

DATE: February 8, 2022

- TO: Mayor Nadine Woodward, CHHS Director Jenn Cerecedes, City Administrator Johnnie Perkins, Council President Breean Beggs, CM Michael Cathcart, CM Jonathan Bingle, CM Lori Kinnear, CM Betsy Wilkerson, CM Karen Stratton, CM Zack Zappone, Spokane County Commissioner Josh Kearns, Commissioner Mary Kuney, Commissioner Al French, Sen. Andy Billig, Rep. Timm Ormsby, Rep. Marcus Riccelli, Sen. Jeff Holy, Rep. Mike Volz, Rep. Jenny Graham, SRHD Director Dr. Francisco Velazquez
- FROM: Hello for Good, a private coalition of business leaders
- RE: Professional study on homelessness funded by WTB and STCU

As long-time Spokane civic and business leaders, we have a vested interest in our community and its success. Every downtown in America has some level of homelessness, but the intersection of Spokane's homeless population with increased addiction and mental illness concerns is creating a growing population of individuals that are unfairly suffering on our streets. We feel that the situation is spiraling out of control. As a regional leader, we want Spokane to be the "safest, cleanest and most vibrant" city with a compassionate approach to support <u>all</u> citizens within our community.

Hello for Good, a coalition of private businesses, came to fruition because the business community is at a tipping point. We are too close to losing numerous economic producers in our city that help grow our region, support its citizens, and fund the philanthropic side of our community at large. In partnership with others, we want to build on what Spokane already has to create full-spectrum solutions that address addiction, housing (from shelters to supported housing and all in between), job re-training, employment, accountability, and self-sufficiency.

We envision a vibrant, engaged community where...

- ✓ non-profits, business, and government work *together* to fill in the gaps in services and resources to assist these populations in need.
- ✓ people needing assistance are using available resources not begging on our streets.
- ✓ individuals aren't sleeping on the sidewalks even those that are shelter-resistant.

We all deserve a community where citizens are safe, responsible and productive. Ultimately, we want to humanely and compassionately connect people to where they need to be in order to be successful - whether it's family, supportive housing, incarceration, recovery centers or a service organization. NOT the streets. We began funding the coalition and put our resources toward addressing these issues. In collaboration with service providers, we created a "journey map" to identify process gaps that private industry could fund. We engaged with local, regional and national experts on social services, homelessness, housing, education, behavioral health, addiction, legislation, enforcement, job training and health care. Other recent projects include a review of alternatives to the current sit-lie ordinance challenges and the creation of educational symposiums.

We know you are working on these important issues as well. To support your efforts, we engaged an outside consultant and expert to provide a study of Spokane homelessness. We are gifting that report to you.

Attached you will find:

- A regional homelessness study from **Berry Consulting**, Inc. This engagement was funded by Washington Trust Bank and Spokane Teachers Credit Union.
- A letter of support for said study from **Paul Webster**, Director of the LA Alliance and founder of Hope Street Coalition, a grass-roots advocacy effort addressing the intersection of homelessness, mental illness, and addiction.

After carefully reviewing the challenges, opportunities and landscape of our region's homelessness, including close consultation with a variety of experts, non-profits, providers, and community stakeholders, Hello for Good created an overarching list of common issues that the City of Spokane and its leaders can address in a public/private partnership. We want Spokane to further its work on, social welfare, safety, housing inventory, education, mental health, addiction, vocational opportunities, law enforcement and the overall health and welfare of our citizens, visitors and future residents.

We stand ready to lead this important work alongside you. You can expect a strong partnership and a results-oriented relationship from us. We are a compassionate group of leaders who operate on facts, and we are calling on our elected leaders to address these issues.

Below are some of the key deliverables for our future discussions with you on how we can have the cleanest, safest and best Spokane possible. The private sector is here to help:

- Find, develop, and utilize an all-purpose shelter that addresses the needs of warming, cooling and clean air for the most vulnerable.
- City and Council leadership need to enforce effective policies around homelessness such as camping, sit-lie, drug-free zones and other high-impact ordinances.
- Address the constraints of our CMIS/HMIS system to have solid real-time data for the needs of our shelters, providers, City, and law enforcement.
- Develop and build more outreach teams for those experiencing homelessness.
- Reinforce a strategy of separating the populations of those experiencing homelessness and partner with the right organization best suited to meet their needs. Customize solutions for the distinct populations (families, men, women, single parents, shelter-resistant, criminal).

- With providers, expand number of beds and resources for mental health, addictions and co-occurring disorders, advocate for more funding and legislative support. Address funding, staffing and training issues.
- Ensure a system-wide approach to housing within our region, including Growth Management Act issues, and the creation of City and legislative actions that reduce the onerous barriers to both existing and new housing.
- Bring the CoC, CHHS, and City Council together on the same page.
- Where needed, improve the City contracts for housing and service providers to become more performance based and outcome driven.
- Establish a cadence of regular meetings with housing and service providers on needs and metrics; publish the performance data and plans for improving outcomes, including where the private sector can provide support.
- Provide avenues to fast track the needs of the higher-functioning individuals on a path to self-sufficiency.
- Improve the coordinated entry system.
- Educate the community regularly on the importance of these initiatives.

We respectfully ask that you carefully review the attached work product. We recognize this is a lot of information to digest but we are confident you will find it valuable. We will follow up soon to discuss next steps.

Sincerely,

Hello for Good Leadership Committee and Report Sponsors

Katy Bruya, Washington Trust Bank Lynnelle Caudill, Davenport Hotels Ezra Eckhardt, Spokane Teachers Credit Union Jack Heath, Washington Trust Bank Roy Koegen, Kutak Rock Kristine Meyer, Avista Foundation Shelly O'Quinn, Innovia Andrew Rolwes, DSP Fawn Schott, Volunteers of America Chris Patterson, Washington Trust Bank Larry Stone, Stone Group Chud Wendle, Northtown Square

hello for good is an organization representing a coalition of private businesses committed to improving social issues, homelessness and livability in our communities. A donor directed fund has been established with Innovia Foundation, a 501(c)3 community foundation, to support its efforts.



January 31, 2022

Katy Bruya Christopher Patterson Hello for Good PO Box 25 Spokane, WA 99210

Dear Katy and Chris,

I am writing to you with grave concerns over the health, safety, and sense of community of the Spokane region. As you are aware, homelessness and those living in places not meant for human habitation is causing serious impacts on the region. The City of Spokane along with other regional entities have devoted significant resources to address the problem of homelessness but it has only grown and become more dangerous.

I appreciate and support the efforts of Hello for Good to respond to the growing concerns of business and community leaders, service providers, and community experts over the increasing humanitarian tragedy of homelessness and unhoused and untreated addiction and mental illness. Hope Street Coalition advocates at the intersection of homelessness, mental illness, and addiction. I very much appreciate the opportunity to visit Spokane and hear firsthand from community leaders, business owners, and law enforcement the challenges your city faces.

