

Veterans & Human Services Levy



The Veterans and Human Services Levy was approved by King County voters in November 2005. It provides over \$13 million each year through 2011 to help people in need.

Half of the revenue from the Levy is dedicated to veterans, military personnel, and their families (Veterans Levy Fund) and the other half is for other individuals and families in need (Human Services Levy Fund).

The Levy's goals are to:

- ▶ Reduce homelessness
- ▶ Reduce emergency medical and criminal justice involvement
- ▶ Increase self-sufficiency for veterans, their families, and other individuals and families in need

These goals are achieved through five overarching strategies:

1. Enhancing services and access for veterans, military personnel, and their families
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 the effectiveness of resource management and evaluation

This report summarizes Levy progress and accomplishments during 2010.

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Dear Friend:

Homecomings for local veterans returning from deployment are always exciting events. But these celebrations are just the first step in what can often be a long and difficult adjustment. Many veterans return home with injuries or Post Traumatic Stress Disorder (PTSD), and many need help reconnecting with family, finding work, and adjusting to life after their service. In these difficult economic times, many of our neighbors are also struggling and need help to regain their footing. Some may need short-term rental assistance to avoid becoming homeless, or employment assistance to become financially secure again.

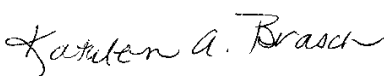
The Veterans and Human Services Levy, approved by King County voters in 2005, provides the resources to help veterans and others in need with housing, job training, health care, and counseling to assist them in getting their lives back on track. During 2010, the Levy provided funding to assist more than 30,000 people in our community, helping us:

- **Serve Our Veterans.** We have expanded the King County Veterans Program (KCVP) to 10 service locations and 22 outreach sites and reached out to underserved veterans with a hotline, case management, and targeted support. We have increased the range of services we provide, offering counseling, emergency financial aid, housing referrals, job training, legal support, and assistance with federal benefits.
- **End Homelessness.** During 2010, seven affordable housing projects were completed, adding 234 new apartments. Two of them, Valley Cities Landing Project and Renton Lutheran Regional Housing Program, created a total of 56 new apartments for veterans. By the end of 2010, a total of 25 affordable housing projects had received Levy funding support.
- **Improve Behavioral Health.** The Levy has helped us integrate mental health and chemical dependency services into the primary health care system. Behavioral health staff are now in 26 community clinics, with doctors and providers trained to identify the signs and symptoms of PTSD to help them serve returning veterans and others in need.
- **Strengthen Families.** The Levy-funded Nurse Family Partnership and Healthy Start programs helped nearly 500 young, low-income parents last year learn to care for their children, set goals for themselves, and pursue higher education and employment. This kind of support, in the early months and years after a child is born, can prevent child abuse and neglect, reduce potential criminal justice system involvement, and set the foundation for good health and academic success.

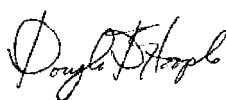
As members of the Levy's Oversight Boards we have worked to ensure that Levy funds are managed prudently and effectively. During 2010, we reviewed performance evaluations of each Levy-funded activity, and we reached out to local governments and community organizations to share news of the Levy's achievements and learn how the Levy could help them. In this report, we continue our outreach by sharing information about the Levy's activities, performance, and financial commitments during 2010.

For a cost of about \$15 a year for the average King County household, the Veterans and Human Services Levy has served more than 80,000 veterans, families, and individuals in need since it began. We are proud of our success and prouder still that we live in a community that has banded together in tough times to help those in need.

Sincerely,



Kathleen A. Brasch, Co-Chair
Regional Human Services Levy
Oversight Board



Douglas Hoople, Chair
Veterans Levy
Oversight Board



Loran Lichy, Co-Chair
Regional Human Services Levy
Oversight Board

Enhancing Services and Access for Veterans, Military Personnel, and their Families

Ken: Housing means stability

KEN, A LONG-TIME NAVY VETERAN, never thought he'd be homeless – or that he'd ever have to ask anyone for help. But after he lost his job a few years ago, Ken quickly ran out of options. At 52, he had trouble getting potential employers to consider him, and he ultimately spent through his savings and then lost his home while trying to find work.

After that, Ken stayed at a number of different homeless shelters while he continued to look for work. The crowded conditions and daily uncertainty took a toll on his health, and he found it difficult to look presentable for interviews while moving from shelter to shelter each day.

Then Ken found help from the Levy. He visited the KCVP one day, hoping the staff there could help him find a shelter space. The KCVP staff found Ken a spot at the Salvation Army's William Booth Center's Transitional Housing Program, where he could stay in his own private room for up to six months. Next, the William Booth Center staff engaged Ken in case management to help him assess his strengths and approach his job search more thoughtfully.

With this support and the stability of a place to call home, Ken found a job. Once he felt secure in the new job, the staff helped him find an apartment of his own. Today, Ken is back on his feet. He has a job and a home, and is confident about his future.

Names have been changed to protect client confidentiality.



Enhancing services and access for veterans, military personnel, and their families. King County is home to at least 131,000 men and women who are current or former active duty members of the U.S. Military, Reserves, and National Guard, and an additional 13,000 National Guard and Reservists who have not yet been activated. Half of all Veterans and Human Services Levy funds are dedicated to their needs and those of their families. This first Levy strategy includes four activity areas, which helped us serve more than 4,600 veterans, military personnel, and family members during 2010. By meeting their needs, we honor their service and welcome them home.

ACTIVITY 1.1: Expand the geographic range of the King County Veterans Program: This activity has provided funding to allow the KCVP to reach out to previously underserved veterans and their families.

- **Satellite Sites.** Levy funds enabled the KCVP to open a Renton office, as well as satellite offices in Federal Way, Lake City, Carnation, Enumclaw, Auburn, Maple Valley, Redmond, and Kirkland. In addition, the KCVP conducts regular outreach at twenty-two locations. The KCVP served 2,661 veterans in 2010 and provided comprehensive case management services to 434 of them, including case planning, linkage to PTSD and alcohol/drug counseling, and shelter and housing referral and assistance. The KCVP has also collaborated with work training centers and community colleges to provide employment assistance.
- **Military Kids Curriculum.** The Levy funded the development of a curriculum to help schools support children as they cope with the stresses of life while a parent is deployed. During 2010, the curriculum was piloted in Renton and then implemented in the Kent, Auburn, and Federal Way school districts.

- **Outreach to minority and women veterans.** Women and veterans of color are much less likely to seek assistance or to pursue the benefits they have earned. Levy funding allowed us to serve 76 previously unserved women and minority veterans, helping 50 of them apply for benefits.
- **National Guard Family Assistance Coordinator.** National Guard members have borne an increased burden over the last decade. Many have served multiple deployments to assist in conflicts overseas. Yet they have limited access to services through the U.S. Department of Veterans Affairs (VA) once they return from duty. The flexible nature of Levy funding has enabled us to serve National Guard members and their families, assisting 198 people during 2010 with counseling, job and housing referral, benefits assistance, and case management.

ACTIVITY 1.2: Increase the capacity of services for veterans. As KCVP has broadened its outreach to veterans and their families, it has added an array of services to better meet its clients' needs.

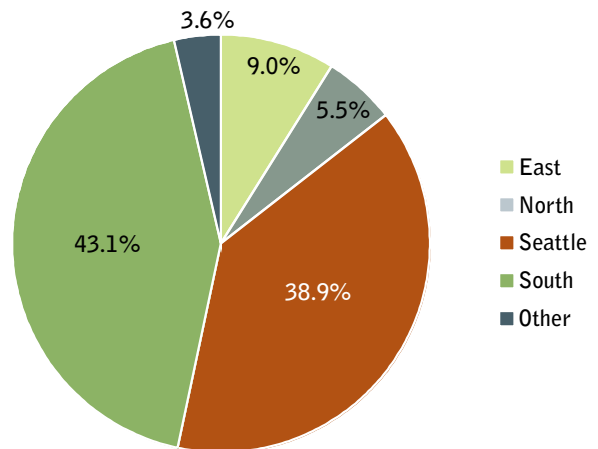
- **Financial assistance.** The KCVP used Levy funding to double its emergency financial stability program, which provides small grants to veterans and family members, helping them to become self-sufficient. Two-thirds of the assistance provided was for housing, followed by utility bills and food.
- **Shelter services and housing planning.** The KCVP has contracted with the Salvation Army's William Booth Center and the Compass Housing Alliance to reserve 63 shelter beds that provide up to six months of transitional housing for homeless veterans. During 2010, the Levy funded 15,184 emergency and 2,298 transitional bed nights. A report on veterans' housing, which includes an inventory of all available veterans' housing sites in King County, was completed during 2010.
- **Counseling and treatment for veterans and families.** Many veterans experienced significant trauma during their service and struggle with PTSD. Family members may also become traumatized as they attempt to help. The Washington State Department of Veterans Affairs (WDVA) has used Levy funds to increase their state-of-the-art PTSD outreach and counseling services. During 2010, the WDVA used Levy funds to provide PTSD counseling to 200 clients. Of those served by the WDVA (with both Levy and State funding), 97 percent reported a reduction in symptoms.

- **Veterans Incarcerated Project.** Through a contract with King County, the WDVA has used Levy funds to increase service to veterans who have been incarcerated by expanding this program to regional city jails. The WDVA served 128 incarcerated veterans with counseling and housing assistance during 2010, providing support for a successful transition from jail to life in the community.
- **Homeless Veterans Reintegration Project.** The reintegration project provides outreach services to homeless veterans. During 2010, the project served 128 veterans, providing housing assistance to place them in transitional or permanent housing and offering employment assessments to help them find jobs.
- **Veterans Conservation Corps.** The Veterans Conservation Corps coordinates with community colleges and job training programs to provide job training and placement assistance in green industries. During 2010, Levy funding helped the program serve 120 people. Of those clients, 86 percent secured employment and retained the job for at least one year.
- **Legal assistance for veterans.** The Northwest Justice Project provides legal help to veterans, particularly those who are homeless or at risk of homelessness. Legal services include help with child support, driver's license suspensions, landlord/tenant problems, debt collection, and military discharge and benefits disputes. The program began operations in September 2010 and opened 74 cases between September and December. Of those, 22 were resolved by year's end.

