



## AGENDA

### Human Services Commission Regular Meeting

6:30 PM - Wednesday, March 14, 2018

City Hall Council Chambers, Sammamish, WA

Page		Estimated Time
	<b>CALL TO ORDER</b>	6:30 pm
	<b>ROLL CALL</b>	
	<b>PLEDGE OF ALLEGIANCE</b>	
	<b>APPROVAL OF AGENDA</b>	
	<b>APPROVAL OF THE MINUTES</b>	
3 - 4	1. February 28, 2018 Regular Meeting <a href="#">View Minutes</a>	
	<b>PUBLIC COMMENT - NON AGENDA</b>	6:35 pm
	<i>3 minutes per person / 5 minutes if representing an organization</i>	
	<b>OLD BUSINESS</b>	6:45 pm
5 - 9	1. Review Updated Commission Bylaws <a href="#">View Bylaws</a>	
	<b>NEW BUSINESS</b>	7:00 pm
10 - 41	1. Introduction to Housing Strategy Plan <a href="#">View Agenda Item</a>	
42 - 162	2. Overview of Human Services Needs Assessment <a href="#">View Needs Assessment</a>	
	3. Human Services Strategic Plan	
	<b>NEXT MEETING AGENDA TOPICS</b>	
	<ul style="list-style-type: none"> <li>• Housing Strategy Update</li> <li>• Overview of Human Services Grant Program</li> </ul>	

- Grant Criteria Discussion
- Grant Review Commission Assignments

## ADJOURNMENT

8:30 pm

### (NON-AGENDA) LONG TERM CALENDAR

163 - 164

1. [View Calendar](#)

**Note:** This is an opportunity for the public to address the Human Services Commission. For non-agenda items, three (3) minutes are granted per person, or five (5) minutes if representing the official position of a recognized community organization. Seven (7) minutes are granted per person for agenda items.

If you are submitting written material, please supply 8 copies (7 for Human Services Commission; 1 for the record). If you would like to show a video or PowerPoint, it must be submitted or emailed by 5pm the day of the meeting to Janie Jackson at [jjackson@sammamish.us](mailto:jjackson@sammamish.us).

**THE COMMISSION MAY ADD OR TAKE ACTIONS ON ITEMS NOT LISTED ON THIS AGENDA.**

Human Services Commission meetings are wheelchair accessible. American Sign Language (ASL) interpretation is available upon request.

Please phone (425) 295-0500 at least 48 hours in advance. Assisted Listening Devices are also available upon request.



*Human Services Commission*

801 228<sup>th</sup> Avenue SE ■ Sammamish, WA 98075 ■ phone: 425-295-0500 ■ fax: 295-295-0600 ■ web: www.sammamish.us

**MEETING SUMMARY**

Regular Meeting  
Human Services Commission  
Wednesday, February 28, 2018, 6:30 pm  
City of Sammamish Council Chambers

**CALL TO ORDER**

Staff member Jessi Bon opened the meeting at 6:30 pm.

**COMMISSIONERS PRESENT**

Tom Ehlers  
Nushina Mir  
Stanley Gunno  
CJ Kahler  
Larry Wright (by phone)  
Joyce Bottenberg (by phone)

**COMMISSIONERS ABSENT**

Jodi Nishioka

**STAFF PRESENT**

Jessi Bon  
Rita Badh  
Mike Sugg  
Janie Jackson

**PLEDGE OF ALLEGIANCE**

Commissioner Gunno led the pledge.

**APPROVAL OF AGENDA**

The agenda was amended to include the addition of 'next steps' after the bylaws discussion. A motion was made and seconded to approve the agenda as amended.

**PUBLIC COMMENT**

There was no public comment provided.

**WELCOME AND INTRODUCTIONS**

Commissioners and staff introduced themselves and spoke briefly about their backgrounds.

**CHAIR AND VICE CHAIR ELECTIONS**

A motion was made and seconded to nominate Tom Ehlers for Chair. The motion carried. A motion was made and seconded to nominate Larry Wright as Vice Chair. The motion carried.

**PRESENTATIONS**

*Introduction to Advisory Boards*

Staff member Mike Sugg provided the presentation.

**INTRODUCTION TO COMMISSION BYLAWS**

*Bylaws Discussion – Review Draft*

Staff member Rita Badh led the discussion. Commissioners reviewed the draft bylaws, discussed each section and provided feedback on suggested changes. Staff will incorporate the changes, and the document will be brought back to the Commission as a final draft for the March meeting.