During my visit and research about Spokane and its efforts to address homelessness, I identified how the region's housing-centric approach has failed to reduce the number of individuals living on the streets and provide critical treatment for the unhoused with serious mental illness and substance use disorders. I encourage the City and County to look at the objectives and needs of the community and match that with the outcomes being produced by the Continuum of Care and homeless services providers. I believe in the Spokane region, like other regions of the country, a mismatch is occurring.

In addition to the crisis of housing, I heard learned that issues of crime, safety, cleanliness, and hard to access treatment are harming the community and the economy. There exists a lack confidence and sense of urgency and concerted will to improve the lives of those suffering on the streets and to improve the community that endures this continued suffering.

I believe an opportunity exists to reset the approach to homelessness and its impacts on Spokane. Instead of being dictated by state and federal policy and their regulations and limitations, I recommend you work to aggressively consider alternatives, changes in law and policy, and waivers to existing regulations to create new tools and approaches to the humanitarian crisis. Much has been made of the housing crisis and how that has resulted in increases in homelessness but with all of the resources and attention devoted to creating more housing, things have gotten worse.

For example, I recommend an overhaul to the HMIS/CMIS systems so that accurate data and performance measures better ensure that efforts are achieving the desired results. While HUD requires certain data for its purposes, the current system fails to measure outcomes and evaluate providers as to the priorities of our region. Tailoring your local data to make improvements to local policy both within and outside of the desire to house the unhoused would go far.

This data is crucial so that the public and private sectors can make the most of the resources available to the region. The Spokane Continuum of Care has received more than \$23 million in federal funding for the last five years not including American Rescue Plan and CARES Act dollars. Yet, it seems that much of those dollars have simply supported a process of planning, collaborating, and offering services instead of being directed to the priorities of the community. How have these resources been leveraged to reduce the number of people living on the streets, increased the number of people who have completed addiction treatment, or received clinical care for serious mental illness? How have they combined with state and regional funds to make Downtown Spokane safer, reduce crime, and enhanced a sense of well-being for business owners, residents, visitors, and those experiencing homelessness?

Recognizing the inextricable link between unsheltered homelessness, addiction, and mental illness, what aggressive measures are being considered for implementation to get these individuals the help they need? What steps are being taken to amend the public policies that have normalized the use of powerful drugs that have led to drug-induced psychosis, street crimes, and increased homelessness?

In light of Martin v Boise, which establishes certain limits on what municipalities can enforce and regulate with respect to public spaces, how can property owners and businesses feel confident that the City is taking aggressive measures to regulate public spaces and maintain the rule of law that serves everyone? Under *Martin*, a majority of a municipality's ordinances regulating the use of city streets, sidewalks, and other public areas remain fully constitutional and enforceable - particularly those imposing time, manner, and place restrictions. Understanding the impact that encampments have on our environment, sense of safety, and health, what is being done to address these interests?

I have found that most communities desire a balanced social contract whereby the community is effectively providing for those most vulnerable on our streets while also addressing the behavior of those who exist to prey on the homeless and the communities in which they reside. This requires a balanced, compassionate application of treatment, housing options, local ordinances regulating public spaces, and effective programs. In my view, Spokane should seek a

comprehensive approach that focuses on the effective utilization of beds, services and treatment, and the obligation to use them. Your goal should be a robust, data-and performance driven set of interventions whereby the community provides beds and services to those ready, willing, and able to accept shelter. And, at the same time, a rule of law where living in public spaces is forbidden and laws are enforced.

Hope Street is available to assist in participating in a dialogue that recognizes the challenges and failures of the current approach, a willingness to look broadly and comprehensively at the realities of the streets, and an "overcome all barriers" desire to make effective change that shelters, treats, and regulates to benefit the unhoused and the housed.

I truly enjoyed my time in Spokane and look forward to providing further insights and expertise as opportunity allows. Thank you again. I look forward to partnering with you as we continue our efforts moving forward.

Sincerely,

ila Paul C. Webster

Director, Hope Street Coalition

Berry Consulting, Inc.

Listening Sessions on Homelessness Spokane, Washington

A Report on Listening Sessions and Interviews with Key Stakeholders and Partners

November 18, 2021; Finalized with Additional Input January 7, 2022

PURPOSE

In October 2021, Washington Trust Bank teamed with Spokane Teachers Credit Union to organize and conduct listening sessions on the topic of **homelessness** in Spokane. Key stakeholders from the community were invited and the sessions were documented by Berry Consulting, Inc. on the dates of October 24-26, 2021. Over thirty peopleⁱ attended these conversations representing a wide cross-section of business interests, service providers and government. All who participated did so with a focus on workable solutions to homelessness and housing in Spokane. Conversations were open-ended and confidential in that participants were told their comments would be used for this report but that the comments would not be attributed to specific individuals. Conversations focused on what is working well in Spokane concerning homelessness initiatives and programs, what is not working well, and identifying potential opportunities and pathways forward.

This report, prepared by Berry Consulting, Inc., condenses and synopsizes input heard over these three days. It is not intended to be a homelessness proposal or plan for Spokane; it is intended as a feedback loop and an informal gap analysis for future use by the clients, Washington Trust Bank and Spokane Teachers Credit Union, and those they choose to share it with. It is our hope that this input will help inform the work of crafting or augmenting a homelessness plan for Spokane that has broad input and buy in from key stakeholders in your community.

This document builds upon local work that was reviewed for this project, including,: "2022 Budget Workshop #3, Quality of Life Focus (City of Spokane, October 19, 2021); "City of Spokane City Council Study Session on Homelessness" (City of Spokane, July 16, 2020); "City of Spokane CHHS Executive Transition Team Status and Program Summaries (City of Spokane, October 18, 2021); "Statement of Conditions and Affairs (Mayor Nadine Woodward, October 22, 2021); and "5-Year Strategic Plan to Prevent and End Homelessness" (Spokane City/County Continuum of Care, 2020-

2025).

The "National Data, Best Practices and Local Needs" section is provided as context in which to read and digest the section titled "Interview Responses."

NATIONAL DATA, BEST PRACTICES & LOCAL NEEDS

The United States Interagency Council on Homelessnessⁱⁱ and the National Alliance to End Homelessnessⁱⁱⁱ lead the nation in research and best practices in the field of homelessness. Their collective repositories of data point to essentials that are necessary to confront homelessness. While there is no single strategy that works for every community, these strategies can inform the Spokane process and give decision makers a look at what others around the country are doing including: a coordinated, yet decentralized, triaged systemic response that assists those most in need. It also speaks to the need for affordable housing and increased employment and income opportunities. Our experience, which we are confident reflects experiences in Spokane leads us to the conclusion that any meaningful plan to address and impact homelessness needs to be INTENTIONAL and PURPOSEFUL. It is also important to engage with people in Spokane who are experiencing or who have experienced homelessness to acknowledge and honor their perspective. A perfect example of why their perspective is important occurred when leaders in Spokane listened to homeless youth and subsequently decided to move the youth shelter out of downtown to a location that the youth felt safer and more willing to engage with service providers. Your local providers have these conversations everyday - and those conversations will greatly benefit and inform your community plans moving forward.

