## STAFF REPORT

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| **Agenda Item:** | 8 | **Name:** | Rachelle Celebrezze Wendy Soo Hoo Mary Bourguignon Scarlett Aldebot-Green Katherine Cortes |
| **Proposed No**.: | 2015-0177 | **Date:** | June 3, 2015 |

**SUBJECT**

Proposed Ordinance 2015-0177 would place a six-year property tax levy to fund the Best Starts for Kids initiative on the November 2015 ballot.

**SUMMARY**

Proposed Ordinance 2015-0177 would approve placing before King County voters a November 2015 ballot measure authorizing a six-year property tax levy. The property tax would be levied at a rate of $0.14 per $1,000 of assessed valuation in 2016, with an increase of three percent for each of the five subsequent years of the levy—2017 through 2021. If approved by the voters, the levy is projected to generate a total of approximately $392.3 million in revenues to fund the initiative known as Best Starts for Kids.

Best Starts for Kids is the Executive’s proposal for a prevention-oriented regional plan that is aimed at supporting the healthy development of children and youth, families and communities across the county. The proposed Best Starts for Kids levy would make expenditures for the following six categories: Youth and Family Homeless Prevention Initiative, Research Allocation, Early Childhood Allocation, School-Aged Allocation, Communities of Opportunity Allocation, and Data and Evaluation Allocation.

This is the second of several expected hearings on the Best Starts for Kids initiative.

**BACKGROUND**

According to the Executive, the Best Starts for Kids initiative would provide the resources to prevent negative outcomes in the community and put the children of King County on the path toward lifelong success. Under the proposal, the Best Starts for Kids levy funding would focus on investing early in a child's life—with the heaviest investments made for children from birth through age 5—and continuing to invest at critical points in a young person's development through age 24. The expressed goal of the Best Starts for Kids initiative is to shift from addressing negative outcomes that have already occurred—outcomes like homelessness, chronic illness, and substance abuse—to preventing those outcomes from ever occurring.

This is the second of several expected hearings on the Best Starts for Kids initiative. This staff report has been updated to include only those topics for which additional information was obtained since the May 27th Budget and Fiscal Management Committee meeting. The staff report prepared for May 27th contains additional background information, as well as information on the School-Aged Allocation, Communities of Opportunity Allocation, Data and Evaluation Allocation, and potential prorationing issues.

**ANALYSIS**

Proposed Ordinance 2015-0177 would approve placing a November2015 ballot measure before King County voters authorizing a regular property tax levy in excess of the state levy limitation contained in RCW chapter 84.55. This type of tax levy increase is commonly known as a “levy lid lift”. The measure requires simple majority approval, with no voter turnout requirements.[[1]](#footnote-1)

If approved by the voters, the levy is projected to generate a total of approximately $392.3 million in revenues to fund the Best Starts for Kids initiative.

In order to be placed on the November 2015 ballot, the Council would need to act on the proposed ordinance no later than July 20 under regular rules (assuming expedited 10-day processing) or August 3 as an emergency.

**Projected Expenditures**

Under the proposed ballot measure, Best Starts for Kids levy revenues would be used as follows:

* $16 million to fund and administer a youth and family homeless prevention initiative
* $3 million to fund research and improve outcomes for children and youth in King County
* The remaining approximately $373.3 million would be allocated as follows:
* 50 percent, or $186.65 million over the life of the levy, to be spent on strategies focused on children under 5 years old and their caregivers; pregnant women; and for individuals or families concerning pregnancy;
* 35 percent, or $130.7 million over the life of the levy, to be spent on strategies focused on children and youth ages 5 through 24;
* 9 percent, or $33.6 million over the life of the levy. to be spent on communities of opportunity; and
* 6 percent, or $22.4 million over the life of the levy, to be spent on evaluation, data collection, and improving the delivery of services and programs for children, youth and their communities.

Table 1 below shows the expected allocation of funding over the life of the levy.

Table 1: Projected Best Starts for Kids Levy Expenditures 2016-2021

|  |  |
| --- | --- |
| **Category** | **Total** |
| Early Childhood Programs | $186,650,000  |
| School-Aged Children and Youth | $130,655,000  |
| Communities of Opportunity | $33,597,000  |
| Evaluation and Data Collection | $22,398,000  |
| Youth and Family Homeless Prevention Initiative | $16,000,000  |
| Research | $3,000,000  |
| **TOTAL EXPENDITURES** | **$392,300,000**  |

For each of these six expenditure categories, staff analysis continues. This staff report focuses on updated information on the Early Childhood Programs, the Youth and Family Homeless Prevention Initiative, and Research spending categories. Further information on School-Aged Children and Youth, Communities of Opportunity, and Evaluation and Data Collection will be provided in subsequent staff reports. Staff is also continuing to analyze potential prorationing impacts.

**Youth and Family Homeless Prevention Initiative**

Because the types of human services programs that would be funded by the proposed levy can take time to be developed and begin implementation, Proposed Ordinance 2015-0177 would allocate approximately half of first-year levy collections (or approximately $29 million) to specific, one-time expenses that are related to but separate from the ongoing programs that would be funded by the levy.

Of the approximately $29 million proposed to be allocated in this way, $16 million would be reserved for a **Youth and Family Homeless Prevention Initiative.[[2]](#footnote-2)**

According to Executive staff, the Homeless Prevention Initiative would be used as a flexible fund to help families, youth and young adults avoid homelessness with the goal of serving approximately 1,200 families or unaccompanied youth per year. The intent, as presented by Executive staff, would be to contract with non-profit service providers through a Request for Proposals (RFP) process during 2016, and then draw the funds down over four years, with the expectation that if the Homeless Prevention Initiative demonstrates success another funding source would be identified. Funds would be able to be used for a wide range of services and supports – from child care to rental assistance – to help prevent homelessness.

Executive staff note that they plan to issue RFPs annually for these funds (with the goal of allocating approximately $4 million each year for four years) and that they intend to ensure that small, community-oriented providers, as well as domestic violence providers and youth-serving providers all have an opportunity to receive funds to disburse to the people they serve.

