



# Skagit County North Star Project

Status Report & Summary of Leadership Interview Findings

June 2, 2022



tenfold  
HEALTH

# Agenda



- Welcome & Introductions
- North Star Project Overview
- Review Key Themes
- Feedback & Discussion
- Wrap-up

# Status



## Skagit County Phase I: Workplan (Living Document)

Key Actions	Responsible Party	March	April	May	June	July	August
<b>Leadership Perspective</b>							
Draft key interview questions	Tenfold / Skagit Co.	Shaded					
Interview selected elected officials and leadership from Anacortes, Burlington, Mt. Vernon, Sedro-Woolley, and Skagit County	Tenfold/Skagit Co. Cities/Stakeholders	Shaded	Shaded				
Synthesize feedback from interviews	Tenfold		Shaded				
Draft a non-binding Call to Action and Workplan	Tenfold		Shaded	Shaded			
Confirm a non-binding Call to Action and Workplan	Tenfold/Skagit Co./Cities			Shaded			
Solidify membership and formation of project Steering Committee	Skagit Co.			Shaded	Shaded		
<b>Milestone:</b> Executive Summary Call to Action and Workplan to be shared with local government leaders and stakeholders	Tenfold				Shaded		

## Map Current Resources & Gaps (Client Perspective)

Review all relevant data (reports, dashboards, results, etc)	Tenfold			Shaded			
Interview regional subject matter experts and clients (BH and housing)	Tenfold			Shaded	Shaded		
Draft a diagram and description of the current state	Tenfold				Shaded	Shaded	
Review/edit the current-state diagram and description	Tenfold/Skagit Co. Cities/Stakeholders				Shaded	Shaded	
Finalize the current-state diagram and description	Tenfold					Shaded	Shaded
<b>Milestone:</b> Current-state diagram with brief overview/description presented to Steering Committee	Tenfold/Skagit Co. Cities/Stakeholders						Shaded

# 46 Interviewees



- County Commissioners
- Mayors
- County Officials
- Sheriff's Department/ City Law Enforcement/ Fire & EMS
- K-12 Officials
- Healthcare Leaders
- North Sound Accountable Community of Health
- North Sound ASO
- Population Health Trust
- Skagit County Housing Authority
- Law and Justice Officials

Interviews conducted between March - May



# Major Themes

1. Goodwill and appetite for change are high.
2. Resources are insufficient to meet the need.
3. Actions by non-profits, service providers, and behavioral health systems are uncoordinated.
4. Tightness of the housing market is a major factor, including for keeping skilled workers in the system.
5. Availability of and confidence in data is low.
6. Action is needed.

# 1. Goodwill and an appetite for change



- Several leaders referenced a sense of urgency given the rising numbers of people camping, living in cars, sleeping on sidewalks, etc.
- Though public sentiment is mixed (compassion vs. intolerance), there's a sense that the current slate of elected leaders is more inclined to collaborate than in the past.
- Nearly all interviewees described gaps in the social and health safety nets – and a desire to drive change.

# Goodwill, cont.



*"We need this process – to sit with people to come up with fresh ideas."*

*"Relationships are better now than they've been in a long time.  
It's a good time to tackle this."*

*"I want to capitalize on the energy that exists to address these problems and make the most difference."*



## 2. Resources are insufficient

- Most interviewees described gaps and shortages that make addressing the challenges difficult (limited housing, few shelter or respite beds, incomplete information, not enough skilled behavioral health workers, etc.).
- Public agencies and non-profits don't seem to have the assets, coordination, or capacity to tackle the crisis.
- Those who end up hospitalized are too often discharged back into homelessness because of the lack of options.
- Some interviewees expressed frustration about difficulties in accessing funds from the state.





# Resources, cont.



*“The lack of behavioral health providers and counselors is a huge problem.”*

*“A lot of these organizations are having a hard time with staffing.”*

*“There is no place to safely discharge patients to.”*



### 3. Actions are uncoordinated

- The lack of a shared governance or decision-making framework hinders understanding and coordination.
  - Relatedly, there isn't a shared information base that can support robust analysis or coordinated action.
- Local agencies and the non-profits they fund operate in their programmatic silos, which leads to fragmented service delivery.
- Coordinated Entry – the system HUD mandates for the Continuum of Care – is not fully operational.
- The local agencies are not fully integrated into problem-solving efforts.