ACTIVITY 1.3: Provide phone resources for veterans. The WDVA was awarded Levy funds to develop a phone system to help veterans, active military, and family members learn about available benefits and services. The phone system fielded calls from 231 clients during its first four months of operation, resolving 90 percent of questions. Callers receive follow-up to ensure they have connected with services.

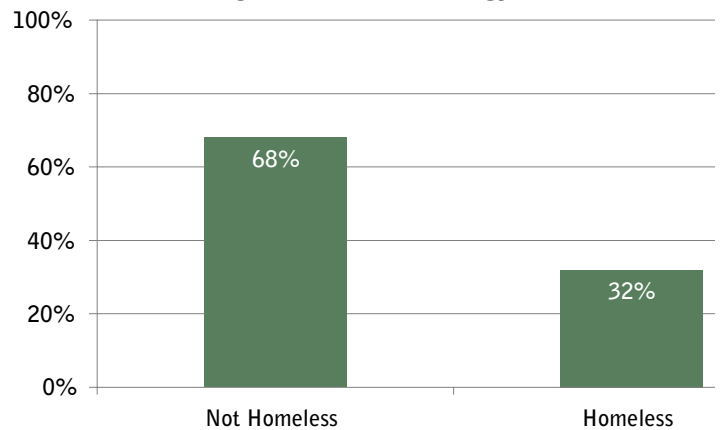
ACTIVITY 1.4: Training to community providers on VA services and linkages. During 2010, the KCVP and the King County Mental Health, Chemical Abuse and Dependency Services Division (MHCADSD) began planning to coordinate training to provide assistance to veterans who are involved in the criminal justice system.

Location of People Served by Strategy 1



Veterans and their family members who have been served by the funded activities in this first Levy strategy live throughout King County. During 2010, a full 61 percent of those served were from outside Seattle.

Living Situation of Strategy 1 Clients



Levy funds have helped us serve veterans who are homeless or at risk of becoming homeless. Nearly one-third of those served during 2010 were homeless, making it crucial to link clients with transitional housing, services, and training.

Ending homelessness through outreach, prevention, permanent supportive housing, and employment

Aaliyah: Building Success

LIKE MANY OTHERS AROUND THE REGION, Aaliyah was hit hard by the economy. A 33-year-old commercial/residential apprentice construction worker with two daughters, Aaliyah had been laid off in 2008. Without work, Aaliyah had trouble paying her bills and was soon evicted from her apartment. She and her daughters moved into her pickup truck, driving from place to place each day and accumulating more than \$3,000 in unpaid parking tickets. Because Aaliyah had no way to pay the parking tickets, she lost her license and, with it, her ability to drive to construction sites for work.

Aaliyah and her daughters sought refuge in a homeless shelter when she found help thanks to the Levy. Solid Ground's Rapid Rehousing Program helped her find an apartment in West Seattle and temporarily subsidized her rent, while the Career Connections Program stepped in to help her regain her economic self-sufficiency. With help from Career Connections,

Aaliyah returned to school to complete the training needed to achieve her journey level. For the six months of her program, while wearing coveralls and carrying a tool belt and hard hat, she traveled by bus from West Seattle to Renton, transferring buses three times each way. In the meantime, Career Connections helped her pay her parking fines, recover her driver's license, and repair her truck.

After completing her journey level training, Aaliyah was able to find work at a construction job that pays \$27 an hour. She's now able to pay her rent on her own and cover all of her family's living expenses. In addition, despite working 40 hours a week plus overtime, she's continuing her education through an online degree program in construction management. These days, Aaliyah is optimistic: she's employed and learning new skills every day, and her daughters are happy and thriving.



Ending homelessness through outreach, prevention, permanent supportive housing, and employment. The Levy’s second strategy supports the Ten-Year Plan to End Homelessness by funding the development of new housing, as well as supportive services that have been proven to help those who have been homeless succeed in their new housing and lower their use of expensive substance abuse and criminal justice programs. Levy funds have helped public and philanthropic funding partners work together effectively by streamlining the housing funding process and developing systems to identify and prioritize those who are the most vulnerable or are the highest users of costly public systems. The activities funded as part of the Levy’s Strategy 2 helped us serve more than 8,600 people in need during 2010. More than 60 percent of those served were homeless, some for an extended period of time. The rest of those served were at risk of becoming homeless.

ACTIVITY 2.1: Identify, engage, and house those who have experienced long-term homelessness. Levy funds have been used to reach out to the most vulnerable of those who are homeless.

► **High Utilizer Integrated Database.** The integrated database is a centralized collection of information on homeless individuals who are frequent users of high-cost emergency services, such as hospital emergency rooms, jail, or the Dutch Shisler Sobering Support Center. During 2010, the database identified 831 potential tenants for seven new housing projects that offered comprehensive supportive services; 222 of the most vulnerable people on the list were selected to move into the new apartments.

- **Outreach to high utilizers in downtown Seattle.** The REACH Program provides intensive case management to the most frequent users of the sobering center to help them stabilize their lives, reduce their use of this expensive service and start on the path to recovery. During 2010, the REACH Program served 487 homeless clients helping 262 improve their housing situation and 148 move to permanent housing.
- **Outreach in South King County (PATH).** Through the Levy-funded Program for Assistance in Transition from Homelessness (PATH), Sound Mental Health staff reach out to vulnerable, chronically homeless individuals who have mental or physical disabilities, connecting them to the services they need. The PATH Program served 194 clients in 2010.
- **Mobile Medical Unit.** The Mobile Medical van holds regular clinics in Renton, Tukwila, Federal Way, Kent, and Auburn with a team of medical, dental, and psychiatric providers, as well as outreach workers who engage with homeless people attending the meal programs that host the clinics. This includes a new meal program operated by Renton’s faith-based community. During 2010, the unit provided 1,249 total client visits: 519 doctor visits, 168 dental visits, and 562 psychiatric social worker visits. More than 25 percent of clients received assistance from the program’s medical benefits case manager, and nearly 40 percent of those clients successfully applied for Medicaid, Alcohol and Drug Addiction Treatment and Support Act (ADATSA), or other medical benefits.

ACTIVITY 2.2: Increase permanent housing with supportive services. The Levy provides capital funding to help increase the availability of affordable housing. Apartments funded by the Levy must remain affordable for 50 years. Most apartments are linked to Levy-funded supportive services to help residents secure the medical, mental health, substance abuse, job training, and other services they need to become stable and self-sufficient.

► **Housing capital projects.** Seven housing projects with Levy support opened during 2010, adding 234 new apartments. Of these new projects, Valley Cities Landing Project and Renton Lutheran Regional Housing Program created a combined 56 new apartments that have been reserved for veterans. By the end of 2010, the Levy had helped its partner agencies fund a total of 25 affordable housing projects representing more than 1,200 new units, including 177 reserved for veterans.

ACTIVITY 2.3: Support risk reduction for landlords.

Another approach to increase the availability of affordable housing is to encourage landlords to rent to low-income households. Landlords are often hesitant to rent to people who have been homeless and may have a poor credit record or no credit at all. Levy funds have been used to develop a Landlord Risk Reduction Fund (RRF).

- **Landlord Risk Reduction Fund.** The Landlord RRF encourages landlords to rent to clients with poor credit and rental histories, by ensuring that landlords can be reimbursed if there is excessive damage to their apartments. By the end of 2010, a total of 105 landlords and property management companies had signed on to make housing available to these clients. By intervening to solve problems early before they get out of hand, we have been able to avoid significant use of this fund.

ACTIVITY 2.4: Invest in supportive services for housing.

People who have been chronically homeless often have mental or physical disabilities or other challenges that limit their ability to live independently. The Levy has linked a range of supportive services with housing, from health and mental health care to assistance with the tasks of daily living, a proven approach to help people succeed once they find permanent housing.

- **Housing Health Outreach Team.** The Housing Health Outreach Team (HHOT) includes medical, mental health, and chemical dependency providers who help clients establish a regular health care routine, rather than relying on costly emergency care. In 2010, HHOT linked 295 clients to primary health care services, provided treatment to 330 clients with mental health or chemical dependency conditions, and helped 638 learn to self-manage a chronic condition. Of those served, 97 percent were able to remain stable in their housing for six months or more.
- **Supportive services for permanent housing.** Other supportive services help formerly homeless clients stabilize their lives after they move into permanent housing. These services include life skills, including money management and credit repair; employment counseling and job search assistance; education and training; domestic violence and sexual assault support; mental health and substance abuse counseling; legal assistance; children's services; and interpreter services. During 2010, the coalition of community-based providers funded by the Levy served 505 clients, helping 92 percent remain stable in their housing for at least one year.

ACTIVITY 2.5: Provide housing and support for those in the King County Criminal Justice Initiative. Those who have been involved in the criminal justice system and experience mental health or substance abuse issues, or both, typically face very significant challenges to living safely and independently.

- **Forensic Assertive Community Treatment.** The Forensic Assertive Community Treatment Program (FACT) provides intensive support over a five-year period for individuals who have been homeless and have severe and persistent mental illness. During 2010, the FACT Program served 51 individuals. Of 49 clients enrolled in the program for at least six months, the FACT staff helped 88 percent move into permanent housing.
- **Forensic Intensive Supportive Housing.** The Forensic Intensive Supportive Housing Program (FISH) provides permanent, supportive housing and services over a five-year period for individuals who have been homeless and have mental illness and/or substance abuse issues. During 2010, the FISH Program served 63 clients and helped 57 secure housing.

ACTIVITY 2.6: Provide housing and support for parents exiting the criminal justice system. Parents who have been released from prison or jail have a particularly difficult time. In addition to needing housing and a job, many have also lost custody of their children and face a challenge reestablishing a connection. The Levy has helped community providers offer a range of support to young parents who have been involved in the criminal justice system, helping them find housing, make positive choices, and reunite with their children. During 2010, community agencies worked with 57 families, helping just over half the parents make changes substantial enough that they were permitted to reunite with their children.