**ADJORNMENT**

A motion was made and seconded to adjourn the meeting at 8:34 pm.

## City of Sammamish

### *Human Services Commission Bylaws*

#### **ARTICLE I: MEMBERS**

The Human Services Commission consists of seven (7) members who are appointed by the City Council, per the authorizing ordinance [O2017-443](#).

#### **ARTICLE II: PURPOSE**

The Human Services Commission serves in an advisory capacity to the City Council, providing guidance and recommendations in meeting the human service needs of the Sammamish community. The City Council reviews and approves all policy recommendations provided by the Commission.

#### **ARTICLE III: DUTIES & RESPONSIBILITIES (O2017-443)**

The Human Services Commission shall make reports and recommendations to the City Council concerning human services issues including:

1. Development and assessment of human services in the City.
2. Determination of priorities of human service needs within the City.
3. Evaluation and recommendation on funding requests submitted to the City.
4. Review of City actions which may affect the availability and quality of human services provision in the City.
5. Coordination with other groups and human services planning agencies and organizations to pursue the goal of regional cooperation in the planning, funding and delivery of human services.
6. May provide recommendations to the City Council on emerging issues and concerns related to human services.

As an advisory board, the Human Services Commission shall not direct significant staff work, nor is the Commission authorized to commit any funds of the City without approval from the City Council.

#### **ARTICLE IV: OFFICERS**

The elected officers of the Commission shall consist of a Chair and Vice Chair. The Vice Chair serves in the absence of the Chair. In the absence of both the Chair and Vice-Chair, the members present shall elect a Chair Pro-Tempore.

The term of office for Chair and Vice Chair is one (1) year with the possibility of reelection. For Chair Pro-Tempore, the term shall be only for the meeting at which appointed. In the event of a vacancy from office, a replacement Chair and/or Vice Chair shall be elected to serve the unexpired term of the vacant office(s).

**Election Process**

At the Commission’s February meeting, the following process is conducted to elect the new Chair and Vice Chair positions:

- Motion to elect Chair and Vice Chair will be placed on the agenda.
- Each Commission member has the opportunity to nominate a candidate.
- Nominations do not require a second vote.
- If no further nominations, the Chair declares nominations closed.
- Voting takes place in the order nominations are made.
- Commissioners will be asked for a voice vote and a raise of hands.
- Once a nominee receives a majority vote, they are declared elected to the position.
- If none of the nominees receive a majority vote, nominations are requested again, and the process repeated until a candidate receives a majority vote.
- The process is repeated for Vice Chair.
- A tie vote will result in failed nomination.

One year terms for Chair and Vice Chair take effect at the 1st meeting in February. The election cycle is repeated annually.

**Duties of the Chair and Vice Chair:**

- Run/facilitate Human Services Commission meetings in a fair, efficient, productive and informative manner.
- Act as spokesperson to City Council and, when necessary, to the public and/or media.
- Work with City staff to schedule/calendar and meeting agendas.

The Vice Chair is to attend meetings with staff and Chair and to fulfill duties of the Chair in the Chair’s absence.

**ARTICLE V: MEETINGS**

The regular meetings of the Commission are normally held on the 2<sup>nd</sup> Wednesday of every calendar month ~~from 6:30pm to 8:30pm. at a time set in advance by the Commission so as to ensure reasonable public participation.~~ Meetings are not held during the month of August. Staff is responsible for noticing meetings to the public and to generate and update a calendar for upcoming Human Services Commission meetings.

All regular and special meetings of the Commission are open to the public.

Limited-term working groups, composed of a subset of the whole Commission, may be formed to address specific tasks related to topics on the Commission’s work calendar. The formation of any working group shall be approved by a majority vote or consensus of the Commission. Due to the

requirements of the Open Public Meetings Act (Chapter 42.30 RCW), a working group shall contain fewer members than a quorum of the whole Commission.

**ARTICLE VI: AGENDA AND STAFF REPORTS FOR MEETINGS**

A copy of the agenda and accompanying materials for each meeting should be provided to each member not less than four (4) business days prior to the date of the meeting.

The City Manager shall appoint appropriate staff to assist the Human Services Commission as necessary for the proper operation of the commission.

**ARTICLE VII: MINUTES AND RECORDS**

The approved action minutes serve as the record of actions taken. Draft action minutes will be provided to the Human Services Commission Chair for initial review and correction. The Chair's proposed final minutes will be distributed to the entire Human Services Commission for review. Approval will occur at a subsequent Commission meeting.