The Homeless Prevention Initiative would be modelled on the Washington State Domestic Violence Housing First (DVHF) Program,[[3]](#footnote-3) a homelessness prevention program that was funded by the Bill & Melinda Gates Foundation and coordinated by the Washington Coalition Against Domestic Violence. That program allocated $1.9 million[[4]](#footnote-4) between 2009 and 2014 to approximately 900 domestic violence survivors and their children through 13 domestic violence programs around the state, with the goal that lack of housing should not be a reason to stay in a violent relationship.[[5]](#footnote-5),[[6]](#footnote-6) Evaluation of the DVHF program found that nearly 90 percent of participants had been able to obtain or maintain permanent housing as of the program’s conclusion[[7]](#footnote-7),[[8]](#footnote-8), although the evaluation could not quantify how influential the DVHF program had been in participants’ level of success.

The proposed focus on homelessness prevention is aligned with the May 2015 update to the Comprehensive Plan to Prevent and End Youth and Young Adult (YYA) Homelessness in King County by 2020, which recommends strengthening prevention and diversion activities;[[9]](#footnote-9) and with the April 2015 draft of the 2015-2019 Committee to End Homelessness in King County Strategic Plan, which recommends making homelessness rare, brief, and one-time by focusing on prevention activities.[[10]](#footnote-10)

Staff analysis of the Homeless Prevention Initiative continues. Issues for Council consideration include:

* **Length of funding plan:** According to Executive staff, the plan is to RFP the Homeless Prevention Initiative funds in 2016 and spread the funds over four years. Since the overall levy is proposed to have a six-year term, this could lead to a two-year gap between when the Homeless Prevention Initiative funds have been expended and when a levy renewal might occur. Executive staff have noted that this funding plan is intentional, as part of the goal of transforming the homelessness system. If the prevention activities are successful, they note, they would anticipate less need for crisis intervention funds and would therefore propose realigning other funding sources at the end of the four year spend-down of the levy funds to ensure that prevention activities could continue to be funded.
* **Definition of services:** According to Executive staff the services to be funded by the Homeless Prevention Initiative would be fairly broad-based, to be defined by service providers based on clients’ needs.

**Update from May 27th Budget and Fiscal Management Committee Meeting:**

During the May 27, 2015, briefing on the proposed levy, Councilmembers asked for additional information about the Homeless Prevention Initiative.

**How will priorities be set and funding for the Homeless Prevention Initiative be determined?**

The proposed ordinance defines the Homeless Prevention Initiative as “an initiative intended to prevent and divert and youth and families from becoming homelessness *[sic]*.” The proposed ordinance goes on to specify that, “The funding will be flexible, client-centered; outcomes focused, and provide funding for community agencies to assist clients.”[[11]](#footnote-11)

Executive staff have expressed the intent to model the Homeless Prevention Initiative on the Washington State Domestic Violence Housing First (DVHF) Program,[[12]](#footnote-12) a homelessness prevention program that was funded by the Bill & Melinda Gates Foundation and coordinated by the Washington Coalition Against Domestic Violence.

As with that program, Executive staff have indicated that the funds would be distributed through non-profit community service providers that would be identified through a Request for Proposals (RFP) process during 2016. Executive staff have noted the intent that the funds would be able to be used for a wide range of services and supports – from child care to rental assistance – to help prevent homelessness.

**Is there a way to identify or ensure that a community-based funding strategy is used? Or community involvement in decisionmaking?**

Executive staff have expressed the intent that the RFP process used to distribute funding to service providers would be used to solicit proposals from service providers throughout the community so that prevention programs could be targeted to the specific needs of individual communities.

They note that the proposed initiative grew out of community support for efforts to prevent homelessness as expressed during the development of the Youth Action Plan; the development of the 2015-2019 Committee to End Homelessness Strategic Plan; the update to the Comprehensive Plan to Prevent and End Youth and Young Adult Homelessness; and the community outreach that was conducted as part of the development of the proposed levy ordinance.

**Why would Homeless Prevention Initiative funds be earmarked for four years only?**

According to Executive staff, the plan is to RFP the Homeless Prevention Initiative funds in 2016 and spread the funds over four years. Since the overall levy is proposed to have a six-year term, this could lead to a two-year gap between when the Homeless Prevention Initiative funds have been expended and when a levy renewal might occur.

Executive staff have noted that this four-year funding plan is intentional, as part of the goal of having enough funding available for prevention to make a difference. They note that according to recent analysis, nearly half of homeless families and more than half of homeless youth and young adults were homeless for the first time.[[13]](#footnote-13) As a result, Executive staff have expressed the goal of focusing on preventing people from becoming homeless for the first time as a way to reduce the number of those who are homeless and then must rely on crisis intervention services.

**What percentage of crisis needs are currently being met (or conversely, what percentage of crisis intervention need is currently unmet)?**

The 2015 One Night Count of those who are homeless that was conducted in January 2015 identified 3,772 people as unsheltered, in addition to 3,282 people in emergency shelter and 2,993 people in transitional housing, for a total of 10,047 people counted as homeless.[[14]](#footnote-14) Of that 10,047 people, 6,275 (62.4%) were using crisis intervention services on the night of the count (those in emergency shelters or transitional housing) and the remaining 3,772 (37.5%) were not able to be served by the crisis intervention system (the people unsheltered).

Recent estimates indicate that federal, state, and local spending throughout the county totals approximately $40 million each year on homeless crisis intervention services, compared with $5 million on prevention activities (as well as an additional $115 million a year on housing stabilization, including rental assistance and permanent affordable housing). Current crisis intervention services, including the funding for those services, are shown in Table 2 below.

**Table 2: 2014 Homeless Crisis Intervention Funding (in millions)[[15]](#footnote-15)**

|  |  |
| --- | --- |
| **Type of Service** | **$ in millions** |
| Day Services & Outreach | $7.37 |
| Emergency Shelter | $14.54 |
| Transitional Housing | $19.43 |
| **TOTAL** | **$41.34** |

Executive staff have expressed the goal of focusing additional resources on prevention so as to prevent people from becoming homeless and therefore lessen the demand for crisis intervention services.