ACTIVITY 2.7: Promote housing stability. People who are living paycheck to paycheck are at immediate risk of homelessness if they lose a job or face an unexpected emergency. But if they become homeless, it can be difficult and expensive to help them become stable in new housing.

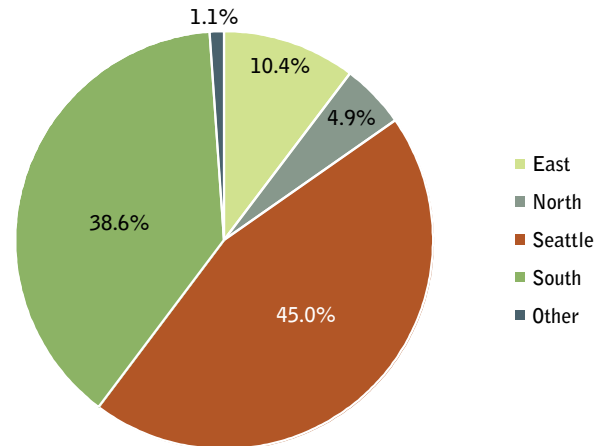
► **Housing Stability Program.** The Levy’s Housing Stability Program (HSP) works to prevent homelessness by providing emergency financial assistance for families facing short-term crises. The HSP is operated by a network of 14 community-based providers who screen applicants, provide emergency aid, and refer those with longer-term challenges to the resources and support they need. During 2010, the HSP provided emergency aid to 1,655 households; 93 percent of those helped were still living in their housing a full year later. The HSP provides an expedited process for veterans.

Activity 2.8: Link education and employment to supportive housing. People who have been homeless often have significant challenges that prevent them from finding and keeping a job. They may be fleeing domestic violence, coping with physical or mental disabilities, or struggling with addiction. Many have limited education and little experience in the job market. Two activities help prevent homelessness by expanding employment opportunities.

► **Community support.** A group of nine community organizations provided employment support during 2010 using employment-focused case management services. They served 953 people during 2010, 61 percent of whom were able to retain a job and increase their income.

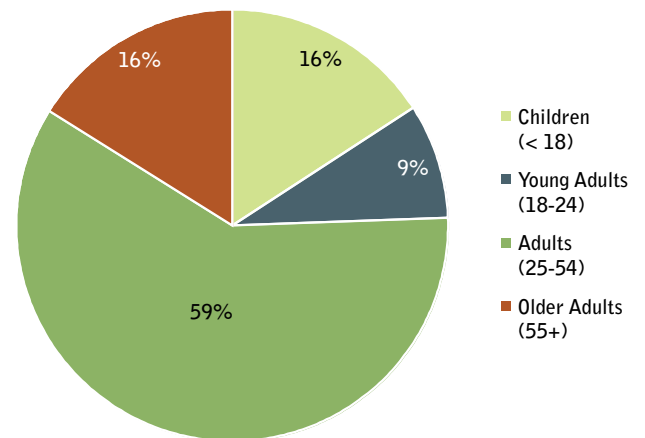
► **Career Connections.** The Career Connections Program provides employment and training to individuals and families who have received housing assistance through the Rapid Rehousing Program. During 2010, the Career Connections Program assisted 122 people, 67 percent of whom were able to retain a job and increase their income.

Location of People Served by Strategy 2



People served by the programs in this strategy live throughout King County. More than three-quarters of those served live in Seattle and South King County.

Age of People Served by Strategy 2



These programs served those who were homeless or at risk of homelessness, a group that included many children (more than 15 percent of the total) and young adults (nearly 10 percent of the total).

Increasing access to behavioral health services

Nathan: Treatment for depression and substance abuse

NATHAN WAS PROUD OF HIS MILITARY SERVICE. He had enlisted right after high school, and he credited the Army with giving him discipline and direction. But his service during the Vietnam War had also left some less positive marks. He had struggled with depression for many years, and had become addicted to drugs and alcohol while attempting to “self-medicate” his low feelings.

At age 57, however, Nathan sought help from the Seattle Indian Health Board. Nathan screened positive for substance

abuse and depression, and was encouraged to begin treatment. Since then, Nathan’s Levy-funded care coordinator has taken the lead in helping him succeed. The care coordinator monitors his well-being closely, coordinates schedules and treatments with his primary care physician, calls Nathan to remind him to attend AA meetings, and steps in with suggestions and interventions when Nathan needs more support. Thanks to the help he’s received, Nathan has now been clean and sober for six months and is actively employed in a part-time job.



Increasing access to behavioral health services. The Levy's third strategy funds mental health and chemical dependency treatment, with a special focus on the needs of veterans with PTSD. Levy funds have been invested in a client-centered model that integrates behavioral healthcare with primary healthcare. This approach treats the whole person and ensures better outcomes.

ACTIVITY 3.1: Integrate mental health and chemical dependency treatment into primary care clinics.

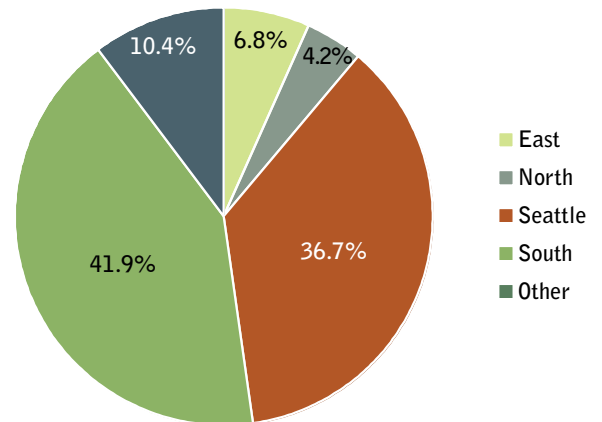
- **Mental Health Integration Program.** Twenty-six community health clinics have incorporated mental health treatment services into primary care. This approach helps identify problems early and provides treatment in a cost-effective way. During 2010, 5,241 uninsured patients who might otherwise have gone without care were screened for mental health and substance abuse concerns. Of those screened, 61 percent received psychiatric consultation, and almost half showed clinical improvement.
- **Veteran outreach services.** Some programs provide targeted services to help veterans receive discharge forms, enroll in VA health care, start disability claims, and access needed care, including specialty war trauma treatment. During 2010, these programs served 928 veterans and families.

ACTIVITY 3.2: Provide training programs in trauma sensitive services and PTSD treatment. Levy funds provide trauma-sensitive training for agencies such as jails, courts, schools, social services, health clinics, and housing programs to increase their understanding of PTSD and help them support their clients. In 2010, the Levy funded 38 training events for general community audiences.

ACTIVITY 3.3: Train behavioral health providers in PTSD. The WDVA provided PTSD training to 1,450 treatment and support providers, including educators, law enforcement, service members, first responders, and mental health and chemical dependency providers. During 2010, the Levy funded 53 training events, including a two-day Military Trauma Conference that trained professionals in PTSD treatment best practices.

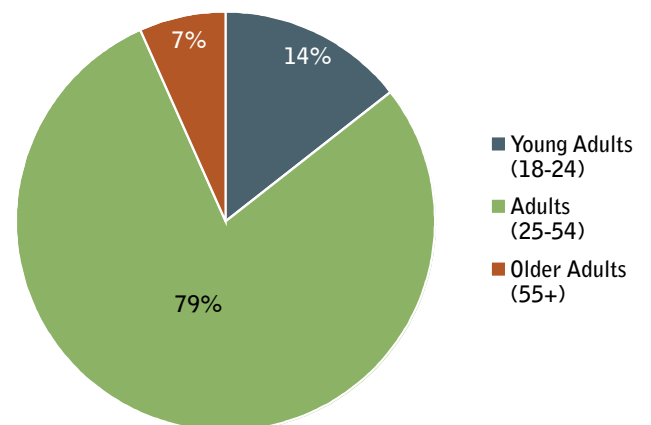
ACTIVITY 3.4: Provide in-home services to treat depression in elderly veterans and others. The Program to Enhance Active, Rewarding Lives for Seniors (PEARLS) helps vulnerable older adults stay in their homes by treating underlying minor depression with in-home treatments including problem solving, psychiatric oversight, supervision, and medication management. During 2010, 96 percent of PEARL's 88 clients reported reduced depression. The University of Washington has designated PEARLS a "best practice program" that may become a model for serving older veterans and communities of color.

Location of People Served by Strategy 3



The majority of those served lived in Seattle or South King County.

Age of People Served by Strategy 3



Strategy 3 activities primarily served adults, with older adults served by the PEARLS program.

Strengthening families at risk

Wan-Zhu and the twins: Playing to Learn

WHEN THEIR TWINS WERE BORN SIX YEARS AGO, Wan-Zhu and her husband were delighted. But when their second set of twins arrived three years later, they started to feel a little overwhelmed.

Wan-Zhu had moved to Seattle from China in 2000. She and her husband were working hard to give their two sets of twins a great start on life. But between the challenges of raising four young children and her own continuing efforts to learn English, Wan-Zhu felt she needed more help.

That's why she was delighted to learn about the Levy-funded Play and Learn group offered weekly at the Beacon Hill Library and staffed by the Chinese Information and Service Center. At Play and Learn, her three-year-old twins, Anna and Rose, play happily with the other children and participate eagerly in the games and story time.

Play and Learn groups, which are held at libraries and community centers around King County, help parents learn to take a more active role in their child's learning through structured play activities. Parents and caregivers gain an increased understanding of how children learn through play, and learn how to help their children prepare for school. The program helps caregivers improve their interactions with their children and decreases isolation, especially for those for whom language is a barrier.

For Wan-Zhu, the Play and Learn time has helped her improve her English by talking with other parents, and gives her ideas for activities she can use to help Anna and Rose learn about colors, shapes, and numbers, write letters, draw, and interact with other children. Wan-Zhu has learned a lot already from Play and Learn, and she has a lot of ideas about how to help her two sets of twins learn and grow.



