting; curricula such as Promoting First Relationships & Incredible Years; and improving access to services for immigrant families.)	2,465,000
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Provide early intervention and supports for parents exiting the criminal justice system

Provide service enhancements for single parents exiting the criminal justice system, living in transitional housing	1,120,000
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Invest in education and employment programs for single parents exiting the criminal justice system	600,000
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Provide treatment for parents involved with the King County Family Treatment Court for Child Dependency Cases	200,000
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Subtotal	1,920,000
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TOTAL	\$8,885,000
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Increasing Effectiveness of Resource Management & Evaluation	
<i>Planning & Evaluation</i>	
Design and implement comprehensive evaluation of Levy process and outcomes	1,950,000
Cross systems planning and start-up initiatives for youth aging out of foster care	250,000
Create a profile of offenders in King County with mental illnesses and co-occurring substance use disorders	120,000
Planning, training and service design efforts to be determined and carried out over the life of the Levy	400,000
Subtotal	2,720,000
<i>Information Systems</i>	
Facilitate the Homeless Management Information System (Safe Harbors)	1,125,000
Enhance DCHS information systems to support administration and evaluation of the Levy	350,000
Consultation and training related to protocols and policies for Release of Information and sharing of patient information	150,000
Subtotal	1,625,000
<i>Enhance collaboration between local governments and human service organizations</i>	
Develop a common data set for assessment for adults, youth, and families seeking a range of human services	480,000
Facilitation of ongoing partnerships	750,000
Subtotal	1,230,000
TOTAL	\$5,575,000
GRAND TOTAL (in 2006 Dollars)	\$72,933,580

Section VI: Management Plan

Levy Oversight

King County's Department of Community and Human Services (DCHS) is charged with responsibility for oversight of all activities related to the Veterans and Human Service Levy. Levy Ordinance 15406 provides a clear framework for this effort. DCHS, as the lead agency, will be responsible for ensuring the best possible access to services for individuals and families countywide, based on need and including geographic and cultural considerations.

Advisory Boards

The Levy Ordinance identifies two new advisory boards to guide the allocation and expenditure of Levy funds: the *Veterans' Citizens Levy Oversight Board* and the *Regional Human Services Levy Oversight Board*. These citizen boards nominated and appointed through a process involving the King County Council and County Executive are charged with monitoring and reviewing Levy expenditures and preparing annual reports. These reports can include recommendations concerning any changes needed to ensure the best possible use of Levy funds.

It will be important for the two boards to communicate with each other on an ongoing basis, perhaps through regularly scheduled joint meetings. Many of the services funded with Levy resources will serve veterans and their families as well as other individuals in need and some collaboration between the two boards may help to improve the provision of those services for all target populations.

The roles and responsibilities of the Veterans' Citizens Levy Oversight Board and the Regional Human Services Levy Oversight Board are detailed in Appendix E of this report.

Coordination with Other Efforts

The Veterans and Human Services Levy funds represents only a fraction of the estimated \$350+ million of local, state, and federal resources for housing, health, and human services for veterans and other people in need that flow into King County each year.⁶ These funds support a range of activities targeting different populations throughout the county. Many of these activities have been designed and implemented to meet the specific and unique needs of residents that vary by geographical area, age, disability, gender, and ethnicity.

It is critical to ensure that these multiple funding streams are managed in the most efficient and effective possible ways to best meet the needs of King County residents. This goal presents a significant set of challenges. Many of the funds that flow into King County from local, state and federal funding streams arrive in separate and distinct "silos" that restrict access to specific populations and prevent the integration of different funding streams. This leads to fragmentation at the systems level and frustration at the client level.

⁶ This estimate is based on research being conducted under the auspices of the King County Regional Policy Committee, using 2004 financial data.

It is precisely because of these funding “silos” and the challenges of managing service delivery in such a large and diverse region, that the core criteria for the Service Implementation Plan were developed.

Oversight of Levy-funded programs and services must not be conducted in isolation from the larger arena of housing, health, and human services provided in King County. The Levy provides a unique opportunity to create and promote an improved regional vision that enhances our ability to move towards effective regional management of housing, health, and human service resources.