They note that emergency shelter costs an average $8,000 per family and transitional housing costs approximately $24,000 annually, compared with $1,935 on average to prevent a family from becoming homeless (based on King County’s prevention pilot program). Executive staff note that more people can be helped through prevention and there is more dignity and more stability for the family or individual.

**Research Allocation**

The proposed levy ordinance would set aside $3 million "to fund research to improve outcomes for children and youth in King County." Based on the supporting documentation transmitted with the levy ordinance, the $3 million is expected to be set aside out of first year levy collections.

The intent, as presented by Executive staff, would be to contract out the entire $3 million allocation through a Request for Proposals (RFP) process in the second quarter of 2016. Executive staff state that the funds would be used to further develop neuroscience research to show how brain development occurs and how it can be positively affected, with the goal of using the results of the research to develop and test a set of best practices and tools that will allow families, caregivers and educators in King County to support brain development and learning in children from birth through early school-age years.

Executive staff also noted the intention to leverage the research funding with other contributions to conduct a large-scale study in King County that would ensure that the best practices and tools developed as a result of the research are culturally appropriate for the diverse communities in King County.

Finally, Executive staff indicated that the activities funded by the $3 million research set-aside will differ from the activities funded by the data and evaluation allocation (6 percent per year). The intention is to use the data and evaluation allocation to determine whether the programs that are funded under the Best Starts for Kids levy are achieving the intended outcomes.

Staff analysis continues. Issues for Council consideration include:

* **Length of funding plan:** According to Executive staff, the plan is to RFP the research allocation funds in the second quarter of 2016. No information was provided on the length of time the research would be funded. However, since executive staff indicated that the express intent of the neuroscience research is to inform best practices for use in the programs and services funded by the Best Starts for Kids levy, there may be an issue with timing. In other words, there may be a gap between the time when decisions on the services and programs to be funded under the Best Starts for Kids levy (for example, under the Early Childhood Allocation and the School-Aged Allocation) are made—presumably also in 2016—and when the results of the neuroscience research are available—presumably in 2017 or later.
* **Large-scale study:** It is unclear what portion of the $3 million, if any, would be directed toward the large-scale study the Executive has proposed on the cultural appropriateness of the best practices and tools developed as a result of the neuroscience research. In addition, it is unclear to what extent the large-scale study would be integrated with the activities carried out using funds made available under the Evaluation and Data Allocation.

**Update from May 27th Budget and Fiscal Management Committee Meeting:**

Since the May 27, 2015 Budget and Fiscal Management Committee meeting, Executive staff have provided additional information on the proposed use of the $3 million research set-aside.

**How will the long-term study envisioned under the neuroscience allocation differ from the neuroscience research proposed to be carried out using those funds?**

According to Executive staff, the long-term study and the research are one and the same. The neuroscience research would be carried out in the form of a long-term study, with the goal of developing best practices and tools that families and caregivers can implement with young children. Specifically, the Executive's aim is to develop best practices and tools that lead to improved language development, executive function skills, school readiness and capacity for learning STEM (Science, Technology, Engineering, and Math) skills. Of particular interest to the Executive is using the results of the research to help to close the school readiness and academic achievement gap for low-income communities and communities of color.

As noted earlier, the Executive intends to award the $3 million in research funding through a Request for Proposals (RFP) process in the second quarter of 2016. The exact scale and scope of the research would be determined through that RFP process. However, Executive staff have noted that they anticipate that the research would involve a study of a cohort of children and their families or caregivers from diverse backgrounds in King County.

As envisioned by Executive staff, under the study, families and caregivers would be provided with age-specific practices and tools that they would use with their children in the course of their daily lives. Executive staff noted that the research could be conducted concurrently with, and be mutually supported by, the implementation of other potential Best Starts for Kids Levy strategies , such as home visiting programs. The end result of the study, as described by Executive staff, would be to determine the efficacy and result of those age-specific practices and tools on brain development through the use of state-of-the-art technology and behavioral assessment.

**How will the long-term study be used to leverage additional funding, as contemplated by the Executive?**

Executive staff state that they believe an investment by the County of $3 million can leverage other “matching” funding, such as from philanthropic entities. If the County does receive "matching" funds, Executive staff noted that the funding could be used to increase the size of the cohort or extend the scope of the study.

**When are the results of the research expected to be available for use and inclusion in the Best Starts for Kids levy strategies?**

Executive staff anticipate that research findings will be made available not only at the conclusion of the study but also during the term of the study.

**Early Childhood Allocation: Support for Children** **Under Age 5, Their Caregivers, and Pregnant Women**

As noted earlier, the proposed ordinance would allocate 50 percent of Best Starts for Kids levy collections—except for the $19 million in one-time set-asides[[16]](#footnote-16)—to programs and services that provide support for children under the age of 5 and their caregivers, as well as pregnant women and individuals and families concerning pregnancy ("Early Childhood Allocation").[[17]](#footnote-17) The Best Starts for Kids levy would generate a total of approximately $186.65 million over six years for the Early Childhood Allocation.

Staff analysis continues. Issues for Council consideration include:

* **Expenditure approach:** Under the proposed levy ordinance, as with the other Best Starts for Kids funding streams, the exact expenditure of the Early Childhood Allocation would not be determined until after the levy is passed. The supporting documentation transmitted with the proposed levy ordinance only contains examples of how Early Childhood Allocation funding may be spent. Examples provided in that documentation include: support for parents and caregivers through the provision of home-based visits for new moms and babies; expanding caregiver knowledge by providing information on child development (informed by neuroscience research) in a variety of languages, formats, and media; expanded developmental screening; and supporting and expanding some existing Public Health – Seattle and King County services.

*Public Health Centers: Maternity Support Services, Family Planning, and Nurse Family Partnership*

According to the transmitted documents, the Early Childhood Allocation would include “a modest investment to sustain and expand parent and child health services that are delivered through the county’s public health centers.” Based on the transmittal package, this portion of the levy is intended to support Maternity Support Services, family planning and the Nurse Family Partnership.