Strengthening families at risk. The Levy's Strategy 4 activities provide early intervention and prevention to help young families weather difficult situations and improve their long-term outcomes. These services provided early in life can dramatically improve parent-child interactions, improve child development, increase school readiness, and reduce the likelihood of child abuse and neglect or involvement in the criminal justice system. Levy-funded activities focus on young, first-time mothers, single parents exiting the criminal justice system, and recent immigrants who face linguistic and cultural barriers to community life.

ACTIVITY 4.1: Support new mothers through the Nurse Family Partnership. Young, low-income mothers face many challenges. Besides learning to parent, they may be struggling with housing, job, or educational issues. The Nurse Family Partnership (NFP), a program proven to be highly effective, provides coordinated support to help these families succeed.

► **Nurse Family Partnership.** The NFP is an intensive home visiting program for young, at-risk mothers and their infants. It is operated by Public Health-Seattle and King County (PHSKC) and provides regular home visits from pregnancy through toddlerhood. During these visits, new mothers receive help with parenting basics, as well as support with life skills, such as arranging to complete high school or find a job. During 2010, the NFP served 133 young mothers, helping 89 percent of them deliver healthy babies. Through its services to first-time mothers, the NFP provides potential long-term benefits of up to \$2.4 million in reduced child welfare and criminal justice involvement costs.

► **NFP Employment Linkages.** The employment linkages program provides education, employment, and training services for NFP clients, with the goals of helping young parents to become self-sufficient and decreasing their dependence on public support, such as Temporary Assistance to Needy Families. Services include information and referral; career exploration and counseling; job readiness training, including resume development and interviewing practice; job search and placement help; assistance completing a GED or enrolling in post-secondary education or advanced training, including financial aid; and practical assistance, including bus fare or emergency financial support. During 2010, 153 parents participated in the program, and 75 percent were able to improve their employment status.

ACTIVITY 4.2: Pilot new services for maternal depression. New mothers frequently suffer from depression, which can affect their parenting and slow their children's development. The Maternal and Child Behavioral Health Program helps at-risk mothers by screening for and treating depression at ten primary care health clinics to improve family outcomes. During 2010, community clinic staff screened 3,219 low-income women and their children for depression and 851 received treatment. Of those who received treatment, 65 percent reported improvements in their mental health status.

ACTIVITY 4.3: Fund early childhood intervention and prevention services. This activity includes a number of programs that strive to promote healthy early development and improve language and culturally-based access to services for at-risk families. The programs are designed for young parents, recent immigrants, and family caregivers.

► **Healthy Start.** The Healthy Start Program is an intensive home visiting program for young families that focuses on communities of color and immigrant and refugee communities. To solidify the connections between families and the program, half of the staff are bilingual and bicultural, and often include the young parents' extended families in their visits. During the regular home visits, program staff monitor baby's development, with six-month developmental assessments; parenting strategies and tools parents can use with fussy babies or when family stress is high; referrals to community resources to help young parents continue their education or find a job or needed services; and group activities, including recreational outings for young families. Levy funding helped Healthy Start serve 315 families in 2010. A total of 91 percent of them delayed the birth of a second child, thus providing better outcomes for both parent and child.

- ▶ **Family, Friend, and Neighbor Care.** The Family, Friend, and Neighbor (FFN) Care Program's Play and Learn groups support grandparents and other caregivers by teaching caregivers about early childhood and providing opportunities for fun, culturally appropriate interactions between caregiver and child. Research has shown that healthy bonding and attachment between child and caregiver reduces the risk of child abuse and neglect. Approximately 60 percent of participants who attend Play and Learn groups come from communities of color and immigrant and refugee communities. A total of 6,740 families participated in Play and Learn groups during 2010, and 83 percent improved their caregiving skills.
- ▶ **Cultural Navigator.** The Cultural Navigator Project improves access to services for immigrants and refugees who are new to this country and are experiencing language and cultural isolation. Cultural Navigator services are offered at the Crossroads Mini City Hall, Together Center (Family Resource Center) in Redmond, and a location near the Great Wall Mall in Kent. Services are provided by bilingual/bicultural staff in Chinese (Mandarin and Cantonese), Spanish, Vietnamese, Russian and Punjabi. During 2010, 1,078 households used the program, with 92 percent reporting improved access to services.
- ▶ **Promoting First Relationships Train the Trainer Project.** The University of Washington's Promoting First Relationships (PFR) Train the Trainer Project provides training to staff who work with caregivers and young children at risk, with a goal of creating high quality environments in which caregivers can learn good parenting skills and children can thrive. To date, the project has provided training to staff from four community-based agencies that serve high-risk children. A total of 15 trainers have been trained.

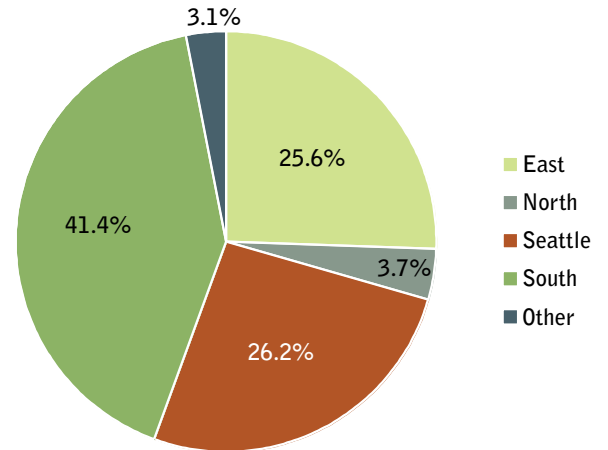
ACTIVITY 4.4: Provide early intervention for parents exiting the criminal justice system and living in transitional housing. Activities 4.4 and 4.5 work with Activity 2.6 to support young, ex-offender parents who have left the criminal justice system and hope to reunite with their children. Activity 4.4 provides a range of interventions and supportive services to help ex-offenders prepare to build stronger parenting skills and learn to become self-sufficient.

ACTIVITY 4.5: Invest in education and employment for single parents exiting the criminal justice system. This activity is the third part of a comprehensive strategy that is designed to help young parents who are at high risk: those who have been incarcerated and are now hoping to reunite with their children. More than 80 percent of these young parents have experienced trauma in their own lives, and are often part of a cycle of poverty, addiction, and abuse that has spanned generations. By helping them address these issues, stabilize their lives, and learn to care for their children, the Levy can help break this cycle and promise a brighter future for both parents and children.

- ▶ **Career Connections for ex-offender parents.** Because economic self-sufficiency is vital if these parents are to avoid re-offending, clients are referred to the Career Connections Program. There, they receive assistance searching for jobs or pursuing educational goals. Because these clients have just left incarceration, they face significant employment challenges, and so may choose to pursue education rather than entering the job market immediately. During the course of 2010, Activities 4.4 and 4.5 served 56 parents, and helped 57 percent of them reunite with their children. A total of 80 percent who obtained jobs retained them through the end of 2010.

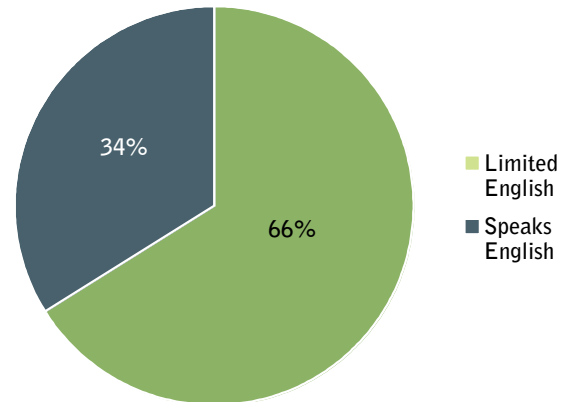
ACTIVITY 4.6: Provide treatment for parents involved with the King County Family Treatment Court for child dependency cases. The Family Treatment Court (FTC) is an alternative to regular dependency court. It works to improve the safety and well-being of children by providing their parents with access to drug and alcohol treatment and the other supportive services they need to care for their children successfully. The FTC outlines a number of requirements for ex-offender parents who wish to be reunited with their children: among other things, they must be clean and sober for six consecutive months, care for their children for six months, complete a chemical dependency treatment program, find housing, and establish a support system and life plan. Families remain in the program for 18 months to two years. Over the course of the year, a total of 67 families were served. An ongoing evaluation by the Division of Public Behavioral Health and Justice Policy in the University of Washington Department of Psychiatry and Behavioral Sciences found that 86 percent of key stakeholders reported that FTC is better than regular dependency court at accomplishing such goals for families.

Location of People Served by Strategy 4



People served by Strategy 4 lived throughout the County. Most of those served lived in South King County.

English-speaking Ability of Those Served by Strategy 4



The activities in Strategy 4 reach out to families who face cultural or linguistic barriers. More than half of those served had limited English speaking ability.

Increasing the effectiveness of resource management and evaluation

The significant majority of Levy funds are dedicated to the direct services and housing development activities in Strategies 1 through 4. However, a small amount of funding was set aside for initiatives that improve regional systems coordination and for evaluation of the effectiveness of Levy programs. Improved coordination and evaluation measures ensure that we invest Levy funds wisely and effectively and promote system-wide improvements on behalf of our clients.

ACTIVITY 5.1: Support Levy evaluation. Details on evaluation activities are provided in the 2010 Evaluation Report that begins on page 19. The performance management charts on pages 20 through 23 summarize the progress made on each Levy-funded activity and provide the outcome measures, results, and success of each activity. The evaluation efforts are important not only in determining the success of Levy-funded efforts, but also to help inform the public about the use of their tax dollars.

ACTIVITY 5.2: Engage in cross-system planning for youth. Planning for preventing youth homelessness, including youth aging out of foster care, is being coordinated through organizations that address homelessness, with the involvement of youth-serving agencies.

ACTIVITY 5.3: Prepare a profile of offenders. A report on individuals with mental illness, chemical dependency, and who are homeless and/or involved in the criminal justice and emergency medical systems was completed in 2007. The report was used to plan services for individuals involved in the criminal justice system who experience mental illness, substance abuse issues or both. See Activity 2.5.

ACTIVITY 5.4: Complete planning, training, and service design. Funds in this activity have been reserved for Levy renewal planning and design in 2011.