Envisioning effective regional management of housing, health, and human service programs in King County is nothing new. Numerous groups and efforts have been initiated to seek ways to improve local and regional resource management, including the following:

- King County Regional Policy Committee
- King County Framework Policies for Human Services
- Committee to End Homelessness in King County
- King County Healthy Families and Communities Task Force
- Taking Health Care Home Initiative
- Homeless Housing Funders Group
- King County Criminal Justice Initiative.

*Alignment with the
Committee to End
Homelessness*

Many Levy investments relate to the development and provision of permanent supportive housing for Levy target populations and the prevention of homelessness. The Committee to End Homelessness in King County (CEHKC) and its unique and far-reaching governance and planning structure is rapidly becoming an outstanding model for how to promote collaboration across multiple systems in pursuit of specific and measurable outcomes. Because of the size of Levy investments in supportive services and housing at a range of intervention levels, and given the time, energy and resources being dedicated to the implementation of the Ten-Year Plan to End Homelessness, it is critical to ensure that the Levy and the CEHKC are working in partnership. Investments up front on high users of health and human services will ultimately result in the ability to divert savings to other needy areas as time goes on.

According to the CEHKC, the region’s response to homelessness has been constrained by the fragmentation of the processes of allocating and managing multiple fund sources for capital, operations and services. The CEHKC reported, “It may take five or six capital funding sources to fund a project, and several services funding awards. Although some coordination has occurred, there are multiple funding cycles, application processes and redundancy in reporting requirements.

This results in a system in which the time needed to secure funding is highly uncertain, creating risks and adding predevelopment and on-going compliance costs for sponsors. It also results in a fragmentation of purpose, with adverse effects on the projects are forced to try to meet sometimes conflicting requirements of the various fund sources they need to bring together.”⁷

The CEHKC also noted the absence of prioritization of legal and policy direction for the coordination of funding across systems and programs, resulting in the funding of responses to homelessness that fail to contain the full range of housing and service components that evidence-based practices suggest are necessary for successful outcomes. Without the fully integrated array of housing and supportive services needed, programs funding only part of the solution may fail to achieve the desired goal of preventing or ending homelessness for an identified target population.⁸

To begin the essential task of addressing this problem, the CEHKC Governing Board approved two resolutions in July 2006 – one related to the “administrative coordination of funding” and the other on “funding complete responses.” These resolutions call for:

1. The coordination of funding cycles, applications, funding awards and reporting requirements, including coordination of funding within organizations and among funders, such that complete responses are funded in coordinated packages.
2. The participation in this coordination by all funders in the system, including those at the state and federal levels, and the modification of requirements or funding cycles as necessary.
3. Ensuring that, before funding decisions are made, entities seeking resources that provide only part of the needed response obtain clear and firm commitments from entities or funders providing the other needed elements, such that the possibility of a complete response is demonstrated.
4. Re-examination and revision of program assumptions and configuration in situations in which it appears that all essential program elements are not present and cannot be assured, such that programs are able to address missing elements.

The issues of fragmented and incomplete funding addressed by the CEHKC Governing Board are not restricted to funding homelessness. In fact, “silo” funding is present in virtually every area of housing, health and human services systems. The Service Improvement Plan endorses the spirit of the CEHKC resolutions and encourages the application of those principles related to the administrative coordination of funding and the funding of “complete” responses to all of the target populations and issues identified as Levy priorities.

⁷ CEHKC, “*Briefing Paper on Coordination of Administrative Funding*,” July 2006

⁸ CEHKC, “*Briefing Paper on Complete Response Funding*,” July 2006

*Alignment with
Other Plans*

In addition to the CEHKC, the investment allocations within the Service Improvement Plan seek to align with a number of other important regional and group initiatives, including the following:

- Healthy Families and Communities (HFC) Task Force - The allocation of Levy funds is consistent with the *Resolution for the Funding of Human Services in King County* passed by the HFC on April 27, 2006. Levy investments have been made in many of the HFC-identified strategic areas, including 1) special needs housing, homeless services, homelessness prevention, and housing stabilization; 2) case management services linked to housing programs to address mental health, addictions, joblessness, domestic violence and other issues that lead to homelessness; 3) early intervention programs for at-risk infants and children; and 4) providing regional financing of some services through the community health centers.
- Recommendations related to employment activities are consistent with the comprehensive review of evidence-based practices and employment opportunities for people who are homeless that were identified in the Taking Health Care Home employment initiative (July 2006) and recent work on reentry completed by King County DCHS.
- Significant investment of Levy capital and supportive housing resources have been invested in the joint Request for Proposals model that has been mobilized by the King County Homelessness Housing Funders Group.

*Promoting
Ongoing Alignment*

As investments continue to be revised and refined over the six-year life of the Levy, it will be critical to promote as much alignment across systems and funding streams as possible. The ongoing task of coordinating Levy funds may be used to forward discussions about a more integrated approach to human service resource management activities in King County.

Components of an increasingly integrated approach to regional resource management could include:

- Consolidation or “braiding” of funding from multiple systems and funding streams
- Single application processes for multiple sources of funding
- Streamlined fiscal reporting requirements and oversight procedures
- Integrated data reporting systems
- Simplified outcome-based program evaluation activities rooted in simple and straightforward outcome measures agreed upon across multiple systems

- Coordinated array of “one-stop shops” that reach across multiple systems and offer screening, assessment and intake procedures for clients regardless of their presenting complaint
- Increased co-location of services for clients with multiple problems or needs.

In developing this model, King County remains mindful of critical issues that have been identified in past planning efforts, including:

1. Changes in the structures and mechanisms for managing human services resources must be made in ways that demonstrate clearly the rationale and value of the change.
2. Existing governmental entities in King County must be assured that participation in a regional approach to human services management will be accompanied by a mechanism to ensure equity in terms of financial contributions and investments.
3. Data systems are costly and complicated.
4. Consensus must be developed related to many topics, including a) mission statement for regional human service resource management; b) what the structure would look like and where it would be housed; and c) how systems efficiency will be achieved (e.g., training, funding coordination, etc.).

Contracting

Levy resources are placed within the budget of the King County Department of Community and Human Services (DCHS). Program and fiscal staff working in the DCHS will manage oversight of the Levy budget, and negotiation and management of Levy-funded contracts and services. The housing, health and human service activities described in this Plan and funded by Levy dollars will be provided through several different mechanisms, including:

- Enhancements to existing contracts with provider agencies already doing business with King County
- Contracts with community-based organizations for new services, subsequent to a competitive Request for Proposal process
- Ongoing contract monitoring and management activities
- Memoranda of Understanding (MOU) and working agreements with other departments
- Additions to existing DCHS programs, such as the King County Veterans’ Program
- Partnerships with other public and private funders.

As noted elsewhere in this report, the county must retain the capacity to adjust allocations over time, in order to meet the identified Levy goals for the designated target populations and respond to changing needs, issues and demographics.

Evaluation of Levy Outcomes

The effective evaluation of Levy-supported programs and services will be a critical part of operations. Not only will an evaluation help to determine the effectiveness of the work undertaken with Levy resources, but will also provide the information the public needs to determine if future levies of this type merit their support. Two different types of evaluation activities are anticipated on an ongoing basis: A *process evaluation* and an *outcomes evaluation*.

Process Evaluation

The *process evaluation* would examine the ways in which the work of implementing the Levy is undertaken and managed, including:

- Initial startup activities
- Development and management of contracts for services
- Strategies to leverage and blend multiple funding streams
- Implementation of working agreements
- Service-level changes that occur as the result of efforts that promote co-location and integration of housing, health and supportive services
- Systems-level changes that occur as a result of the use of Levy funds or the management of Levy and related resources
- Activities of the Veterans' Citizens Levy Oversight Board and the Regional Human Services Levy Oversight Board
- Public education efforts to inform the community about the Levy's progress and its benefits to target populations and the county as a whole.