UNIFIED RESPONSE

A "unified response" is indicated when responders/service providers use shared criteria and pathways of success to measure outcomes. It requires that all providers be held accountable to the same set of metrics. Unifying contracts under one systemic plan so that the same terminology, standards and overlapping scopes of work, while tailored to each provider's expertise, is central. Coordinated Assessment is an example of a unified approach to intake assessments. Similar unity on what next steps a client can take is a unified response. An example would be when a client receives the same instruction and pathway forward towards housing regardless of which service provider they meet.

It appears the City of Spokane has many of these components at hand. Service providers are healthy and positively focused on housing outcomes. There is considerable focus on sub-populations such as youth and women experiencing homelessness and there are numerous groups doing good work across the county. However, interviewees almost unanimously voiced concern that providers are not unified in a meaningful way. While there is often healthy conversation among providers to decide who among them should apply for certain funding, funding sources themselves unintentionally create silos, each requiring outcomes not necessarily tied together to an overall strategic goal to decrease Spokane's homeless population. Coordination, communication, and a shared primary plan of action were reported across many interviews as lacking and an opportunity to move forward through a community-built framework for action that is intentional and sustainable.

TARGETED RESPONSE

A "targeted response" is indicated when all systems and tools aim to support and assist the same sub-population. This does not exclude assistance to others in need. It does, however, prioritize resources to a particular group of people for a set amount of time to maximize outcomes. This can achieve short-term successes that free up overwhelmed resources. A targeted response aims to reduce the greatest demands on the system. An example is when people who are medically vulnerable and chronically homeless are moved from expensive emergency services into less expensive supportive housing and surrounded by needed services.

Despite activity on various fronts by business, government and non-profit sectors, Spokane's homeless population remains at .685% (1,559 individuals)^{iv}, nearly three times the national average (.2%). Of those, 485 (31%) are experiencing chronic homelessness, as compared to the national average of 19%^v. This offers potential for a strong return on investment by focusing a unified response to chronic homelessness, with a coordinated plan to address all forms of homelessness. International and national data reflect cost-savings to cost-neutral returns when cities focus efforts on this sub-population which accounts for highest costs.

As an example: in Albuquerque, New Mexico, the Institute for Social Research of the New Mexico University reported a \$1.78 return for every \$1.00 invested when moving this sub-population of chronically homeless and medically vulnerable people from the streets into low-barrier supportive housing and then surrounding these individuals with robust mental health services, substance abuse counseling, and other supportive activities. (See Appendix A.) This finding echoes the National Academies of Sciences, Engineering, and Medicine report "Permanent Supportive Housing: Evaluating the Evidence for Improving Health Outcomes Among People Experiencing Chronic Homelessness," published by National Academies Press (US), July 11, 2018.

Any targeted plan should focus on chronically homeless singles, a by name list and case conferencing to ensure the right housing intervention and support services are located.

HOUSING

Lack of housing options is a significant contributor to homelessness in Spokane as it is in many other areas of the country. The housing market for homes below \$750,000 is nearly sold out. The median home price in August 2021, was \$389,728 (a 22.9% increase over 2020).^{vi} Fair Market Rates for 2022 project annually at \$8,412 for an efficiency unit, \$9,540 for one-bedroom units and \$12,396 for two-bedroom units. To meet the recommendation of spending no more than 30% of one's income on housing means, a Spokanite will need to earn \$31,800 to afford a one-bedroom unit, \$41,320 for a two-bedroom unit. Concurrently, the minimum wage at \$14.49, or \$30,139 annually if one works 40 hours per week, 52 weeks per year. This is below the affordable cost of a one-bedroom apartment. The discrepancy between housing wages, housing costs, and housing selection are high barriers to overcome in any city. This imbalance will need to be addressed over a multi-year timeframe and will require input and participation by the public, private and non-profit sectors. In many cases it may require thinking about subsidies to fill income and housing

cost gaps for those who qualify. Identifying a key non-governmental stakeholder in Spokane to help shepherd this process of creating more balance between income opportunities and housing costs across sectors might be valuable. This could be a standalone effort outside of your specific homelessness outreach and provider plan(s).

One method may be to develop private landlord partnerships that offer scattered housing throughout the county. Commitments from local landlords to accept Section 8 vouchers coupled with incentives to landlords to help close the market rate gap would help this effort succeed.

As is true across the nation, Single Room Occupancy (SRO) housing in Spokane is being lost to conversion, gentrification and urban renewal. This fact has only intensified over time since "Homelessness, Health, and Human Needs" was first published by the Institute of Medicine (US) Committee on Health Care for Homeless People, (National Academies Press) in 1988. Spokane has only a .5% apartment vacancy rate for all unit types.^{vii}

Adding to these challenges, we heard many comments concerning the State of Washington's Growth Management Act and how it has restricted housing development options. The Act's administrative rules are currently under review by the Washington State Department of Commerce, and this review period offers housing advocacy and policy opportunities from Spokane's perspective before rulemaking finalizes on June 20, 2022.^{viii}

It is encouraging that the City of Spokane is working on a pilot program to allow 4-plexes and other multi-family dwellings on parcels of land that were previously excluded from this type of development. Nationally, there is a lot of momentum around zoning code adjustments to allow for more affordable housing options, including ADUs (additional dwelling units) in traditional single family home zoning areas. These ADUs potentially add to rental stock and housing options for family members transitioning in their lives such as young adults and seniors. Spokane may want to continue looking at these existing and new opportunities and vet them with your community and elected officials. It should also be noted that density does not automatically equate to affordability in housing; however, it can be part of a successful approach.

Recent COVID-19 responses in Spokane City show that there is the will and ability to act quickly and effectively to provide an emergency response when needed. Nationwide, cities are exploring how to turn these short-term responses into long-term solutions. If not already underway, Spokane may benefit from strategic use of HOME Homeless Assistance Program dollars to convert existing motels into apartment units in which clients can "transition in place" as case management support enables them to access lasting income through access to employment or disability.^{ix}

The pandemic has also spurred enormous federal spending through the CARES Act and ARPA. Cities are looking for ways to maximize long-term impacts from these one-time funds. Some areas of opportunity for housing needs through ARPA include:

- Emergency Housing Vouchers
- Housing Counseling

- Homelessness Assistance and Supportive Services
- Housing Utility Assistance

The following chart shows the ARPA sources and amounts available for these four categories of housing support.