ACTIVITY 5.5: Facilitate the Homeless Management Information System. Safe Harbors is a Homeless Management Information System (HMIS) that enables community-based providers to tabulate information on the clients who depend on homelessness services. Safe Harbors helps us understand who is homeless, what services they need, and what we can do to help. Providing client data to Safe Harbors is also required as a provision of receiving state and federal housing and homeless services funding. Levy funds were used to cover the one-time, short-term, agency-related costs to migrate data to Safe Harbors II, an enhanced HMIS that was released in 2009. More than 170 community-based providers transferred their record-keeping systems to Safe Harbors II and are now successfully using the system.

ACTIVITY 5.6: Improve information systems. With the help of Levy funds, the KCVP changed its program design to incorporate comprehensive assessment, case management, and enhanced linkages to other social services. The changes in the business model and performance reporting required substantial changes to the KCVP's existing information system. Levy evaluation staff worked with KCVP staff and database programmers to revise the Veteran Information Base Electronic (VIBE) System so that it supported the KCVP's new Levy-funded case management service model.

ACTIVITY 5.7: Consultation and training related to protocols and policies for release of information and sharing of patient information. Through this activity, Levy staff members have coordinated efforts among numerous systems in King County to allow for timely and appropriate sharing of client information in compliance with statutory confidentiality requirements. County staff members were able to complete this project using in-house expertise.

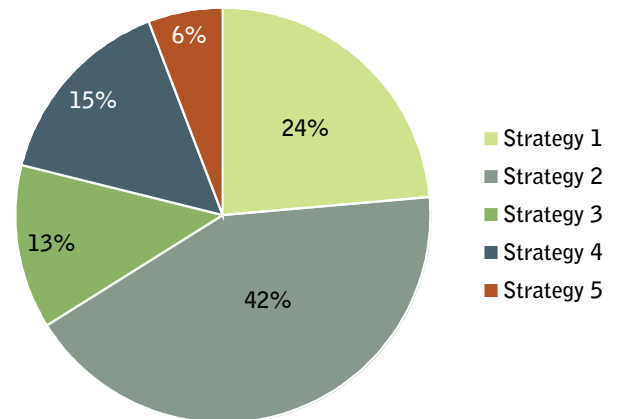
Activity 5.8: Develop common data set for assessment of those seeking services. The goal of this activity is to improve coordination among systems serving the same clients.

► **Partnership for Health Improvement through Shared Information.** The Partnership for Health Improvement through Shared Information (PHISI) is a consortium of health care professionals and public and private organizations who are working to implement a Health Information Exchange (HIE) that will facilitate coordination of care among providers who serve Levy clients, including high cost, high utilizers of publicly funded health services. The PHISI aims to improve individual and population health, improve quality of care, and make more efficient use of health system resources within King County's safety-net population, including veterans. A PHISI business plan was developed during 2010.

► **Vulnerability Assessment Tool.** The Vulnerability Assessment Tool coordinates with the High Utilizer Integrated Data Project (developed as part of Levy Activity 2.1) to identify highly vulnerable individuals who have been living on the streets and help prioritize them for available housing. Staff at community-based organizations that work with homeless individuals were trained during 2010 to use the Vulnerability Assessment Tool to assess clients' risk levels and plan strategies to meet their needs.

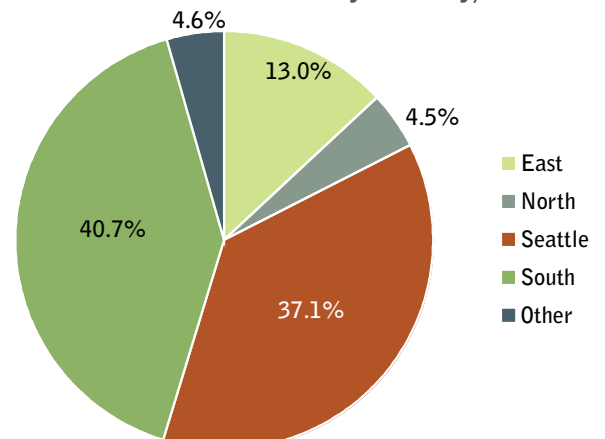
ACTIVITY 5.9: Facilitation of ongoing partnerships. Effective collaboration is essential to promote service integration, coordinate resources, and avoid the splintering of efforts across service systems. Each year, Levy staff and members from the two Levy oversight boards meet with stakeholders to share Levy progress and to hear from them about how Levy initiatives could best meet their needs. During 2010, staff and the Levy oversight boards met with more than 20 different stakeholders including city councils, commissions, and community and veterans' organizations.

Allocation of Levy Program Funds, 2010



Overall, a total of \$15.4 million was allocated to Levy programs during 2010.

Location of Those Served by the Levy, 2010



People served by the Levy during 2010 lived throughout King County.

2010 Evaluation Report

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From late Fall 2009 through Summer 2010, Levy staff evaluated each Levy-funded service activity and all related sub-activities. Performance data gathered through an electronic reporting system, including that available through the improved Veterans Information Base Electronic System, was analyzed. Program managers were consulted to clarify data questions, and explain any modifications made as their activities were implemented. Recommendations for future modifications to programs were also documented. The resulting *Mid-point Evaluation and Performance Report* combined the results of performance evaluations from all Levy activities implemented through December 31, 2009.

The *Mid-point Evaluation and Performance Report* focused on three levels of analysis:

- ▶ **Overview and overall goals of the Levy.** An overview of Levy implementation to date and some important indicators of progress toward meeting the Levy's three overall goals were created.
- ▶ **The five overarching strategies.** Summaries of activities within each of the five overarching strategies, including performance and outcomes to date, and any lessons learned by implementing the activities were provided.
- ▶ **Activity-specific evaluations and performance summaries.** A total of 40 Levy-funded activities were evaluated. Each of the individual activity reports described the status of resources used, services provided, people affected, near term outcomes and results achieved, and any adjustments made to increase project effectiveness. These reports were the building blocks for the higher-level summaries.

The *Mid-point Evaluation and Performance Report* is available on the Levy website at www.kingcounty.gov/DCHS/Levy. Performance summaries for each Levy-funded activity can be found on the following four pages of this report.

The two Levy oversight boards reviewed each of the individual activity outcome and performance summaries that were developed as part of the *Mid-point Evaluation and Performance Report*. Board members visited Levy program sites, heard presentations on a number of projects, and convened joint meetings at a variety of locations so they could hear from members of the public.

Over the course of the Levy, performance management has been important to help staff and oversight board members track the achievements of each Levy activity. Detailed evaluations have led to program refinement and improvements.

Levy Performance Management Report: Strategy I

| Activity | Lead Agency* | Date of First Service | Clients Served in 2010 | Services | | Outcomes | |
|---|--------------------|-----------------------|--------------------------------------|---|-------------------------|---|---|
| | | | | Types | Quantity | Outcome Measures | Results** |
| Overarching Strategy I: Enhancing services and access for veterans, military personnel, and their families | | | | | | | |
| Activity 1.1 Expand the Geographic Range of King County Veterans Program | | | | | | | |
| 1.1.A | KCVP | July 2008 | 434 | Service contacts | 998 | New clients engaging in services | 274 first-time clients |
| 1.1.B | CSD | January 2009 | NA | Curriculum development Curriculum testing | Developed In testing | Completion of curriculum Number of piloting schools | Curriculum completed One school piloted Four districts implementing 2010 |
| 1.1.C | CSD | October 2010 | 76 | Client Contacts Clients applying for benefits | 76 50 | Clients reporting satisfaction | 54% successful |
| 1.1.D | WDVA | Sept 2009 | 198*** | Clients Assessed Referrals | 167 102 | Increased stability | 54% successful |
| Activity 1.2 Increase the capacity of King County Veterans Program | | | | | | | |
| 1.2.A.1 | KCVP | Nov 2006 | 1,833 | Financial assistance recipients Levy Financial Assistance | 1,833 \$605,833 | Increased financial stability | 71% measured retain housing |
| 1.2.A.2 | KCVP | Dec 2007 Dec 2007 | 238 53 | Emergency bed nights Transitional bed nights | 15,184 2,298 | Moving to more stable housing | 65.9% successful |
| 1.2.A.3 | CSD | August 2009 | N/A | Plan development | Completion | Increase veterans' access to housing | Plan complete |
| 1.2.B | WDVA | April 2007 | 200 | Counseling hours Community education hours | 3,656 595 | Reduced PTSD symptoms | 97% successful |
| 1.2.C | WDVA | April 2007 | 128 | Clients assessed Clients enrolled Job-housing placements | 128 92 45 | Achieving early release Reduced recidivism | 122 97% |
| 1.2.D.1 | KCVP | Sept 2007 | 997 | S. King basic services clients Case management clients Case management contacts | 334 663 8,460 | Increased stability score | 85% |
| 1.2.D.2 | WDVA | April 2007 | 128 | Clients assessed Job-housing placements | 128 56 | % unemployed get job placements % homeless secure and keep housing 60 days | 21% successful 22% successful |
| 1.2.D.3 | NW Justice Project | August 2010 | 74 | Case Assessments Case referrals | 87 76 | Cases successfully resolved | 22 |
| 1.2.E | WDVA | August 2008 | 120 | Clients screened Job-training placements | 120 63 | Secure employment and training Job retention for one year | 100% 86% |
| 1.3 | WDVA | 2010 | 231 | Clients using system Clients receiving referrals | 231 220 | Clients receiving appropriate referral | 90% successful |
| | | | Total 2010 Clients Strategy 1 | 4,720 | | | |

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*CSD = Community Services Division, KCVP = King County Veterans Program, WDVA = Washington State Department of Veterans Affairs

**Outcomes measurements are based upon the number of clients eligible to be measured, which is likely to be different from clients served in 2010.