# Coordination, cont.



*“Supportive housing is being built but they can’t get mental health or behavioral health providers to commit. That’s a major gap.”*

*“We have social workers who make calls to all the agencies we can think of trying to find a bed or placement for patients being discharged.”*

*“There’s no continuity.”*

*“Lots of people doing lots of great work: they’re just doing it in silos.”*



## 4. Tight housing market

- A lack of construction in recent years has contributed to a severe housing shortage.
- Most new housing is priced for the affluent; those of limited means have great difficulty finding homes to buy or apartments to rent.
- The area's growth-management framework calls for most housing to be built within city limits, and each city's approach has been siloed.
- A strong NIMBY sentiment is present, which often blocks progress on housing affordability and makes zoning and permitting decisions more fraught.

# Housing market, cont.



*“Growth management is the most dangerous ground I stand on.”*

*“Our vacancy rate is less than 1%.”*

# 5. Data



- Most interviewees said that there's no specific, fully reliable data source that they can rely on to capture the state of the system and precisely who is affected.
- The Point In Time (PIT) count seems to suggest that the sheer number of people experiencing homelessness hasn't changed, which doesn't ring true to many.
- People know that the problem is getting worse because the homeless are more visible in public areas.
- First-responders and hospitals devote considerable resources to problems related to homelessness and behavioral health.
- School data seems to be the most reliable source of information on family homelessness.

# Data, cont.



*"We don't even know what the magnitude of our need is."*

*"Data is inconsistent, sporadic, and incomplete."*

## 6. Action



- Most people expressed a strong desire to see action and not just “blue sky” plans.
- Interviewees encouraged us to deal with the tough issues – to address the land mines and not simply avoid them.
- A few visible improvements and early wins would help build public confidence, while also alleviating some suffering.
- There’s a caution about not ONLY going after quick fixes without addressing structural issues.



## 6. Action



*“We need actionable steps at the end of the day.”*

*“We need to create solutions locally because the State’s not there  
for us.”*



# Healthcare Themes

## POSITIVES

- Coordination is ramping up with agencies outside of the healthcare system, like law enforcement and the school districts.
- Teams are working hard to address the homeless problem. “Lots of good, caring people trying to do the right thing.”
- Residency programs are directly interacting and providing medical care and follow up homeless individuals.

## BARRIERS

- Hospital teams, social workers and case management, are overwhelmed by the need.
- No cohesive process connecting the dots. Must deal with too many silos.
- No safe discharge planning for this populations so long hospital stays and high readmissions/ED visits.
- Worsening pathology, both mental and physical decompensation, due to isolation during COVID.
- Little data collection or data sharing on these individuals.
- Not enough mental health capacity.



# K-12 Themes

## POSITIVES

- Good processes in place to identify housing-insecure students & families.
- Good data is collected, updated, and used.
- Coordination is happening with other systems (healthcare, CBOs, government agencies).
- Mental health professionals are embedded so less dependent on outside mental health resources.

## BARRIERS

- There is a high degree of poverty in the school districts.
- Families may decline services due to the stigma of homelessness and the fears surrounding immigration.
- The housing insecure population is the silent majority. But they are less recognized and receive less attention because the school districts work so hard to help these children.
- No enough housing for the families they serve.



# County Leaders

## POSITIVES

- Relationships among elected officials stronger than in past.
- Coordination between cities and county increasingly collegial.
- Working together on specific projects easier than working on big systems issues.
- Good community engagement lessons learned through COVID response that can help with homeless outreach.
- Some new players in town bringing new energy, ideas.

## BARRIERS

- Some long-standing “turf” and role issues between cities and county still exist.
- Overall system not as culturally competent as it needs to be.
- Shortage of affordable housing is increasingly worrisome; fixing it will require stronger city-county coordination and planning.
- County permitting processes too slow.

# First Responders

## POSITIVES

- Compassion for people experiencing homelessness and struggling with behavioral health.
- There is good flexibility and openness, with a strong problem-solving orientation.
- Success in collaborating with social workers, though still room to improve.
- Strong spirit of collaboration across jurisdictions and between groups – very little evidence of tension or turf protection.
- First responders do not often encounter homeless families and kids.