According to transmitted materials, $42.8 million over the life of the levy would be allocated to support these programs. It is important to note that even assuming passage and implementation of the levy, the public health centers as a whole would continue to operate at a deficit of $16.3 million over the levy period. In addition, the remainder of the Public Health fund is projected to incur an additional deficit of $9.3 million over the same period. Therefore, the financial health of Public Health – Seattle & King County and the viability of the public health center system would remain at risk.

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| --- | --- | --- | --- |
| **2016-2021 Gap Estimates** | **Baseline (w/o BSK)** | **BSK Revenues** | **Gap with BSK** |
| Maternal Child Health services[[18]](#footnote-18) | $42.8 M | $42.8 M | $ - |
| All other Community Health Services Programs | $16.3 M | - | $16.3 M |
| *Subtotal all CHS* | *$59.0 M* | *$42.8 M* | *$16.3 M* |
| Remainder of Public Health Fund | $9.3 M | - | $9.3 M |
| **Total Public Health Fund** | **$68.4 M** | **$42.8 M** | **$25.6 M** |

Source: "Best Starts for Kids Report to King County Council" transmitted with the levy ordinance (Attachment 3 to this staff report),

Staff analysis on support for MSS, family planning, and NFP services continues. Issues for Council consideration include:

* **Expenditure approach:** Although the funding for MSS, Family Planning, and NFP are described in the transmittal package as part of the funding allocated for children under the age of 5, the levy ordinance does not actually require that any funding for MSS, family planning, and NFP be provided. The ultimate determination of which programs and services to fund under the entire Early Childhood Allocation would be made during the implementation period. As a result, the amounts actually provided for MSS, family planning, and NFP could potentially vary from the amounts described in the transmittal package.

**Update from May 27th Budget and Fiscal Management Committee Meeting:**

Since the May 27th meeting, staff has completed additional analysis of the support for Public Health services under the Best Starts for Kids Levy.

The transmittal package states that the allocation for Public Health “will fill the gap between revenues and expenditures for current MSS, WIC, NFP, and family planning services, and restore NFP and other clinic services to 2014 levels of service, which were reduced in the adopted 15/16 budget.”[[19]](#footnote-19) At the last meeting, the committee requested information on the proposal to sustain and expand service levels.

Briefly, according to Executive staff, the BSK levy would maintain MSS/WIC and family planning at current service levels. The levy would expand NFP and health educator services by restoring 2014 service levels.

The table below shows 2014 service levels for MSS/WIC (and other related services), family planning and NFP. (Health education is not reflected as it is not a medical service provided in the centers.

|  |
| --- |
| 2014 Public Health Center Service Levels |
| **Public Health Center** | **Parent Child Health Programs1** | **Family Planning** | **NFP** | **Site Total** |
| Auburn | 2,946 | 1,894 |  | 10,184 |
| Columbia | 2,161 | 702 |  | 14,554 |
| Downtown | 2,429 | 1 | 233 | 13,486 |
| Eastgate | 1,888 | 1,520 |  | 15,391 |
| Federal Way | 4,254 | 1,722 |  | 12,155 |
| Kent | 3,974 | 699 | 355 | 11,112 |
| North | 2,495 | 400 |  | 14,023 |
| Northshore | 1,729 |  |  | 3,945 |
| Renton | 3,941 | 731 | 153 | 11,387 |
| White Center | 3,507 | 2,097 |  | 8,353 |
| TOTALS | 29,324 | 9,766 | 741 | 114,590 |
| **NOTES:** 1Parent Child Health Programs include: All clients served by Public Health Center MSS/ICM, Children with Special Health Care Needs (CSHCN), DCHS Community Service Offices, Early Intervention Program (EIP) and may include some NFP clients. CSHCN, EIP programs are contracted services. |

Note that MSS/WIC services were preserved in 2015/2016 across all public health centers, so the BSK levy would maintain, but not expand MSS/WIC services beyond current service levels.

In 2015/2016, family planning services have been transitioned to partners at Greenbridge (Planned Parenthood) and Columbia and North (Neighborcare Health). At the Columbia and North public health centers, family planning is provided through Neighborcare’s primary care programming and stand-alone family planning is no longer provided. According to Executive staff, provision of family planning services would continue through these partnerships under the BSK proposal. The BSK levy would maintain, but would not expand family planning services beyond current service levels.

The 2015/2016 adopted budget reduced NFP staffing from 13.0 FTE in 2014 to 11.0 FTE. The precise service level reduction in 2015/2016 is difficult to project as only a few months of data are available, but the 2.0 FTE reduction represents a reduction in support to about 50 families at any time. According to Executive staff, the BSK levy would restore 2.0 FTE in the NFP program.

In addition, according to Executive staff, the 2015/2016 adopted budget reduced health educator staffing from 7.6 FTE in 2014 to 4.6 FTE. Health educators provide evidence-based health education and outreach related to family planning. This is a service provided by Public Health for which no community capacity or expertise exists. According to Executive staff, the BSK levy would add 3.0 FTE, restoring the program to the 2014 service level.

**Outcomes Measurement and Return on Investment Analysis**

In the "Best Starts for Kids Report to King County Council" transmitted with the levy ordinance (Attachment 3), the Executive provides examples of potential individual indicators and community indicators that could be used to determine the effectiveness of the Best Starts for Kids levy over time. Some of the individual indicators include: Increase the percent of pregnant women who receive early and adequate prenatal care to 78 percent; increase technical assistance to child care providers by 25 percent; and reduce psychiatric hospitalizations for children and youth by 15 percent. Potential community indicators include: Decrease inequities in outcomes for children and youth in King County; decrease suspensions and expulsions, from child care through high school; and decrease domestic violence.

Measuring the effectiveness of any individual or community outcome requires knowledge of the baseline measurements. Although percentages were included in the individual indicator examples, no baseline data was provided. Staff has requested additional information related to outcomes measurement from executive staff.