***Clients served include all household members.

Levy Performance Management Report: Strategy 2

| Activity | Lead Agency* | Date of First Service | Clients Served in 2010 | Services | | Outcomes | |
|--|--------------|-----------------------|--------------------------------------|--|--------------------|---|--------------------------------|
| | | | | Types | Quantity | Outcome Measures | Results** |
| Overarching Strategy 2: Ending homelessness through outreach, prevention, permanent supportive housing and employment | | | | | | | |
| Activity 2.1 Identify and engage those who have experienced long-term homelessness | | | | | | | |
| 2.1.A.1 | MHCADSD | January 2010 | 222 | Develop list of high utilizers (HU) Clients securing housing | 5,305 HU 222 | List developed Number HU getting housed | March 2010 222 units filled |
| 2.1.A.2.a | MHCADSD | July 2008 | 1,885 | Clients linked to support services | 1,744 | Increased engagement in services (individuals) | 92.5% |
| 2.1.A.2.b | PHSKC | January 2008 | 487 | Clients enrolled | 487 | Clients retain permanent housing Enrolled in benefits Improved Mental Health status | 79% 60% 45% |
| 2.1.B.1 | CSD | January 2008 | 194 | Outreach contacts Clients engaged | 344 194 | Increased access to resources | 78% |
| 2.1.B.2 | PHSKC | July 2008 | 479 | Client visits Referrals for assistance | 1,249 868 | Clients linked to treatment | 87% |
| 2.2 | CSD | Fall 2007 | | Capital projects funded through 2010 | 25 | Vets units funded Homeless units funded | 17 28 |
| 2.3 | CSD | January 2009 | 905*** | Households served Hours of education-outreach | 484 5,463 | Percent of clients 1 year retention Landlords renting units | 84% 105 |
| 2.4.A | PHSKC | January 2008 | 960 | Linked to Primary Care Services engagement Self-manage chronic condition | 295 330 638 | Increase housing stability | 97% |
| 2.4.B | CSD | January 2008 | 505 | Households served Case management hours | 505 26,769 | Increase housing stability | 92% |
| 2.5.A | MHCADSD | January 2008 | 51 | Clients engaged in services Clients moved into housing | 51 45 | Move into supportive housing | 88% |
| 2.5.B | MHCADSD | April 2009 | 63 | Clients engaged in services Clients moved into housing | 63 57 | Move into supportive housing Retain housing 6 months | 57 64% |
| 2.6 | CSD | September 2008 | 123*** | Families enrolled Case management hours Hours in-reach | 56 5,649 531 | Reunify with children and increase housing stability | 57% |
| 2.7 | CSD | May 2008 | 1,655 | Households assisted | 625 | At-risk families who maintain their housing 12 months | 93% |
| 2.8.A | CSD | August 2008 | 953*** | Clients enrolled | 947 | Secure job/Meet job goals Retain jobs/Increase income | 414 61% |
| 2.8.B | WTP | March 2010 | 122 | Clients enrolled | 122 | Meet Individual Action Plan objectives Those securing jobs retain jobs | 104/86% 67% |
| | | | Total 2010 Clients Strategy 2 | | 8,604 | | |

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*CSD = Community Services Division, MHCADSD = Mental Health, Chemical Abuse and Dependency Services Division, PHSKC = Public Health-Seattle and King County, WTP = Work Training Program
 **Outcomes measurements are based upon the number of clients eligible to be measured, which is likely to be different from clients served in 2010.
 ***Clients served include all household members.

► Levy Performance Management Report: Strategy 3

| Activity | Lead Agency* | Date of First Service | Clients Served in 2010 | Services | | Outcomes | |
|--|--------------|-----------------------|------------------------|---|-------------------|---|----------------------------|
| | | | | Types | Quantity | Outcome Measures | Results** |
| Overarching Strategy 3: Increasing Access to Behavioral Health Services | | | | | | | |
| 3.1.A | PHSKC | 2008 | 5,241 | Clients assessed Enrolled in treatment | 5,241 4,282 | Improved periodic MH screening | 45% |
| 3.1.B | PHSKC | 2008 | 928 | Assessed for PTSD/MH Enrolled in treatment Outreach and referrals | 552 449 312 | Improved periodic MH screening | 42% |
| 3.2/3.3 | WDVA | July 2009 | 1,450 | Treatment professionals educated | 1,450 | Education/training sessions Improved treatment | 91 Too early to measure |
| 3.4 | CSD | 2008 | 88 | Clients enrolled | 88 | Reduced depression scale Maintain or improved living arrangements | 96% 100% |
| Total 2010 Clients Strategy 3 | | | 6,883 | | | | |

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*CSD = Community Services Division, PHSKC = Public Health-Seattle and King County, WDVA = Washington State Department of Veterans Affairs

**Outcomes measurements are based upon the number of clients eligible to be measured, which is likely to be different from clients served in 2010.

Levy Performance Management Report: Strategy 4

| Activity | Lead Agency* | Date of First Service | Clients Served in 2010 | Services | | Outcomes | | |
|---|--|----------------------------|------------------------|--------------------------------------|--|-----------------------|--|------------|
| | | | | Types | Quantity | Outcome Measures | Results** | |
| Overarching Strategy 4: Strengthening Young Families at Risk | | | | | | | | |
| 4.1 | Nurse Family Partnership | PHSKC | 2008 | 240*** | Households enrolled NFP Parents served WTP Clients enrolled class / employ | 133 153 116 | Successful birth outcome Improved employment | 89% 75% |
| 4.2 | Pilot services for maternal depression | PHSKC | 2008 | 3,219 | Clients screened Positive for depression Receiving treatment | 3,219 1,145 851 | Increased mental health status | 65% |
| Activity 4.3 Fund early childhood and prevention services | | | | | | | | |
| 4.3.A | Healthy Start expansion | PHSKC | 2008 | 630*** | Households assessed Receiving home visits Linked with medical | 315 315 304 | Delaying birth of second child | 91% |
| 4.3.B | Cultural Navigator project | PHSKC | 2008 | 1,078 | Clients receiving info Information contacts Agencies- technical assistance | 1,078 223 - | Increased access to culturally appropriate services | 92% |
| 4.3.C | Promoting First Relationships project | PHSKC | 2009 | 15 | Number of caregivers trained | 15 | Increased caregiver skills | 67% |
| 4.3.D | Family Friend and Neighbor Network Play and Learn | PHSKC | 2009 | 6,740 | Families served Attendees Play and Learn | 6,740 - | Increased caregiver skills | 83% |
| 4.4/4.5 | Invest in education / employment / treatment for parents exiting CJ system | CSD | 2009 | 123 | Parents served Case management hours In Reach contacts | 56 5,649 531 | Reunify with children and increase housing stability | 57% |
| 4.6.A | Family Treatment Court | King County Superior Court | 2009 | 67 | Clients served Enrolled in treatment plans | 67 38 | Completed treatment plans | 69% |
| 4.6 | Family Treatment Court | Office of Public Defender | 2009 | 111 | Parents represented by attorneys | 111 | Hearings w/ representation | 97 |
| | | | | Total 2010 Clients Strategy 4 | 12,223 | | | |

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*CSD = Community Services Division, PHSKC = Public Health-Seattle and King County
 **Outcomes measurements are based upon the number of clients eligible to be measured, which is likely to be different from clients served in 2010.
 ***Clients served include all household members.

2010 Financial Report: Combined Levy Funds by Strategy

The Veterans and Human Services Levy will generate more than \$13 million per year for six years. By the end of 2010, more than \$71 million in available funding was committed to services.