## BARRIERS

- Extreme shortage of services means first responders often have no good options for getting individuals the support they need.
- Few good mechanisms for sharing information across jurisdictions, which leads to duplicated effort and poor continuity.
- Frequently caught in the middle, expected to make problems go away but having few or no options, and often facing strong resistance from individuals.
- Need to act as social workers without training
- See the same people in and out of the system

# Mayors

## POSITIVES

- Relationships among elected officials much better now than in the past. There is a good foundation for productive partnership.
- Recent significant progress increasing emergency shelter capacity (First Step Center), with encouraging levels of collaboration and cost-sharing.
- Zoning restrictions have been loosened in some cases, for instance to allow more multi-family dwellings, but there is still a long way to go in terms of growing total capacity and making it affordable.
- There has been success in embedding social workers with law enforcement.

## BARRIERS

- Weak alignment (+ friction) between local authorities, for-profit builders, non-profits, etc.
- Despite growth in shelter capacity, still large gaps in the support network. People often have nowhere to transition to, which leads to churn and frustration.
- The cities don't have a direct role in behavioral health, but they see the need and the BH holes in the safety net.
- Strong NIMBY reactions make needed changes very difficult.
- The cities tend to trust the data that they collect, but there is less trust in data from other sources.

# North Sound ACH

## POSITIVES

- Skagit County is the right size to lead this and has the right leadership and collaboration in place to pilot something innovative.
- North Sound ACH has incorporated the “Vital Conditions” framework that could benefit this project.
- There are great subject matter experts outside Skagit County that should be used as resources when applicable.

## BARRIERS

- Covid and November floods increased homelessness and exposed weaknesses in the region’s safety net.
- LatinX and tribal communities have generally not been included in solutions-oriented projects like this – but that’s where there are significant disparities.
- People want an answer but want it to be somewhere else.
- Need clarity on the target populations.
- Overall data is incomplete and Point in Time counts are not reflective of the problem.



# North Sound ASO

## POSITIVES

- Crisis intervention – embedding social work into law enforcement. Best practice that now needs to spread.
- Communities of faith are helping individuals in recovery. Reduce stigma and community empathy and increased access to services and support.
- Positive change in attitude among elected leadership to help support and provide services to this population.

## BARRIERS

- Limited access to data – and data is not pivotal in making informed decisions.
- Fragmentation fractures care delivery. ASO is responsible for non-Medicaid. The five MCO's are responsible for Medicaid but not responsive or engaged in the community.
- Poor coordination at the ground level where services are being delivered.



# Skagit County Housing Authority

## POSITIVES

- St. Charles Catholic Church has strong ties to the migrant community (a trusted resource) and is a good source for information and services.
- The Housing Authority has had some success building new capacity, but progress has been slow.
- The Skagit Housing Authority doesn't operate in Sedro-Wooley, but there seems to be good progress there in increasing housing stock.
- The county and the Housing Authority seem to work well together when it comes to supporting the migrant population.
- The Housing Authority has a diverse workforce and is generally able to provide bilingual services to people who need them.

## BARRIERS

- Extremely low housing stock and the land available for new housing tends to be sub-optimal.
- It can take a long time and be very expensive to navigate city zoning requirements.
- Migrant population tends to move under the radar – mostly untracked and largely unseen – and receives relatively few services.
- General lack of understanding of the migrant community – many stereotypes and a tendency to think that little action is needed (“they take care of themselves”).
- Not-in-my-backyard reactions are very common.
- Across the county, there is limited expertise in how to develop affordable housing and associated resources (e.g., transportation links).



# Law & Justice Officials

## POSITIVES

- Skagit County has caring people who are dedicated to making things better.
- Burlington's First Steps project is a good example of what can be done.
- Public Health's efforts to connect landlords and tenants to funding sources.
- Opportunity to investigate if bringing back the county's mental health court could provide a benefit to this population.
- Mt. Vernon police department's dedicated social worker could be a model for other jurisdictions to follow.

## BARRIERS

- Since the pandemic, there has been a significant decrease in the number of agencies and providers for both homelessness and behavioral health. Wait times for behavioral health and housing services has dramatically increased.
- Lack any comprehensive "clearinghouse" that can help individuals get connected to the resources they need.
- Need better coordination and communication across agencies.
- Need more resources for children/teens.



# Feedback & Discussion



- Paint us a picture of the problem from your point of view.
- What works really well with the current system?
- What could be better?



# Next up



- Review a Call to Action with elected officials.
- Begin a deeper dive into available reports, data sets.
- Conduct interviews with additional stakeholders, subject-matter experts, and people on the front line.
- Begin mapping existing resources and identifying gaps.
- Form a Steering Committee to oversee this work through the end of the year.