Agency	Funding	Uses	Amount
HUD	Emergency Housing Vouchers	For emergency housing vouchers to individuals and families who are experiencing homelessness or at-risk of homelessness or domestic violence; the money is to be distributed via Section 8 Housing Choice Voucher Allocation to PHAs	\$7.2 Billion
HUD	Housing Counseling	Grants to housing counseling intermediaries, no more than 15% to NeighborWorks America	\$.1 Billion
HUD	Homelessness Assistance & Supportive Services	Funding to cities & counties for supportive services, emergency shelter grants, affordable housing construction, and the conversion of hotels and motels for homeless populations; distribution model follows the HOME formula	\$5 Billion
Treasury	Housing & Utility Assistance	Funding for rental and utility assistance to states , territories, counties, and cities (allocated pursuant to the CARES Act) to help stabilize renters during the pandemic and help rental property owners continue to cover their costs.	\$26.2 Billion

(Source: 2021 NLC City Summit presentation)

SHELTER

In addition to increasing the housing stock with diverse options (SROs, ADUs, behavioral and mental health supportive housing, low-income units, etc.), there will remain a need for emergency sheltering. Balancing attention on this need with ultimate housing solutions can be challenging. Quick fixes and reactive measures are attractive but often non-effective in the long run. Both the private and public sectors have vested interests for immediate action. However, an imbalanced approach may unnecessarily divert resources without achieving the goal of reducing homelessness. Our understanding from speaking with Spokane City officials is that there is a belief that Spokane currently has adequate emergency shelter capacity in the city that allows homeless individuals an option to sleeping on the streets. This is worth a deep-dive discussion and documentation of shelter beds so that decision makers, community members and providers are in concurrence or at least understand this to be the case. If not, the discussion could spur addition initiatives in this area.

This is important considering the 2018 Martin v. Boise U.S. Court of Appeals decision for the Ninth Circuit in response to a 2009 lawsuit by six homeless plaintiffs against the city of Boise, Idaho,

regarding the city's anti-camping ordinance. The ruling held that cities cannot enforce anticamping ordinances if they do not have enough homeless shelter beds available for their homeless population. In 2019, the U.S. Supreme Court declined to hear an appeal of the case, leaving the precedent intact in the nine Western states under the jurisdiction of the Ninth Circuit (Alaska, Arizona, California, Hawaii, Idaho, Montana, Nevada, Oregon, and Washington).[*Wiki*]

Discussions throughout the country about sanctioned tent cities, tiny homes, and one-stop mega homeless centers to combat homelessness are occurring. Each of these approaches, though attractive may in reality impede long-term and sustainable solutions. At the same time, many cities, including Spokane, could benefit from some immediate actionable initiatives to augment ongoing efforts to provide relief other than tent cities and other quick fixes that have proven to expose homeless individuals to predatory environments (drug dealing and human trafficking as examples).

It is worth noting the following two best shelter practices to guide such emergency responses:

- 1. All emergency housing models should focus on housing outcomes.
- 2. This emergency support works best in smaller, population-specific sites <u>dispersed</u> throughout metro areas rather than all services being lumped together in certain areas such as downtowns. Targeted co-occurring MH/SUD with an attached shelter while in treatment has proven to be a best practice as well. In this case individuals are housed during treatment and are helped to navigate to housing while in treatment as well. Reasons include:
 - a. The number one reason people report for not accessing available shelter is that shelters are too big.^x Simply building it does not mean that people will use it.
 - b. Co-housing subpopulations creates unintended negative consequences. For examples: victims of violence face accessing services at the same site where the abuser is being helped. People with paranoid schizophrenia may find sleeping in large congregant sites a challenge. Sex offenders may co-locate in large congregate areas where there are youth or other vulnerable populations.
 - c. Smaller sites have less negative impact on neighborhoods. Key to this is that each site implements a "no walk in/off" policies that prevent loitering problems in the neighborhood. When properly constructed and operated, and bed capacity is held to a 100-150 maximum, it has been demonstrated that neighborhood associations are willing to support such sites. You already have evidence of this with at least one of your service providers in Spokane.
 - d. Best practices discourage using shelters for service provision that was intended to be provided elsewhere (National Center for Biotechnology Information^{xi}).
 - e. It avoids institutionalizing people. Many citizens are overwhelmed by daily housing challenges when they return from incarceration. Some may even choose to commit a crime to return to the jail where things were easier because "everything was provided in one spot." Concentrating services at a single site does not help individuals learn to navigate into community systems which they will need to use once housed.

f. Around the country, cities are trying to revert to dispersed, smaller, service-specific sites. Examples include:

D.C. demolishes mega site in favor of smaller sites https://www.washingtonpost.com/local/dc-politics/this-is-a-home-first-of-sevennew-homeless-family-shelters-opens-in-dc/2018/09/26/8813e14a-c1aa-11e8b338-a3289f6cb742_story.html?noredirect=on

Louisville wants smaller, multi-site system https://www.courier-journal.com/story/news/politics/metrogovernment/2019/05/08/louisville-homeless-city-wants-multiple-low-barriershelters/1128881001/

Salt Lake City divides its one-site into three

https://kutv.com/news/local/3-new-homeless-shelters-nearly-completed-in-saltlake-area

In Spokane, we heard positive comments and enthusiasm for the initiative to move the youth shelter out of downtown and closer to the community college campus. This seems to follow and be in line with best-practice models. Siting services specific to youth near academic opportunities is seen as a smart, efficient and response to the desires of the youths themselves. Opportunities may exist for such an approach with other sub-populations. All the while, stream-lined access to equally dispersed and appropriate housing should remain the highest priority of investment of time, energy, and monetary resources. Otherwise, the shelter system becomes a warehousing system without impacting homelessness to the fullest extent possible.

INCOME

Throughout the conversations, employment and income were rarely topics raised by interviewees, despite employment and income being vital to a homelessness response. The unemployment rate in Spokane for September 2021 was 3.5%, ^{xii} yet this rate does not account for people who are unemployable for reasons such as physical or mental disabilities. At least thirty-four percent of people experiencing homelessness in Spokane also have severe mental illnesses. We believe this percentage may be higher based on studies from other cities. This indicates that a comprehensive plan should include meaningful disability income, as well as training and employment for those able to work. Both approaches must have access to affordable housing options if income is to lead to (supportive) housing.

INTERVIEW RESPONSES

Seeking thoughts and opinions about what is working, what is challenging and what opportunities there are in Spokane were the primary aim of conversations held on October 24-26, 2021. Input offered by interviewees during these sessions and observations are detailed below, grouped together where comments are relational and paraphrased in certain cases to protect confidentiality while retaining the spirit of the messages. Where comments were made by multiple people, a parenthesized number is given (x) to indicate this.