| Strategy | Program Dollars Per Plan 2010 | Program Dollars Per Plan 2006-2010 | Board/Public Review Status as of 12/31/10 | Step 2 RFP or Other Process | Step 3 | | Step 4 Cumulative Expenditures (incl 2010) |
|--|-------------------------------|------------------------------------|---|-----------------------------|-----------------------|----------------------------|--|
| | | | | | 2010 Funds Committed* | 2006-2010 Funds Committed* | |
| Overarching Strategy 1: Enhancing Services and Access for Veterans | | | | | | | |
| 1.1 Expand geographic range of the King County Veterans Program | \$789,939 | \$2,274,848 | Periodic | Completed | \$789,939 | \$2,274,848 | \$438,732 |
| 1.2 Increase capacity of the King County Veterans Program | \$2,413,640 | \$9,862,360 | Completed | Completed | \$2,413,640 | \$9,862,360 | \$8,313,029 |
| 1.3 Phone resource for veterans | \$100,000 | \$400,000 | Completed | Completed | \$100,000 | \$400,000 | \$108,334 |
| 1.4 Provide training & info re: VA linkages | \$40,000 | \$160,000 | Under Discussion | NA | \$40,000 | \$160,000 | - |
| Overarching Strategy 2: Ending Homelessness through Outreach, Prevention, Permanent Supportive Housing and Employment | | | | | | | |
| 2.1 Initiatives to identify/engage/house long term homeless | \$820,000 | \$2,930,000 | Completed | Completed | \$820,000 | \$2,930,000 | \$2,643,682 |
| 2.2 Increase permanent housing w/ support services | \$1,326,725 | \$15,143,507 | Completed | Annual RFP | \$1,326,725 | \$15,143,507 | \$15,143,507 |
| 2.3 Landlord risk reduction | - | \$1,000,000 | Completed | Completed | - | \$1,000,000 | \$38,820 |
| 2.4 Investment in support services for housing | \$1,250,000 | \$5,000,000 | Completed | Annual RFP | \$1,250,000 | \$5,000,000 | \$3,896,474 |
| 2.5 KCCJL housing/services | \$500,000 | \$2,000,000 | Completed | Completed | \$500,000 | \$2,000,000 | \$1,589,385 |
| 2.6 Perm housing placement suppt/CJ parents exiting transitional hsg | \$110,000 | \$330,000 | Completed | Completed | \$110,000 | \$330,000 | \$124,179 |
| 2.7 Housing stability program | \$1,000,000 | \$4,000,000 | Completed | Completed | \$1,000,000 | \$4,000,000 | \$2,724,617 |
| 2.8 Link education & employment to supportive housing | \$1,000,000 | \$3,550,000 | Completed | Completed | \$1,000,000 | \$3,550,000 | \$2,927,733 |
| Overarching Strategy 3: Increasing Access to Behavioral Health Services | | | | | | | |
| 3.1 Integrate MH/CD into primary care clinics | \$1,300,000 | \$5,000,000 | Completed | Completed | \$1,300,000 | \$5,000,000 | \$4,375,714 |
| 3.2 Training programs in trauma sensitive & PTSD treatment | \$75,000 | \$300,000 | Completed | Completed | \$75,000 | \$300,000 | \$115,372 |
| 3.3 Train behavioral health providers in PTSD | \$250,000 | \$1,000,000 | Completed | Completed | \$250,000 | \$1,000,000 | \$484,628 |
| 3.4 In-home services to treat depression in elderly vets, others | \$196,000 | \$700,000 | Completed | Completed | \$196,000 | \$700,000 | \$643,967 |
| Overarching Strategy 4: Strengthening Young Families at Risk | | | | | | | |
| 4.1 Nurse Family Partnership | \$535,000 | \$2,044,449 | Completed | Completed | \$535,000 | \$2,044,449 | \$2,044,600 |
| 4.2 Pilot of new services for maternal depression | \$500,000 | \$1,961,638 | Completed | Completed | \$500,000 | \$1,961,638 | \$1,741,638 |
| 4.3 Early childhood intervention/prevention | \$493,000 | \$1,903,413 | Completed | Completed | \$493,000 | \$1,903,413 | \$1,793,489 |
| 4.4 Early intervention support for parents exiting CJ/m transitional hsg | \$280,000 | \$840,000 | Completed | Completed | \$280,000 | \$840,000 | \$615,280 |
| 4.5 Invest in education and employ for single parents exiting CJ | \$150,000 | \$450,000 | Completed | Completed | \$150,000 | \$450,000 | \$222,672 |
| 4.6 Family Treatment Court | \$465,739 | \$860,739 | Completed | NA | \$465,739 | \$860,739 | \$742,273 |
| Overarching Strategy 5: Resource Management and Evaluation | | | | | | | |
| 5.1 Evaluation | \$350,000 | \$1,600,000 | Completed | NA | \$350,000 | \$1,600,000 | \$757,417 |
| 5.2 Cross system planning/youth | - | \$250,000 | Under Discussion | NA | - | \$250,000 | - |
| 5.3 Profile of offenders with MH & COD | - | \$120,000 | Completed | Completed | - | \$120,000 | \$120,000 |
| 5.4 Planning, training, service design efforts | \$100,000 | \$300,000 | Sched Sept 2010 | NA | \$100,000 | \$100,000 | - |
| 5.5 Safe Harbors (HMIS) | \$150,000 | \$975,000 | Completed | Completed | \$150,000 | \$975,000 | \$840,801 |
| 5.6 Information systems | - | \$350,000 | NA | NA | - | \$350,000 | \$175,000 |
| 5.7 Consultation and training (HIPAA) | - | \$150,000 | Completed | Completed | - | \$150,000 | \$65,946 |
| 5.8 Common data set | \$60,000 | \$440,000 | Completed | NA | \$60,000 | \$440,000 | \$118,679 |
| 5.9 Facilitation of ongoing partnerships | \$150,000 | \$600,000 | Completed | Completed | \$150,000 | \$600,000 | \$509,237 |
| Subtotal: | \$14,405,043 | \$66,465,954 | | | \$14,405,043 | \$66,325,954 | \$53,315,206 |
| Percent of available program dollars: | | | 98.4% | | | 99.7% | 80.1% |
| Administration | \$539,061 | \$2,323,652 | | | \$539,061 | \$2,323,652 | \$1,782,391 |
| Board support and other miscellaneous direct program costs | \$724,662 | \$1,380,239 | | | \$724,662 | \$1,380,239 | \$1,371,358 |
| Planning, development and start-up | - | \$1,717,408 | | | - | \$1,717,408 | \$584,087 |
| Subtotal: | \$1,263,723 | \$5,421,299 | | | \$1,263,723 | \$5,421,299 | \$3,737,836 |
| Total: | \$15,668,766 | \$71,947,253 | | | \$15,668,766 | \$71,747,253 | \$57,053,042 |

*Includes funds committed by Letter of Award, contract, and/or Memorandum of Agreement, as well as funds committed to expanding the range/capacity of KCVF.
 Notes: (1) Additional revenue identified in 2008 was added to this strategy; these new projects were not fully up and running in 2010. The Oversight Boards are considering a recommendation for these funds.
 (2) Funds to be transferred to Housing Opportunity Fund (HOF) in second quarter 2011. (3) Administration cost equals 2.4 percent of total revenues. This is under the 5 percent goal.

► 2010 Financial Report: Veterans Levy Fund by Strategy

Half of the Levy funds are committed to serve veterans, military personnel, and their families. This table shows nearly \$35.5 million in Levy funds committed to serving veterans by the end of 2010.

| Strategy | Program Dollars Per Plan 2010 | Program Dollars Per Plan 2006-2010 | Step 1 | | Step 2 | | Step 3 | | Step 4 |
|--|-------------------------------|------------------------------------|---|----------------------|---|----------------------------|-------------------------------------|---------------------|---------------------|
| | | | Board/Public Review Status as of 12/31/10 | RFP or Other Process | 2010 Funds Committed* | 2006-2010 Funds Committed* | Cumulative Expenditures (incl 2010) | | |
| Overarching Strategy 1: Enhancing Services and Access for Veterans | | | | | | | | | |
| 1.1 Expand geographic range of the King County Veterans Program | \$789,939 | \$2,274,848 | | | | | \$789,939 | \$2,274,848 | \$438,732 |
| 1.2 Increase capacity of the King County Veterans Program | \$2,413,640 | \$9,862,360 | | | Please see the Consolidated Financial Status Report | | \$2,413,640 | \$9,862,360 | \$8,313,029 |
| 1.3 Phone resource for veterans | \$100,000 | \$400,000 | | | | | \$100,000 | \$400,000 | \$108,334 |
| 1.4 Provide training & info re: VA linkages | \$40,000 | \$160,000 | | | | | \$40,000 | \$160,000 | - |
| Overarching Strategy 2: Ending Homelessness through Outreach, Prevention, Permanent Supportive Housing and Employment | | | | | | | | | |
| 2.1 Initiatives to identify/engage/house long term homeless | \$246,000 | \$879,000 | | | | | \$246,000 | \$879,000 | \$776,159 |
| 2.2 Increase permanent housing w/ support services | \$626,725 | \$6,626,078 | | | | | \$626,725 | \$6,626,078 | \$6,626,078 |
| 2.3 Landlord risk reduction | - | \$500,000 | | | | | - | \$500,000 | \$4,436 |
| 2.4 Investment in support services for housing | \$375,000 | \$1,500,000 | | | | | \$375,000 | \$1,500,000 | \$1,303,611 |
| 2.5 KCCJI housing/services | \$150,000 | \$600,000 | | | Please see the Consolidated Financial Status Report | | \$150,000 | \$600,000 | \$476,816 |
| 2.6 Perm housing placement suppt/CJ parents exiting transitional hsg | - | - | | | | | - | - | - |
| 2.7 Housing stability program | \$500,000 | \$2,000,000 | | | | | \$500,000 | \$2,000,000 | \$1,229,175 |
| 2.8 Link education & employment to supportive housing | \$300,000 | \$1,065,000 | | | | | \$300,000 | \$1,065,000 | \$816,555 |
| Overarching Strategy 3: Increasing Access to Behavioral Health Services | | | | | | | | | |
| 3.1 Integrate MH/CD into primary care clinics | \$800,000 | \$3,000,000 | | | | | \$800,000 | \$3,000,000 | \$2,500,714 |
| 3.2 Training programs in trauma sensitive & PTSD treatment | \$22,500 | \$90,000 | | | | | \$22,500 | \$90,000 | \$2,240 |
| 3.3 Train behavioral health providers in PTSD | \$250,000 | \$1,000,000 | | | Please see the Consolidated Financial Status Report | | \$250,000 | \$1,000,000 | \$484,628 |
| 3.4 In-home services to treat depression in elderly vets, others | \$98,000 | \$350,000 | | | | | \$98,000 | \$350,000 | \$336,000 |
| Overarching Strategy 4: Strengthening Young Families at Risk | | | | | | | | | |
| 4.1 Nurse Family Partnership | - | - | | | | | - | - | - |
| 4.2 Pilot new services for maternal depression | - | - | | | | | - | - | - |
| 4.3 Early childhood intervention/prevention | - | - | | | | | - | - | - |
| 4.4 Early intervention support for parents exiting CJ/in transitional hsg | - | - | | | | | - | - | - |
| 4.5 Invest in education and employ for single parents exiting CJ | - | - | | | | | - | - | - |
| 4.6 Family Treatment Court | - | - | | | | | - | - | - |
| Overarching Strategy 5: Resource Management and Evaluation | | | | | | | | | |
| 5.1 Evaluation | \$175,000 | \$800,000 | | | | | \$175,000 | \$800,000 | \$403,888 |
| 5.2 Cross system planning/youth | - | \$125,000 | | | | | - | \$125,000 | - |
| 5.3 Profile of offenders with MH & COD | - | \$60,000 | | | | | - | \$60,000 | \$60,000 |
| 5.4 Planning, training, service design efforts | \$50,000 | \$150,000 | | | | | \$50,000 | \$150,000 | - |
| 5.5 Safe Harbors (HMIS) | \$45,000 | \$292,500 | | | | | \$45,000 | \$292,500 | \$314,213 |
| 5.6 Information systems | - | \$175,000 | | | | | - | \$175,000 | \$175,000 |
| 5.7 Consultation and training (HIPAA) | - | \$75,000 | | | | | - | \$75,000 | \$32,973 |
| 5.8 Common data set | \$30,000 | \$220,000 | | | | | \$30,000 | \$220,000 | \$42,337 |
| 5.9 Facilitation of ongoing partnerships | \$75,000 | \$300,000 | | | | | \$75,000 | \$300,000 | \$254,618 |
| Subtotal: | \$7,086,804 | \$32,504,786 | | | | | \$7,086,804 | \$32,404,786 | \$24,706,218 |
| Percent of available program dollars: | | | | | | | | 99.7% | 76.0% |
| Administration | \$241,557 | \$1,094,159 | | | | | \$241,557 | \$1,094,159 | \$844,719 |
| Board support and other miscellaneous direct program costs | \$365,445 | \$689,015 | | | | | \$365,445 | \$689,015 | \$780,638 |
| Planning, development and start-up | - | \$1,304,884 | | | | | - | \$1,304,884 | \$520,482 |
| Subtotal: | \$607,002 | \$3,088,058 | | | | | \$607,002 | \$3,088,058 | \$2,145,840 |
| Total: | \$7,693,806 | \$35,592,844 | | | | | \$7,693,806 | \$35,492,844 | \$26,852,058 |

* Includes funds committed by Letter of Award, contract, and/or Memorandum of Agreement, as well as funds committed to expanding the range/capacity of the KCVP.
Notes: (1) Expenditure over plan amount will be balanced with 2011 under expenditure.