The same document also includes examples of expected returns on investment by strategy. For example, the document states that investing in strategies that support parents and caregivers has an expected return of $2.77 per dollar invested and investing in strategies that support high-quality childcare has an expected return of $143.98 per dollar invested. Staff has requested additional information on the specific types of programs that would result in the expected returns on investment listed in the document.

Staff analysis of this issue is ongoing.

**Update from May 27th Budget and Fiscal Management Committee Meeting:**

Since the May 27th Budget and Fiscal Management Committee meeting, Executive staff have provided additional information on the baseline data and the source of that data for the individual indicators listed in the "Best Starts for Kids Report to King County Council" (Report).

For the individual indicators relating to drug alcohol use, unhealthy weight and youth who feel they have an adult to talk to, Executive staff note that these indicators can be tracked using data gathered from the Healthy Youth Survey (HYS).  The HYS is a survey of public school students in grades 6, 8, 10, and 12.[[20]](#footnote-20)  The survey is administered in even number years; the last survey was conducted in the fall of 2014, and the most recent data are in the process of preparation for analysis but results are not yet available.

Each individual indicator in the Report, along with Executive staff's response, can be found below.

* "Increase the percent of pregnant women who receive early and adequate prenatal care to 78 percent."

According to Executive staff, 5-year combined data (2008-2012) shows that 71.1 percent of King County live births were to women who received early and adequate prenatal care. From this starting point, an increase to 78 percent of women who receive early and adequate prenatal care would represent an improvement of 6.9 percent.

* "Increase technical assistance to child care providers by 25 percent."

Executive staff indicate that the baseline data for “technical assistance to child care providers” can be gleaned from the Public Health-Seattle & King County’s (PHSKC) Child Care Health Program tracking database relating to the work of PHSKC’s Child Care Health Team. According to Executive staff, the Child Care Health Team is an interdisciplinary, specialized team that provides consultation and technical assistance to childcare providers to improve outcomes for the health and wellbeing of children so they may learn and grow to their greatest potential. Core services provided by the Child Care Health Team include:

* Technical assistance and consultation to childcare programs to improve health and safety practices.
* Education and coaching for child care providers to increase understanding of normal and atypical growth and development; encouraging early, appropriate referrals to community resources.
* Classroom observations to identify children at risk of adverse health and behavioral concerns, and technical assistance to childcare programs on health screening.
* Technical assistance and coaching on nutritional and physical activity in the childcare setting.
* Collaboration with King County Birth to Three Developmental Disabilities program to support appropriate child care accommodations for identified children.
* Support collaboration, communication, and common goals between multiple service providers for effective implementation of tiered approach to identification and intervention.
* Coaching to childcare and preschool teachers and directors to support implementation of social-emotional skill building programs and curricula.
* Professional development on trauma-informed practice in the childcare/preschool context, including
	+ Providing reflective consultation to community providers to build capacity to care for young children.
	+ Increasing targeted, site-based training to educate providers about programming for children with challenging behavior and trauma exposure.
	+ Supporting a model of onsite treatment for children and families with mental health challenges and trauma exposure.
	+ Other services provided with a “trauma-informed” lens, incorporating evidence around adverse childhood experiences (ACEs), neuroscience, and resilience.

Although Executive staff have provided information on the types of services that could be used to inform this individual indicator, it remains unclear at this time what percentage of child care providers are receiving qualifying technical assistance. Without additional information, evaluation of the magnitude of improvement for this individual indicator would not be possible.

* "Reduce psychiatric hospitalizations for children and youth by 15 percent."

Executive staff used data from the Department of Community and Human Services; Mental Health, Chemical Abuse and Dependency Services Division to determine the baseline of children and youth who are hospitalized for psychiatric reasons.

The table below shows the number of children and youth who were hospitalized, both voluntarily and involuntarily, for psychiatric reasons.

Psychiatric Hospitalization, Children and Youth, 2012-2014[[21]](#footnote-21)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | 2012 | 2013 | 2014 |
| Voluntary | Community hospital | 176 | 205 | 271 |
|  | Children's Long-Term Inpatient Program (CLIP)  | 13 | 22 | 16 |
| Involuntary | Community hospital | 63 | 61 | 67 |
|  | CLIP | 14 | 12 | 23 |

Using this data, staff estimate that a 15 percent reduction from 2014 numbers would represent around 57 fewer children or youth hospitalized, voluntarily or involuntarily, in community hospitals and/or the CLIP program.

* "Decrease the percentage of youth using alcohol or drugs to 15 percent."

As stated earlier, Executive staff indicated that baseline data for this indicator is likely to come from the HYS. Council staff averaged the percentage of 6th, 8th, 10th, and 12th graders who reported using alcohol or drugs in the 2008, 2010, and 2012 surveys. Based on that analysis, approximately 29 percent of youth reported using alcohol or drugs in the 30 days prior to the date on which the survey was taken.

* "Increase the percent of youth who feel they have an adult in their community that they can talk to about something important to 76 percent."

As stated earlier, Executive staff indicated that baseline data for this indicator is likely to come from the HYS. Council staff averaged the percentage of 8th, 10th, and 12th graders who reported having an adult in their community that they could talk to about something important in the 2008, 2010, and 2012 surveys. Based on that analysis, approximately 72 percent of youth reported having an adult they could talk to in their community.

* "Decrease the percent of school-age youth in South King County who are at an unhealthy weight to 23 percent."

As stated earlier, Executive staff indicated that baseline data for this indicator is likely to come from the HYS. Council staff averaged the percentage of 8th, 10th, and 12th graders who reported being an unhealthy weight—including those who were obese, as well as overweight, but not obese, in the 2010 and 2012 surveys. Based on that analysis, 20 percent of all King County students who were surveyed reported themselves as either obese or overweight (but not obese). In South King County, 14 percent of surveyed students were overweight but not obese and 11 percent were obese, for a total of 25 percent of South King County surveyed students classified as being an unhealthy weight.