WHAT IS WORKING

Comments from interviews (from our notes and recollections):

- Good relationships between Spokane Housing Authority and providers.
- Providers and the City did really good work responding to the pandemic by standing up emergency shelters.
- (2x) There are organized monthly meetings with providers; more coordination and rigor would make these more impactful and effective.
- COVID-19 monthly meetings brought partners together and showed what can happen with robust collaboration and efficient use of resources. We met some tired folks.
- Most service providers have good individual working relationships with the City Administration, Council, and neighborhood associations. They wish these entities could work better together.
- Business partners have the will, passion, and resources, and they are ready to act. They want more to be done and to have a more comprehensive and understandable plan that can generate buy in and support from the community. They are genuinely interested in the entire city and county, not just the block where their business is located.
- There are partners outside of government who have helped convene past discussions who are willing and able to continue those dialogues post COVID emergency response. Avista apparently did some great work in this area in 2019.
- Landlords are willing to work on homelessness solutions. They want to be a bigger part of the solution. They might need some financial and managerial backstops or support from Government in this regard.
- Catholic Charities is providing more robust Medicaid services that is a good thing.
- Empire Health Foundation is doing good work.
- Spokane Regional Stabilization Center (\$9 million) is going to be a good thing.
- Spokane is ready to get "from here to there" on the issue of homelessness.
- Guardians Foundation has had success with neighborhood relationships, accountability with neighbors.
- The Bridge Program and Youth Shelter were both good ideas.
- The women's shelter downtown is a positive programmatic approach and a good neighbor.

OBSERVATIONS

- There is strong community interest in homelessness (87% in voting poll). This can be mobilized for action. Everyone we met with seemed genuinely interested and willing to work towards better outcomes. Not every city can say that, so this is good news for Spokane.
- Eastern Washington University helps with the Point-In-Time Count. There is opportunity for deeper research collaboration with the universities. D. Patrick Jones, PhD -Executive Director, Institute of Public Policy & Economic Analysis Public Administration, came up in two conversations as someone who has helped with data informed decision making in the past. His contact information is: dpjones@ewu.edu 509.828.1246. We did not contact him as part of our site visit or this report.
- Incentivizing property owner participation in voucher programs (a strategy identified in the 5-Year Plan) may increase housing stock availability. As an example, in Albuquerque, our relationship with the apartment association was key as we reduced unsheltered and chronic homelessness. The executive director of that association was a key stakeholder and really helped drive our initiatives in this regard. Incentives for landlords would help greatly in this regard.

WHAT IS CHALLENGING

Comments from interviews (from our notes and recollections):

SYSTEMS

- (8x) Government entities are very capable, working hard and making progress in some areas, but, as in other cities, it is perceived that politics can and has gotten in the way of progress at times. Even though there are differing thought processes and approaches by different elected officials, it would be good if politics could be set aside more often to find some consensus and compromise on the critical issue of homelessness. These comments were not made regarding any specific elected official or branch of government, but the comment was made by many of the folks we interviewed, including those in government. This is not unique to Spokane, and we felt that the elected officials we met were all willing to work towards compromise. We certainly had to do this in Albuquerque as we crafted solutions. We ended up with a diverse political spectrum of people working towards commons goals. We also heard several comments regarding the fact that the organizational structure that is designed to tackle the issues of homelessness is complicated.
- We heard the need for alignment both inside and outside of government. Because there are so many moving parts, by necessity in some cases, the "system" tends to react with less than robust planning at times (or fails to act on plans created that could work if fully implement and adhered to over the long term). There are many points of leadership creating similar—and sometimes competing—lines of work.
- Through the brief interviews it appears that there are no less than eight governmental leadership teams with some overlapping plans and oversight regarding housing and

homelessness:

- City Administration
- City Council
- City of the Valley
- Continuum of Care Board (CoC)
- Community Housing and Human Services (CHHS) Board
- Neighborhood Housing and Human Services (NHHS) Department
- Regional Governance Group
- Spokane County Community Services, Housing and Community Development Department (CSHCD)
- It was highlighted that coordination of funds and resources must be done. All parties need to know which entity will support what part of the work and for what length of time. Length of time is key to build sustainability strategy. This also builds accountability for all providers, government, and nonprofits when clear lines of responsibility and authority are developed, communicated, and tracked.
- Additional work to reduce gaps and redundancy through coordinated efforts was mentioned by several people we interviewed, including those inside these organization.
- CHHS is understaffed but is working hard to fill these vacancies. They are faced with the same issues as many city organizations which include difficulty attracting staff at the pay scale offered by government. COVID has exacerbated the situation for several reasons. This is a department that relies on grant funding to a significant extent, so the lack of staff to apply for grants or spend down grants already awarded potentially leaves opportunity on the table. This staff shortage is a priority of the administration, and it appears it is aggressively addressing the situation.
- (5x) Coordinated Entry System is sometimes clogged and needs transparency for all providers. Other than Catholic Charities and SNAP, providers too often cannot identify lower-scoring clients who might be able to access resources that are appropriate to needs. The process overly favors the most critical and needs improved service structure so individuals can get the help they need before they find themselves in a critical situation. Real time data (as is being done in Houston) is a must to make this effective.
- (4x) The Continuum of Care (CoC) is made up of expert volunteers with little or no paid staff support. This has somewhat hindered the work of implementing the 5-Year Plan.
- (3x) DATA: We need measurable outcomes, not just lists of what we are doing. There is a need for better sharing of data people could be helped sooner. Better matrixes are needed to show how limited resources are being allocated to providers,
- Currently, code enforcement agencies are forced to play "cat & mouse" with encampments.
- Money is not the biggest issue alignment is the issue.
- It was mentioned several times that some rank-and-file staff members in government

felt personally attacked in the media – this was very concerning for them and was perceived as hurting morale even among staff who were not included in the perceived attacks.

• Request for Proposals (RFPs) have shifted from unifying to being competitive which can create gaps and redundancies in services provided.

HOUSING

- (5x) Some said there is need for more Section 8 housing vouchers, others said there are enough vouchers, just not landlords willing to take them. Eighty percent of Spokane includes census tracts that are eligible. The waitlist closed in 2015 with 800 on the list and has not re-opened since. There is both a lack of vouchers and a lack of housing units. Spokane needs hundreds of new low income or vouchered rental units.
- Several expressed the need for more dispersed supportive housing.
- Some people interviewed expressed a resistance to supportive Housing First models. It appears there is a notion that Housing First simply means only warehousing people with no or low barriers. Note: most successful Housing First models include robust services these services are the key to any Housing First model. Having correct embedded supports in housing interventions was pointed out as a problem.
- Locations of housing are poorly placed in some circumstances.
- With the I-90 interstate work, over 200 West End families were displaced from affordable housing with no real alternate housing options.