► 2010 Financial Report: Human Services Levy Fund by Strategy

Half of the Levy funds are committed to serve individuals and families in need. This table shows more than \$36 million of Levy funds committed to human services by the end of 2010.

| Strategy | Program Dollars Per Plan 2010 | Program Dollars Per Plan 2006-2010 | Step 1 Board/Public Review Status as of 12/31/10 | Step 2 RFP or Other Process | Step 3 | | Step 4 Cumulative Expenditures (incl 2010) | Notes |
|--|-------------------------------|------------------------------------|---|--------------------------------|-----------------------|----------------------------|---|-------|
| | | | | | 2010 Funds Committed* | 2006-2010 Funds Committed* | | |
| Overarching Strategy 1: Enhancing Services and Access for Veterans | | | | | | | | |
| 1.1 Expand geographic range of the King County Veterans Program | - | - | - | - | - | - | - | 13532 |
| 1.2 Increase capacity of the King County Veterans Program | - | - | - | - | - | - | - | |
| 1.3 Phone resource for veterans | - | - | - | - | - | - | - | |
| 1.4 Provide training & info re: VA linkages | - | - | - | - | - | - | - | |
| Overarching Strategy 2: Ending Homelessness through Outreach, Prevention, Permanent Supportive Housing and Employment | | | | | | | | |
| 2.1 Initiatives to identify/engage/house long term homeless | \$574,000 | \$2,051,000 | | | \$574,000 | \$2,051,000 | \$1,867,523 | |
| 2.2 Increase permanent housing w/ support services | \$700,000 | \$8,517,429 | | | \$700,000 | \$8,517,429 | \$8,517,429 | |
| 2.3 Landlord risk reduction | - | \$500,000 | | | - | \$500,000 | \$34,384 | |
| 2.4 Investment in support services for housing | \$875,000 | \$3,500,000 | | | \$875,000 | \$3,500,000 | \$2,592,864 | |
| 2.5 KCCJ housing/services | \$350,000 | \$1,400,000 | | | \$350,000 | \$1,400,000 | \$1,112,570 | |
| 2.6 Perm housing placement supp/CJ parents exiting transitional hsg | \$110,000 | \$330,000 | | | \$110,000 | \$330,000 | \$124,179 | |
| 2.7 Housing stability program | \$500,000 | \$2,000,000 | | | \$500,000 | \$2,000,000 | \$1,495,442 | |
| 2.8 Link education & employment to supportive housing | \$700,000 | \$2,485,000 | | | \$700,000 | \$2,485,000 | \$2,111,178 | |
| Overarching Strategy 3: Increasing Access to Behavioral Health Services | | | | | | | | |
| 3.1 Integrate MH/CD into primary care clinics | \$500,000 | \$2,000,000 | | | \$500,000 | \$2,000,000 | \$1,875,000 | |
| 3.2 Training programs in trauma sensitive & PTSD treatment | \$52,500 | \$210,000 | | | \$52,500 | \$210,000 | \$113,132 | |
| 3.3 Train behavioral health providers in PTSD | - | - | | | - | - | - | |
| 3.4 In-home services to treat depression in elderly vets, others | \$98,000 | \$350,000 | | | \$98,000 | \$350,000 | \$307,967 | |
| Overarching Strategy 4: Strengthening Young Families at Risk | | | | | | | | |
| 4.1 Nurse Family Partnership | \$535,000 | \$2,044,449 | | | \$535,000 | \$2,044,449 | \$2,044,600 | |
| 4.2 Pilot new services for maternal depression | \$500,000 | \$1,961,638 | | | \$500,000 | \$1,961,638 | \$1,741,638 | |
| 4.3 Early childhood intervention/prevention | \$493,000 | \$1,903,413 | | | \$493,000 | \$1,930,413 | \$1,793,489 | |
| 4.4 Early intervention support for parents exiting CJ/in transitional hsg | \$280,000 | \$840,000 | | | \$280,000 | \$840,000 | \$615,280 | |
| 4.5 Invest in education and employ for single parents exiting CJ | \$150,000 | \$450,000 | | | \$150,000 | \$450,000 | \$222,672 | |
| 4.6 Family Treatment Court | \$465,739 | \$890,739 | | | \$465,739 | \$890,739 | \$742,273 | |
| Overarching Strategy 5: Resource Management and Evaluation | | | | | | | | |
| 5.1 Evaluation | \$175,000 | \$800,000 | | | \$175,000 | \$800,000 | \$353,529 | |
| 5.2 Cross system planning/youth | - | \$125,000 | | | - | \$125,000 | - | |
| 5.3 Profile of offenders with MH & COD | - | \$60,000 | | | - | \$60,000 | \$60,000 | |
| 5.4 Planning, training, service design efforts | \$50,000 | \$150,000 | | | \$50,000 | \$50,000 | - | |
| 5.5 Safe Harbors | \$105,000 | \$682,500 | | | \$105,000 | \$682,500 | \$526,589 | |
| 5.6 Information systems | - | \$175,000 | | | - | \$175,000 | - | |
| 5.7 Consultation and training (HIPAA) | - | \$75,000 | | | - | \$75,000 | \$32,973 | |
| 5.8 Common data set | \$30,000 | \$220,000 | | | \$30,000 | \$220,000 | \$76,342 | |
| 5.9 Facilitation of ongoing partnerships | \$75,000 | \$300,000 | | | \$75,000 | \$300,000 | \$254,618 | |
| Subtotal: | \$7,318,239 | \$34,021,168 | | | \$7,318,239 | \$33,921,168 | \$28,608,988 | |
| Percent of available program dollars: | | | | | | 99.7% | 84.1% | |
| Administration | \$297,504 | \$1,229,493 | | | \$297,504 | \$1,229,493 | \$937,672 | |
| Board support and other miscellaneous direct program costs | \$359,217 | \$691,224 | | | \$359,217 | \$691,224 | \$590,720 | |
| Planning, development and start-up | - | \$412,524 | | | - | \$412,524 | \$63,605 | |
| Subtotal: | \$656,721 | \$2,333,241 | | | \$656,721 | \$2,333,241 | \$1,591,996 | |
| Total: | \$7,974,960 | \$36,354,409 | | | \$7,974,960 | \$36,254,409 | \$30,200,984 | |

* Includes funds committed by Letter of Award, contract, and/or Memorandum of Agreement, as well as funds committed to expanding the range/capacity of the KCVF.

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Gary Kingsbury, Vice Chair
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Stanley Gunno
Oren J. Hadaller
Francisco Ivarra
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▶ **Department of Community and Human Services**

401 Fifth Avenue, Suite 500
Seattle, WA 98104
Phone: 206-263-9100
Fax: 206-296-5260

Jackie MacLean, Director

Linda Peterson, Division Director, Community Services Division
Pat Lemus, Assistant Division Director
Debora Gay, Veterans and Community Services Manager
Joel Estey, Regional Veterans Services Liaison
Fred Steele, Veterans Program Administrator
Marcy Kubbs, Levy Coordinator
Jon Hoskins, Performance Measurement and Evaluation
Manager
Laird Heia, Assistant Levy Coordinator

▶ **2010 Annual Report**

Writing: Mary Bourguignon, Steeple-jack Consulting
Design: Lynn Hernandez
Photography: © TimRipley.net

For more information please visit the Levy website at:
www.kingcounty.gov/DCHS/Levy

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The Veterans and Human Services Levy is administered by the King County Department of Community and Human Services and carried out in partnership with:

African American Elders Project
Area Agency on Aging – City of Seattle Aging and Disability Services
Catholic Community Services
Catholic Housing Services
Center for Healthcare Improvement for Addictions, Mental Illnesses and Medically Vulnerable Populations
Center for Human Services
Child Care Resources
Chinese Information and Service Center
City of Seattle
Community Health Plan
Community House Mental Health Agency
Community Psychiatric Clinic
Compass Housing Alliance
Country Doctor Community Health Centers
Crisis Clinic
Downtown Emergency Service Center
Eastside Interfaith Social Concerns Council
El Centro de la Raza
Evergreen Treatment Services
First Place
Foundation For the Challenged
Friends of Youth
Harborview Medical Center
Health Care for the Homeless Network
HealthPoint
Highline West Seattle Mental Health
Hopelink
Housing Resources Group
International Community Health Services
International Drop-in Center
King County Behavioral Health Safety Net Consortium
Low Income Housing Institute
Multi-Service Center
Navos
NeighborCare Health
Neighborhood House
Northshore Youth & Family Services
Northwest Justice Project
Odessa Brown Children’s Center
Pioneer Human Services
Plymouth Housing Group
Projects for Assistance in Transition from Homelessness
Public Health - Seattle & King County
Renton Area Youth & Family Services
Salvation Army – Seattle
SeaMar Community Health Centers
Seattle Indian Health Board
Seattle Jobs Initiative
Senior Services
Solid Ground
Sound Mental Health
St. Andrews Housing Group
Therapeutic Health Services
TRAC Associates
United Way of King County
University of Washington
Valley Cities Counseling and Consultation
Vashon HouseHold
Vashon Youth & Family Services
Washington State Department of Veterans Affairs
Wellspring Family Services
YouthCare
Youth Eastside Services
YWCA of Seattle | King | Snohomish

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available.

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or TTY Relay 711

www.kingcounty.gov/DCHS/levy