**Additional Staff Analysis Since May 27th Budget & Fiscal Management Committee meeting:**

**Comparison to Veterans and Human Services Levy (VHSL) and Mental Illness and Drug Dependency Sales Tax (MIDD)**

At the May 27th Budget and Fiscal Management Committee meeting, Councilmembers asked staff to compare the proposed governance, implementation, oversight, and evaluation structures for the Best Starts for Kids Levy with those structures the Veterans and Human Services Levy (VHSL) and the Mental Illness and Drug Dependency (MIDD) sales tax.

**Attachment 7** includes a table that compares the governance, implementation, oversight and evaluation processes for the two most recent Veterans and Human Services Levies (2005 and 2011), the MIDD, and Best Starts for Kids, as proposed.

VHSL (2005): The 2005 VHSL levy ordinance (Ordinance 15279) specified that 50 percent of the levy proceeds would be allocated to services for veterans, military personnel and their families, and 50 percent would be allocated to regional human services for low-income people. The ordinance also established two citizen advisory boards, specifying the composition of the boards.

The levy ordinance did not set forth a process for determining priorities or strategies within the two broad allocations. However, subsequent legislation (Ordinance 15406) required development of a service improvement plan for review and approval by the council and regional policy committee. The plan was to include:

* Review of current services and resources
* Description of proposed priority investment areas
* Annual allocation plan
* Implementation plan for each investment area

Council adopted the service improvement plan in August 2006 (Ordinance 15632).

VHSL (2011): The 2011 VHSL levy ordinance (Ordinance 17072) continued the fifty percent allocation to veterans, military personnel and their families and fifty percent to other regional human services for low-income people. The ordinance also continued the existing oversight boards. Similar to the 2005 VHSL, the Council subsequently adopted an updated service improvement plan to guide the goals, investments and implementation of the levy proceeds (Ordinance 17236).

MIDD (2007): The MIDD ordinance (Ordinance 15969) established five policy goals and required development of implementation, oversight and evaluation plans for subsequent review and approval by council. Each plan was subsequently adopted by ordinance (ordinances 16077, 16261 and 16262). The plans set forth detailed requirements for the spending and implementation schedule, oversight committee composition and duties, and annual reporting and evaluation processes.

BSK: Proposed Ordinance 2015-0177 establishes broad categories of services to be funded and identifies specific allocations to each of the categories. No process is set forth for determining the detailed implementation, evaluation or reporting activities. However, Executive staff indicated in an email response to staff questions that an implementation plan would be developed through a community planning process to identify what programs, interventions and approaches would be funded and what the specific quantifiable outcomes would be. Executive staff indicate that the Executive intends to submit the plan to council for approval.

Proposed Ordinance 2015-0177 also establishes two advisory boards:

1. If a children and youth advisory board is established in accordance with the recommendation of the youth action plan task force (PM 2015-0162), the board would serve as the advisory board for the levy proceeds not allocated to Communities of Opportunity. If the council does not establish a children and youth advisory board, the executive would appoint and the council would confirm an advisory board
2. The existing Communities of Opportunity interim governance group would serve as the advisory board for the levy proceeds allocated to Communities of Opportunity.

The legislation does not specify the duties of the boards, nor does it set forth a process for specifying the duties of the boards.

The legislation does not specify the composition of an advisory board in the event a children and youth advisory board is not established in accordance with the youth action plan, nor does it set forth a process for determining the composition.

**Youth Action Plan and Best Starts for Kids**

At the May 27th Budget and Fiscal Management Committee, Councilmembers requested a comparison of how the recommendations in the Youth Action Plan compare to the proposed Best Starts for Kids Levy.

As noted in the Statement of Findings of the Proposed Ordinance,[[22]](#footnote-22) the Youth Action Plan Task Force members helped to shape the Best Starts for Kids Levy proposal. Representatives of the Youth Action Plan Task Force served on the leadership circle convened by the Executive—along with representatives of several other groups and coalitions—to assist in the development of the Best Starts for Kids levy initiative.

In addition, several of the nine recommendations included in the Youth Action Plan align with the potential strategies to be funded under the Best Starts for Kids Levy described in the transmittal package. Although nearly all of the Youth Action Plan's recommendations include some overlap with the examples of strategies that could be funded under the Best Starts for Kids Levy, four of the Youth Action Plan's recommendations are most closely reflected in the Best Starts for Kids Levy: Recommendation 2: Strengthen Families, Children, Youth, and Young Adults; Recommendation 5: Get Smart About Data; Recommendation 6: Invest Early, Invest Often, Invest in Outcomes; and Recommendation 7: Accountability.

A brief description of each of the four Youth Action Plan recommendation areas that most closely align with the proposed Best Starts for Kids Levy, along with a description of how the Best Starts for Kids Levy would address the recommendation area, follows below.

* *Recommendation Area 2 – Strengthen and Stabilize Families, and Children, Youth and Young Adults:*

Under Recommendation Area 2, Youth Action Plan Task Force recommends providing support that meets the needs of the whole person, starting before birth. This includes ensuring access to pre-conception care, family planning, and health education to prevent unplanned and teenage pregnancy, as well as supporting pregnant and parenting families with health and nutrition guidance.

In addition, under this recommendation area, the Youth Action Plan Task Force recommends that the County expand physical and behavioral health services to children and youth experiencing adverse childhood experiences, such as homelessness, child abuse, and domestic violence. One strategy to achieve this goal is to increase infant and early childhood relationship-based mental health services.

*Best Starts for Kids Levy Response:* Under the Best Starts for Kids Levy, 50 percent of all funding, after $19 million in set-asides, would be made available to support children under the age of 5, their caregivers, pregnant women, and provide support for family planning.[[23]](#footnote-23)

* *Recommendation Area 5 – Get Smart About Data:*

Under Recommendation Area 5, the Youth Action Plan Task Force recommends the development of a comprehensive, countywide approach to data and outcome metrics for children and youth.

Examples of strategies suggested by the Youth Action Plan Task Force for getting smart about data include establishing data-use expectations—in other words, ensuring that the data collected corresponds with information that can be used to evaluate the programs and services provided to children, youth, young adults and their families—and encouraging data sharing not only across agencies and departments within the County, but among partner organizations in the community.