SHELTER/SERVICES

- (3x) The community of Spokane spends a lot of resources on shelter beds. One person suggested that \$120-\$125 million is spent annually in Spokane (through multiple sources) for 1,200 shelter beds. "We have added beds, but homelessness has increased." A more efficient use of resources needs to be explored. Spokane Resource, the HUD EnVision Center, has received over \$7.68 million since opening, but several questioned if these resources were maximized to create the best possible outcomes.
- (Multiple) There are too many homeless services concentrated downtown.
- The areas around House of Charity tend to attract drug dealers and other predators who target the homeless population served there. More services are helping. Note: Our interview with Rob from Catholic Charities is scheduled for late November – therefore his comments are not included in this report.
- Building shelters is not cost effective, especially without services, to help people navigate to better outcomes. Warehousing people is not the way to go. Housing First models do not imply housing without services.
- We need a balance of service options along a continuum that supports those who can advance and supports those who cannot, rather than only helping people who have fallen into extreme circumstances.
- Spokane needs an intake shelter to help meet the needs of the community by helping people be seen, triaged, and helped efficiently and effectively.
- There are not enough mental health and substance abuse programs available for

people who are chronically homeless.

• The concept around "if we build it they will come." There is lots of discussion around needing more housing - yet there is a perception and, some of it appears to be true, that the more services and housing we provide the more attractive we become to the chronic homeless.

COMMUNITY

- Homelessness has been over-politicized in Spokane to the detriment of potential solutions.
- Hospital emergency room capacity is challenged. This creates an opportunity for partnerships with healthcare providers.
- We need the business community to lead, trust, and buy into a unified plan and have the patience and staying power to see the initiatives through.
- If efforts are perceived as "sweeping people around," the community will not support or help to make solutions sustainable.
- Community faith in the response to homelessness needs bolstering through inclusion in the process and better communications about what actually is being done and what is proving to be effective.
- Better communication of a unified plan and proven results to constituents and community would help reduce NIMBYism.
- Downtown Spokane is still primarily a 9-5 business district not so much a live/work/play area. This makes the homeless situation more visible.
- COVID displaced some live/work efforts downtown.

OTHER

- This is a decades long problem, and we did not get here overnight. We need patience to get back where we want to be. Knee-jerk reactions will not help. We need a plan that most people can buy into.
- It will be difficult for Spokane to "build its way out" of homelessness. We also need more programs and services to get people back on their feet when possible.
- Do not do homeless encampments like LA and other West Coast cities these have proven to be disastrous in many cases.
- In the past a study and interviews were conducted with homeless people downtown:
 - Showed a changing culture in downtown as mostly lawless young men
 - o 2/3rds said addiction led to their homelessness
 - o Low-impact crimes like auto break ins and theft are rarely prosecuted
 - o 38-40% vacancy rates in downtown Spokane are a detriment
- The influx of drugs has been a big driver of the homelessness issues.
- More homeless are carrying weapons for self-protection
- There was some belief that the homeless population migrates into Spokane from other areas.

- Build initiatives that reward self-help and progress driven by individuals themselves.
- The bottom of the safety net has fallen out it seems there is no bottom anymore.
- It would be good if Jewels Helping Hands would participate more with other providers and discussions. Their input is valuable.
- There was a unique program started in 2015 (Referral Voucher Program) RFP was issued for providers who could provide responsible renter training and housing location services (dispersed throughout the community).
- There is a deep need for role clarity and ownership in the homeless space as it pertains to the multiple municipalities, non-profit housing providers, and service providers. The hierarchy among the "type" of homeless they each will manage is staggering, and they are ultimately not fulfilling their mission and or being held accountable to the use of funds they receive to serve.

OBSERVATIONS

- Elected leaders seem genuinely interested in working better across branches of Government. Look for opportunities for collaboration and success in this area.
- Some people we interviewed are concerned about buzzwords like "shelter resistant" and other language that seems to them to imply that all homeless people have the ability and wherewithal to simply self-correct their situations. Breaking down perceived divisive language might help to build consensus on future initiatives.
- Due to a lack of CHHS staffing and difficulty in finding qualified applicants, money is being left on the table in the form of indirect cost revenue (up to 78%) due to staff vacancy rates. It appears there are strong efforts underway to rectify this and new staff are being added (not sure at what rate).
- There is strong potential for investment by hospitals and MCOs in supportive housing. There could be a model wherein cost savings from homeless initiatives (less people in emergency rooms, for example) could be reinvested by the health care providers to help sustain the programs that are working. It was highlighted that MCOs need to be embedded into the payment model. They have the most benefit to having chronically homeless people in housing. They are not part of the payment structure of this work. A study by EWU or others might bolster this partnership. Example: We were told that Providence Healthcare is providing hospital beds (expensive) for homeless people who have nowhere to go. This might provide the basis for a good discussion on better ways to approach issues.
- Properly balanced and transparent, the Coordinated Entry System can free up dollars that will increase resources for those who are less in need (i.e., score lower on the Vulnerability Index). The CoC could use some paid staff to run data, plan, and communicate in support of volunteer experts/board members.
- Spokane City Government (specifically the City Council) has a great deal of direct control over Continuum of Care federal grant dollars. Some cities have effectively passed control of grant dollars to designated non-profits to manage through an RFP

process, which can effectively de-politicize decisions and put critical decisions in the hand of career profession in this very specialized area of expertise. Cities still maintain oversight of the funds as they must, but the day-to-day decisions are trusted to non-profits who are then held accountable for using the funds wisely to make the largest impact possible. Spokane may want to look at this scenario for how CoC dollars re allocated to providers.

- There were differing perspectives about whether to follow an accountability-only approach vs. no accountability for people receiving support for homelessness. It is possible to provide both in a true continuum of care. For many, the continuum will involve "up-stream" interventions, assisting people in job training and increasing income. For some, adding "pain to incentivize achieving gain" will not work because of the severity of mental/medical/behavioral conditions, or even simply old age.
- A continuum that assesses levels of personal capacity and then assists with appropriate support would be helpful.
- Housing First could be defined and executed in Spokane to include true supportive service not just warehousing of people experiencing homelessness.

WHAT COULD WORK (Short, Mid- & Long-Term)

Comments from interviews (from our notes and recollections):

- (5x) We need zoning codes that allow for new housing types and infill.
- We need for City Council and the Administration to continue to work together to set and support a community vision and direction.
- Incentivize re-use of surface parking lot areas (there are 76) for market-rate infill that will free up affordable housing.
- Extended supportive treatment and services (beyond two-week detox).
- Good neighbor agreements that prioritize safety and low impact so that homeless initiatives are not all packed into the same areas of Spokane or downtown.
- High-dollar investments could reduce chronic homelessness and achieve faster throughput from a finite shelter stay into supportive housing. Low-dollar investments could focus on upstream interventions to prevent homelessness, or rapidly rehouse.
- San Diego embraced "family unification" as a successful and humane strategy.
- Dispersed service and housing locations (not all in one concentrated space).
- We need to breakdown and communicate solutions in terms of short, mid, and long term so the community can better understand the breadth of the issue and how it can be tackled over the long run.
- The downtown business leaders should signal a holistic approach.
- Marysville, WA, put together teams of police and social workers and then implemented a "three strikes" ordinance that helped lead people to services.
- One interviewee noted the progress Boise, Idaho has made.
- The Bell shelter in Los Angeles has a "Way out" bridge housing program that is worth a look.
- "Houston did well" when they consolidated efforts, broke down silos.
- Co-occurring treatment for more than 2 weeks is needed (60-90 days would be best).