The goal of a process evaluation is not only to capture what actually happens as the Levy is implemented, but also to identify the "unintended consequences" of Levy activities – things that happened that were either not anticipated or were unusual in ways that helped or hindered Levy-related work.

The process evaluation is an excellent tool for the creation of a continuing feedback loop as implementation progresses. Areas for new efforts or enhancements can be identified, in order to make any needed "mid-course" adjustments or corrections. Evaluation activities of this type allow increased opportunities to learn about and practice service and system integration strategies, while receiving ongoing information about the impact of interventions on a real-time basis.

Outcomes Evaluation

The *outcomes evaluation* would examine the specific impacts of Levy funding on clients and service systems that can be measured through the collection and evaluation of client and service-level data. Such outcomes might include:

- Decreases in homelessness, both among long-term homeless populations and veterans

- Increases in housing stability and tenure among formerly homeless populations, including veterans
- Decreases in use of emergency medical services by target populations
- Decreases in rates of arrest and incarceration among target populations
- Increases in access to mental health and substance abuse services
- Increases in use of existing facilities providing a range of social and health services by target populations, including veterans
- Improvements in family health among young families with infants who receive Levy-funded services
- Improved job readiness and increases in employment rates
- Increases in levels of satisfaction with existing service systems among target populations, including veterans.

These outcomes will reflect the capacity to measure the results of investments made with Levy resources. This type of measurement and evaluation will help to determine:

1. Impacts of Levy funds on the lives of service recipients
2. Impacts of Levy funds on systems providing services
3. Effectiveness of the service investments made with Levy funds.

*Evaluation
Start Up*

It will be essential to mobilize both the process and outcomes evaluations before Levy funds actually begin to flow into the service systems they are supporting. This will ensure the collection of baseline measures for the key indicators that will determine the success of Levy activities. Evaluation data should be used not only to evaluate the effectiveness of the Levy overall, but to identify the efficiency and value of specific activities funded with Levy resources.

Developing the plan for the outcome evaluation requires that intended outcomes be defined for each Levy investment that are logically and causally linked to the activities being funded. These outcomes must then be translated into clear, specific, measurable indicators that will become the foundation of a data collection and evaluation plan.

Evaluation data must be used to inform ongoing decisions about the investment of Levy resources. Funds should only be invested in those activities and programs that are culturally competent, demonstrate the desired outcomes over reasonable periods of time, and remain cost effective. Programs that fail to meet their outcomes should be reviewed for adjustment or termination. Continued investment should not be made in programs that do not achieve their established goals.

Public Relations and Education

The Levy has a six-year lifespan. Because Levy funds are coming directly from taxes paid by King County property owners, the residents of the county will want to know that the funds will be invested thoughtfully, efficiently and effectively.

During the life of the Levy, it will be essential to provide regular information and updates to the public about how Levy funds are being spent and the results of those investments. Outcome-related information must be rooted in data collected through the Levy evaluation process. In addition, stories about how Levy funds have made a difference in the lives of individuals and families must be communicated through effective use of the print and electronic media.

Communication with the public about Levy activities will serve several critical functions:

1. Educate the community about the needs of King County's veterans and other people in need.
2. Cultivate community support for the projects supported by the Levy and similar initiatives, such as the Ten-Year Plan to End Homelessness in King County.
3. Demonstrate clearly and efficiently how Levy funds are collected, managed and allocated.
4. Provide information about the results the Levy has accomplished, in order to assist the voters in making a decision in 2011 about whether or not to commit future property tax revenues to a renewal of the Levy.

The overall communications plan for the Levy will be developed and managed by DCHS. Other county resources sharing responsibility for the work of communicating about the Levy and its impact on the quality of life in King County include:

- Veterans' Citizen Oversight Board and Regional Human Services Oversight Board
- Office of the King County Executive
- Metropolitan King County Council members and staff
- King County Regional Policy Committee
- King County Department of Community and Human Services
- Other King County Departments.

Ultimately, it will be the improvements to the quality of life in King County that can be directly linked to the investment of Levy resources, and the effectiveness with which this information is communicated to the public, that will determine the outcome of any future ballot measure to the voters requesting continuing financial support for regional housing, health and human services.