*Best Starts for Kids Levy Response:* Under the Best Starts for Kids Levy, 6 percent of all funding, after $19 million in set-asides, would be made available for evaluation and data collection activities. Executive staff stated that the intention is to use these funds to ensure that the outcomes selected for the Best Starts for Kids Levy are actually being met, as well as engaging neighborhoods, policymakers, schools and other partners in creating change.

* *Recommendation Area 6 – Invest Early, Invest Often, Invest in Outcomes:*

Under Recommendation Area 6, the Youth Action Plan Task Force recommends that the County invest in innovation, to invest early, and to invest in outcomes. Examples of the types of strategies supported by the Youth Action Plan Task Force include investing in prevention activities, funding programs and services based on best and promising practices, and supporting the transition to funding outcomes rather than funding services. In addition, the Youth Action Plan Task Force recommends obtaining "a new, flexible revenue source such as Best Starts for Kids. . ..to support children and families, and youth and young adult needs across the age and needs spectrum."[[24]](#footnote-24)

*Best Starts for Kids Levy Response:* The Best Starts for Kids Levy proposal would be a new funding source aimed at providing support for children and youth, age 0 to 24, as well as their families, that would fund prevention-oriented strategies.

* *Recommendation Area 7 – Accountability***:**

Under the Recommendation Area 7, the Youth Action Task Force recommends that an advisory body be created that can assist the Executive and the Council as they consider outcomes, policies, and investments for children and families and youth and young adults. As envisioned by the Youth Action Plan Task Force, the advisory body would:

* Assist with comprehensive review of County programs and services;
* Receive and review outcomes and data;
* Participate with, track, and report on the efforts of partnerships, coalitions, etc.; and
* Be a forum for discussion and exchange of ideas on best practices and emerging needs.

*Best Starts for Kids Levy Response:* Under the proposed Best Starts for Kids Levy, the advisory body recommended by the Youth Action Plan Task Force, if established, would serve as the oversight and governance body for all of the funding under the Best Starts for Kids Levy, except for funding for the Communities of Opportunity Funding.

The table below provides a side-by-side comparison of the Youth Action Plan recommendations and the Best Starts for Kids Levy. It should be noted that the Youth Action Plan is still under consideration by the Council's Committee of the Whole.

|  |  |  |
| --- | --- | --- |
|  | **Youth Action Plan****(Proposed Motion 2015-0162)** | **Best Starts for Kids Levy****(Proposed Ordinance 2015-0177)** |
| Vision | * King County is a place where everyone has equitable opportunities to progress through childhood safe and healthy, building academic and life skills to be thriving members of their community.[[25]](#footnote-25)
 | * Babies are born healthy and establish a strong foundation for lifelong health and well-being.
* King County is a place where everyone has equitable opportunities to progress through childhood safely and healthy, building academic and life skills to be thriving members of their community.
* Communities offer safe, welcoming, and healthy environments that help improve outcomes for all of King County's children and families, regardless of where they live.[[26]](#footnote-26)
 |
| Age Range | * Birth to 24 years old
* No emphasis on any specific subset of age ranges[[27]](#footnote-27)
 | * Birth to 24 years old
* Places an emphasis on investing in early childhood—children under 5[[28]](#footnote-28)
 |
| Recommended Governance Structure | * Creation of an external advisory body to assist the County in creating systemwide accountability that would:
* Assist with comprehensive review of County programs and services;
* Receive and review outcomes and data;
* Participate with, track, and report on the efforts of partnerships, coalitions, etc.; and
* Be a forum for discussion and exchange of ideas on best practices and emerging needs
 | * For the Early Childhood and School-Aged Allocations: the Youth Action Plan-recommended advisory body (if established)
* For the Communities of Opportunity Allocation: an existing governing body—the Interim Governance Group
 |

|  |  |  |
| --- | --- | --- |
|  | **Youth Action Plan****(Proposed Motion 2015-0162)** | **Best Starts for Kids Levy****(Proposed Ordinance 2015-0177)** |

|  |  |  |
| --- | --- | --- |
| Recommended Strategies | * The Youth Action Plan includes the following 9 recommendation areas:
1. Social Justice and Equity;
2. Strengthen and Stabilize Families, Children, Youth, and Young Adults;
3. Stop the School to Prison Pipeline;
4. Bust Silos/We're Better Together
5. Get Smart About Data;
6. Invest Early, Invest Often, Invest in Outcomes;
7. Accountability;
8. Youth Bill of Rights; and
9. Evaluation and Reporting/Process and Implementation Timeline.

  | * The Best Starts for Kids Levy Ordinance includes 6 funding areas:

 1. Youth and Family Homeless Prevention Fund;
2. Research Allocation;
3. Early Childhood Allocation;
4. School-Aged Allocation;
5. Communities of Opportunity Allocation; and
6. Evaluation and Data Allocation
 |

**ATTACHMENTS**

1. Proposed Ordinance 2015-0177
2. Transmittal Letter
3. Best Starts for Kids Report to King County Council
4. Best Starts for Kids Strategies
5. Revised Financial Plan
6. Fiscal Note
7. Levy Governance, Implementation, Oversight, and Evaluation Matrix