- Placing people in jobs is possible once they have stabilized in housing.
- The transit hub being downtown does create a homeless situation that could benefit from more attention and connection to services.

OBSERVATIONS

Short-Term:

- Unify all existing plans into one to reduce gaps and redundancies (will take months).
- A small and immediate focus on medically vulnerable persons experiencing homelessness may create some much-needed success and associated stories to build support in the community. Using an outside foundation to facilitate an ongoing (small) strategic leadership team of providers, business and government which spearheads all efforts could advance measurable progress and build community support.
- Establish a strong public messaging plan of data, direction, and accomplishments.

Mid-Term:

- Unite City contracts. This means using same measures and definitions of scopes of work across all contracts, focused on two or three shared goals. City contracts could offer alignment to drive service unity. Developing a unified plan across service providers' areas of expertise and focus can build community confidence and improve measurable outcomes. RFP awards should include weighted scoring that favors collaboration and rewards shared definitions, data and outcomes.
- Add professional paid CoC staff who represent all providers and are responsible for data-sharing and Coordinated Entry System.
- Gain local data & research that demonstrates cost-savings and effectiveness of focused reduction in chronic homelessness and number of unsheltered people.

Mid- and Long-Term:

- More dispersed, sub-population specific shelter beds (women, families, men) appear needed. "Good neighbor" policies with neighborhood associations where homeless facilities are located can increase public support. Assurances may include those properties are managed to minimize negative impacts, such as no walk-in policies to prevent loitering.
- Adding a dedicated service transport system for clients to access dispersed housing and supportive services could aid in neighborhood low-impact efforts and unify service integration.
- Spokane could expand some of its transitional housing opportunities.
- Research potential adjustments to local zoning codes that allow for more infill and help alleviate challenges from the statewide Growth Management Act. This is a great opportunity for public/private/provider partnerships.
- Cross-sector financial support for affordable housing units and locally controlled housing vouchers may advance Spokane's housing outcomes. This could allow Spokane to determine use that is not dictated by HUD vulnerability requirements.

Other

- There is a lot of good energy in and between government, providers, and the business community to get back to work on an updated 5-year plan now that COVID has been managed to the extent possible. Adding lessons learned from the pandemic response would be valuable.
- Empire Health Foundation has a role to play in a unified homelessness response.
- Avista may be a great, neutral party to bring together a small, strategic team to enact an effective, coordinated response as they did pre-COVID in 2019. Continue this work rather than reinventing all processes.
- Successful housing outcomes can improve as clients recover in lower-cost respite care shelter beds. Hospitals may be willing to invest in extended care treatment operated by service provider community to improve long-term outcomes and free up hospitals beds.
- There is an important role for the faith-based organizations to play, alongside businesses, government, and service providers.

<u>Note</u>: see Addendum for additional content from an interview conducted with Catholic Charities after this initial effort.

CONCLUSION

From an outside perspective and from our experiences we offer a few comments and lessons learned as follows:

Spokane is a beautiful city that has a homelessness issue that deserves a robust plan of action. It is also apparent you also have the partners, providers, and local leadership to do just that. There is no single thing you can do to solve this most challenging of issues, but by combining your existing resources and programs with new initiatives and by streamlining and coordinating your efforts you can make significant progress over time. This will entail bolstering efforts that currently work, eliminating programs that don't and better engaging your partners, providers, elected officials and local business and neighborhood leadership to rally around proven solutions and best practices.

It will take political, and community will and compromise and your efforts will suffer if you sacrifice good ideas in search of perfect solutions. Some ideas are included in this report; however, you will have to search out and implement ideas and initiatives that work for your specific circumstances and community. Look for ideas that are proven to work and be willing to be agile and pivot when adjustments need to be made. This is easy to say but hard to do, it is not inexpensive, and it won't happen overnight; but if you and your community can find a way to move forward together the people of Spokane who you serve will benefit greatly.

Thank you for the opportunity to be a small part of your efforts. It has been a great honor and we look forward to continuing our conversations. We wish you all the best.

Regards,

Richard "RJ" Berry President, Berry Consulting, Inc.

ADDENDUM TO REPORT

<u>CLARIFYING DEFINITIIONS AND THOUGHTS</u> (as requested by client after initial report preparation):

<u>Sheltered Homeless:</u> People living in an emergency shelter, transitional housing, using motel/hotel voucher, or a safe haven as defined by HUD as a form of supportive housing.

<u>Unsheltered Homeless</u>: People experiencing a primary nighttime residence that is public/private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

According to HUD P.I.T. Count 2020 results (the most recent year available on the HUD Exchange), WA-502 Continuum of Care (Spokane City and Spokane County) reported the following numbers:

Total homeless: 1,559 Total sheltered: 1,018 Total unsheltered: 541 Chronic homeless, total: 485 Chronic unsheltered: 267 Chronic sheltered: 218

Given this data, Spokane Could see good impact (financial savings and visible decrease of folks on the streets) by focusing on housing for the 267, if not the 485. Although the Spokane team may want to save "top priorities" for a broader community conversation, two good starts to consider might include:

1. One unified plan for all entities (not biggest immediate impact, but other impact will be undermined/short-lived without this)

2. Focus on housing—with support—highest cost-savings sub-population (chronic, unsheltered, medically vulnerable)

Unifying City contracts along with the filling of vacancies a city departments, additional staffing at CoC to oversee a process and one, shared and ongoing public messaging might also be worth a look as far as priorities go.

ADDITIONAL REMARKS (paraphrased) FROM CLIENT TEAM MEMBER AFTER INITIAL REPORT REVIEW

- While housing addresses a portion of the population we will fail if we expect housing to be the panacea.
- The 'problem' is people on the street i.e. those that are unsheltered. That number is much smaller than what is reported here. Much of our focus should be on those that are unsheltered.

Note: See response above to original client comments: *Given this data, Spokane Could see good impact (financial savings and visible decrease of folks on the streets) by focusing on housing for the 267, if not the 485.*

• Regarding unsheltered, much of what we see in the unsheltered population include the shelter resistant population (people who refuse services). No matter how many beds you have or

units you build there will be shelter resistant population. This is a policy problem. If you allow this behavior, it will persist – and has.

ADDITIONAL REMARKS (paraphrased) FROM ROB McCANN, CATHOLIC CHARITIES OF EASTERN WSAHINGTON AFTER INITIAL REPORT REVIEW

Due to scheduling issues and other delays, our team was able to have a discussion with Rob McCann, Executive Director of Catholic Charities on January 4th, 2022. With Mr. McCann's permission we are inserting his paraphrased comments as an addendum as follows:

CONVERSATION SNOPSIS

Berry Consulting Listening Session with Robert J. McCann, CEO and President, Catholic Charities Eastern Washington (Tuesday, January 4, 2022).

Catholic Charities Eastern Washington (CCEasternWA) has previously published a comprehensive report titled "Fair Questions and the Truth About Homelessness in Spokane" (June 2019, updated June 2021). Mr. McCann referred us to this document as a primary source for input from CCEasternWA's perspective. During the listening session, the following highlights were emphasized.

Pros:

- Homelessness as an issue has grown in public awareness and is currently front and center as a top priority to address.
- This is a finite issue that can be solved. There will always be homeless and daily emergent cases of homelessness, but we can effectively shelter and house people already experiencing homelessness. Spokane can solve homelessness, even if ending it altogether is not a realistic expectation.
- A positive critical mass of top donors, nonprofit providers, business leaders and public officials has coalesced to act, and that's a good thing for Spokane.

Challenges:

- Zoning laws are restrictive in some cases, preventing potential group and/or multi-unit living quarters that include on-site supportive services.
- Service provider agencies work well together. However, evolving ideologies and interests change which sometimes means progress is slowed. Following a unified and long-term plan could produce durable results.
- Spokane currently does not have enough shelter beds to meet the requirements set forth in Boise vs Martin. Note: The ruling held that cities cannot enforce anti-camping ordinances if they do not have enough homeless shelter beds available for their homeless population.

Opportunities:

• CCEasternWA has an impressive 93% success rate in sheltering and housing people. However, the 7% who fail do so with a significantly disproportionate and high-cost impact. Investment in more mental health and treatment-based beds would be a critical part of a comprehensive plan to decrease the number of people living in crisis on the streets. The number of such needed beds for people living with a mental health crisis is reasonably attainable—approximately two dozen or so—and would complement a multi-prong, coordinated approach to shelter, housing and service

strategies.

- There is a need to equip multiple agencies with the capacity to build and provide shelters and housing and to double down on execution. CCEasternWA has encouraged this and continues to be willing to help other agencies might respond to grant opportunities and tax credit scenarios. CCEasternWA's strong expertise can be a valuable asset to other agencies working to build capacity. Doing so not only broadens and strengthens the provider community's ability to respond; it also gives clients shelter and housing options.
- There is opportunity to work with CARES Act dollars to build needed shelter and service space. This facility could be outside of downtown and would be very meaningful.

Appendix A

<u>Cost Study Documenting Savings for Albuquerque Heading Home - Institute of Social Research, NM</u> (emailed to WTB as a pdf file)

ⁱ Persons interviewed: Oct 24-26, 2021

Phil Altmeyer, Executive Director (The Union Gospel Mission) Alisha Benson, Chief Executive Officer (Greater Spokane Incorporated) Michael Cathcart, Spokane City Councilmember Brian Coddington, Director of Communications and Marketing (City of Spokane) Eric Finch, Chief Innovation and Technology Officer (City of Spokane) Skyler Brown, Finance Analyst CHHS (City of Spokane) Kirstin Davis, Acting Deputy Director of NHHS (City of Spokane) Roy Koegen, Partner (Kutak Rock) Larry Stone (The Stone Group) Steve MacDonald, Community Economic and Development Director (City of Spokane) Robert McCann, CEO and President (Catholic Charities Eastern Washington) – this meeting was not scheduled with Berry Consulting in time for this report. Addendums to this report follow so as not to delay delivery of the report. Kristine Meyer, Executive Director (Avista Foundation) Christopher Patterson, President (Breakthrough) Pam Parr, Executive Director (Spokane Housing Authority) Johnnie Perkins, City Administrator (City of Spokane) Major Ken Perine, Executive Director (The Salvation Army) Mark Richard, President (Downtown Spokane Partnership) Andrew Rowles, Vice President (Downtown Spokane Partnership) Ariane Schmidt, Owner/Principal (Integrate Technology) Fawn Schott, Chief Executive Officer (Volunteers of America) Mike Shaw, Chief Executive Officer (The Guardians Foundation) Ellen Smith, Director of Operations (The Guardians Foundation) Mike Fagan (The Guardians Foundation) Ben Stuckart, Executive Director (Spokane Low-Income Housing Consortium) Darin Watkins, Government Affairs Director (Spokane Association of Realtors) Betsy Wilkerson, Spokane City Councilmember Nadine Woodward, Mayor (City of Spokane) Alisha Benson - CEO (Greater Spokane) Katy Bruya – SVP/Chief HR Officer, Washington Trust Bank Chris Patterson – Community Solutions Advisor, Washington Trust Bank Additional Interview: Jan 4, 2022 - Rob McCann, Executive Director, Catholic Charities of Eastern Washington

ⁱⁱ USICH is the federal agency charged to prevent and end homelessness. It coordinates across national, state and local

governments with public-private partnerships to discover and implement best practices based upon the most current evidence and research.

ⁱⁱⁱ NAEH houses the Homelessness Research Institute, which is co-chaired by Dennis Culhane, PhD (Actionable Intelligence for Social Policy, University of Pennsylvania), one of the nation's current leading experts in homelessness research and policy.

^{iv} HUD 2020 Continuum of Care Homeless Assistance Program Homeless Populations and Subpopulations, WA-502 Spokane City and County CoC Point-in-Time Date: 1/23/2020.

^v "State of Homelessness: 2021 Edition", National Alliance to End Homelessness.

^{vi} The Spokesman-Review, September 9, 2021.

^{vii} Washington Center for Real Estate Research, Spring 2021.

viii Growth Management Act WAC Update (https://www.ezview.wa.gov/site/alias 1996/37681/default.aspx)

^{ix} "<u>Is Unsheltered Homelessness About to Increase in Your Town? Much Will Depend on Decisions We Make Now.</u> -<u>National Alliance to End Homelessness</u>", Sharon MacDonald, National Alliance to End Homelessness, October 26, 2021.

[×] "The Emergency Shelter Learning Series: The Critical Role of Emergency Shelters in a Crisis Response System", National Alliance to End Homelessness, 2017.

^{xi} "Homelessness, Health, and Human Needs", Institute of Medicine (US) Committee on Health Care for Homeless People, National Academies Press (1988).

^{xii} "Labor Market And Economy Analysis", Washington State Employment Security Department, October 26, 2021.