**INVITED**

1. Betsy Jones, Health and Human Potential Advisor to the Executive
2. Adrienne Quinn, Director, Department of Community and Human Services
3. Patty Hayes, Interim Director, Public Health – Seattle & King County
4. Dwight Dively, Director, Office of Performance, Strategy and Budget
5. Sheila Capestany, Department of Community and Human Services
6. Jennifer DeYoung, Public Health – Seattle & King County
1. Pursuant to RCW 84.55.050(1) [↑](#footnote-ref-1)
2. Proposed Ordinance 2015-0177 lines 199-200 [↑](#footnote-ref-2)
3. <http://wscadv2.org/projects.cfm?aid=1bfef8e9-c29b-57e0-877e65883ece51fe> [↑](#footnote-ref-3)
4. Program Expansion: Preventing Homelessness for Survivors of Domestic Violence, Bill & Melinda Gates Foundation doubles efforts by adding nine new service providers to Domestic Violence Housing First, September 13, 2012, Washington State Coalition Against Domestic Violence, Accessed May 15, 2015: http://wscadv2.org/docs/dvhf2011pressrelease.pdf [↑](#footnote-ref-4)
5. Mbilinyi, Lyungai, Ph.D., and Alison Kreiter, MSW, Innovative Programs Research Group, School of Social Work, University of Washington, Seattle, The Washington State Domestic Violence Housing First Program Evaluation Summary, Cohort 1 Agencies, July 2011-December 2012, September 2013, (Cohort 1 Evaluation), Accessed May 15, 2015: http://wscadv2.org/docs/dvhfcohort1evaluationsummary.pdf [↑](#footnote-ref-5)
6. Mbilinyi, Lyungai, Ph.D., Innovative Programs Research Group, School of Social Work, University of Washington, Seattle, The Washington State Domestic Violence Housing First Program Cohort 2 Agencies Final Evaluation Report, September 2011-September 2014, February 2015, (Cohort 2 Evaluation), Accessed May 15, 2015: http://wscadv2.org/docs/DVHF-FinalEvaluation.pdf [↑](#footnote-ref-6)
7. Cohort 1 evaluation, page 20 [↑](#footnote-ref-7)
8. Cohort 2 evaluation, page 29 [↑](#footnote-ref-8)
9. Committee to End Homelessness in King County, Comprehensive Plan to Prevent and End Youth and Young Adult (YYA) Homelessness in King County by 2020, 2015 Comprehensive Plan Refresh, May 2015, Accessed May 15, 2015: http://www.kingcounty.gov/socialservices/Housing/ServicesAndPrograms/Programs/Homeless/HomelessYouthandYoungAdults.aspx [↑](#footnote-ref-9)
10. Committee to End Homelessness in King County, Final Draft, A Regional, Aligned, Community Plan to End the Experience of Homelessness among Residents of Seattle/King County, April 2015, Strategy 1.1, Accessed May 18, 2015: http://cehkcstrategicplan.org/wp-content/uploads/2014/12/Final-DRAFT-CEH-Plan-2015-2019.pdf [↑](#footnote-ref-10)
11. Proposed Ordinance 2015-0177 lines 183-186 [↑](#footnote-ref-11)
12. <http://wscadv2.org/projects.cfm?aid=1bfef8e9-c29b-57e0-877e65883ece51fe> [↑](#footnote-ref-12)
13. Committee to End Homelessness in King County, Strategic Plan, July 2015-June 2019, A Regional, Aligned, Community Plan to End the Experience of Homelessness Among Residents of Seattle/King County, June IAC version, June 1, 2015. [↑](#footnote-ref-13)
14. Seattle-King County Coalition on Homelessness, 2015 Street Count Results, Accessed June 1, 2015: http://www.homelessinfo.org/what\_we\_do/one\_night\_count/2015\_results.php [↑](#footnote-ref-14)
15. Committee to End Homelessness in King County, Strategic Plan, July 2015-June 2019, A Regional, Aligned, Community Plan to End the Experience of Homelessness Among Residents of Seattle/King County, June IAC version, June 1, 2015, page 13. [↑](#footnote-ref-15)
16. According to the financial plan transmitted with the Best Starts for Kids levy ordinance, a total of $29 million would be set aside out of first year collections: $16 million for homelessness prevention, $3 million of neuroscience research, and $10 million to establish a rainy day reserve. The rainy day reserve is not specifically called out in this staff report, as the levy ordinance does not specifically require the creation of such a reserve. However, establishment of a rainy day reserve for funds is a county policy, as described in the County's Comprehensive Financial Management Policies (Motion 14110). [↑](#footnote-ref-16)
17. Proposed Ordinance 2015-0177 lines 221 through 223 [↑](#footnote-ref-17)
18. MCH services includes: MSS, WIC, NFP, Health Educators, Family Planning. This amount includes both current services ($37.4 M) and restoration of 2014 levels of service for NFP and Health Educators ($5.4 M) that were cut in the adopted 15/16 budget. [↑](#footnote-ref-18)
19. Footnote 6 to Fiscal Note attached to Proposed Ordinance 2015-0177 transmittal letter [↑](#footnote-ref-19)
20. 6th grade students receive a shorter questionnaire with a subset or modification of questions asked of 8th, 10th, and 12th graders. 6th graders are not asked the questions about height, weight, or having an adult to turn to; therefore these indicators will not be able to be measured for this grade.  The questions about illicit substance use are included in the questionnaire distributed to 6th graders.  [↑](#footnote-ref-20)
21. Data do not include (1) private insurance-paid hospitalizations, (2) King County Indian tribes that send children for hospitalization outside of King County, and (3) youth with co-occurring substance use and mental illnesses who are hospitalized (admitted to residential treatment) within the substance use treatment system.  [↑](#footnote-ref-21)
22. Lines 138-140. [↑](#footnote-ref-22)
23. Levy Ordinance, lines 221-223. [↑](#footnote-ref-23)
24. Youth Action Plan, page. 65 (Proposed Motion 2015-0162, Attachment A). [↑](#footnote-ref-24)
25. Youth Action Plan, page 24. (Attachment A, Proposed Motion 2015-0162). [↑](#footnote-ref-25)
26. "Best Starts for Kids Report to King County Council", page 2. (Transmitted with Proposed Ordinance 2015-0177). [↑](#footnote-ref-26)
27. Although the Youth Action Plan Task Force broke into Age Group Strategy Teams, the Task Force's nine recommendations included strategies for all age ranges, 0-24 years old. [↑](#footnote-ref-27)
28. Best Starts for Kids Levy Ordinance (2015-0177), lines 221-223, would make 50 percent of funding (after $19 million in set-asides) available specifically for children under the age of 5, their caregivers, pregnant women, and for family planning. [↑](#footnote-ref-28)