**ARTICLE VIII: PUBLIC INVOLVEMENT**

Public comment at the beginning of each meeting is limited to three (3) minutes per individual, or five (5) minutes per group. At the end of public comment and at the discretion of the Chair, the Commission may ask questions.

**ARTICLE IX: PUBLIC REPRESENTATION AND STATEMENTS FROM THE COMMISSION**

Any member of the Commission has a right to express personal views and opinions. However, statements representing the views or recommendations of the Human Services Commission must be authorized by a majority or consensus of the Commission. Consultation with staff on messaging is recommended.

**ARTICLE X: EX-PARTE CONTACTS AND SHARING OF INFORMATION**

It is in the public interest that, to the greatest extent possible, all members of the Human Services Commission have an opportunity to be aware of and act upon the information that is available to other members. All members should place upon the record of the Human Services Commission the substance of all ex-parte contacts that have occurred during the time a matter has been introduced and is still before the Human Services Commission for a recommendation.

**ARTICLE XI: CONFLICT OF INTEREST**

If an actual or perceived conflict of interest exists that affects the work of the Commission, it is each member's responsibility to openly describe the issue and refrain from any subsequent Commission participation, deliberation or voting on the subject.

**ARTICLE XII: ORDER OF BUSINESS**

The Chair may adjust or amend the order of business as needed. The Commission’s regular meetings normally use the following format:

- Call to Order
- Roll call
- Pledge of Allegiance
- Approval of Agenda
- Approval of Minutes
- Public Comment
- Agenda Items
- Adjourn

The Chair shall conduct meetings in an open, fair and transparent manner. In the event of a procedural question, the Chair may refer to Roberts Rules of Order for guidance.

**ARTICLE XIII: ATTENDANCE**

Each Human Services Commission member should strive to attend all Commission meetings, to read materials beforehand and to participate fully. In-person attendance is preferred, but when this is not possible, attendance via conference call can be arranged. Commission members will strive to provide at least 24-hours of notice to the staff when a conference call is needed.

Except in instances of sudden illness or other unforeseen hardship, members should advise the staff and the Chair/Vice Chair, of their intended absence prior to 4:30 p.m. on the day prior to the meeting. Excused absences will be noted for the record at the roll call.

If a member misses three consecutive meetings, if a Commissioner’s repeated absence hinders her or his ability to effectively contribute to the Commission, the Chair will have a discussion with said Commissioner and then determine whether or not to recommend to the City Council, in concert with City Staff, a new appointment for said Commissioner’s position.

**ARTICLE XIV: RECOMMENDATIONS OF THE COMMISSION**

The goal of the Human Services Commission is to provide a ~~consensus~~ recommendation to the City Council. When a consensus cannot be reached, a majority vote is taken. Minority positions may be conveyed as well.

To document the actions taken by the Human Services Commission, staff will prepare a written statement or memorandum, including the facts, findings and rationale for the final recommendations. The Chair of the Human Services Commission will present the recommendations to the City Council on behalf of the Human Services Commission.

**ARTICLE XV: REVIEW OF BYLAWS**

The Human Services Commission shall review bylaws annually at the first Human Services Commission meeting in February.

**ARTICLE XVI: CODE OF CONDUCT**

The Human Services Commission has developed the following 'group norms' to define the expectations for conduct by Commissioners and the interaction among members. It is the intent that these be simple, self-explanatory and self-enforced. The Chair is empowered to remind members as the need arises to employ these norms. Commissioners will demonstrate respect for members of the public, staff and other Commissioners by:

- Attending each meeting and arriving on time (if late arrival is necessary, please call or email ahead).
- Reading materials in advance, coming to the meeting prepared and submitting questions in advance.
- Respectfully and attentively listening to the speaker (minimal side discussions).
- Speaking respectfully to and about the public, staff and other Commissioners.

Bylaws adopted by the Human Services Commission on [Date of Approval]

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*Human Services Commission Chair*

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*Date*

# Agenda Bill

Human Services Commission Regular Meeting  
March 14, 2018



<b>SUBJECT:</b>	Work Session #1 for Sammamish Home Grown – A Plan for People, Housing, and Community		
<b>DATE SUBMITTED:</b>	March 08, 2018		
<b>DEPARTMENT:</b>	Community Development		
<b>NEEDED FROM COMMISSION:</b>	<input type="checkbox"/> Action <input type="checkbox"/> Direction <input checked="" type="checkbox"/> Informational		
<b>RECOMMENDATION:</b>	This is an informational item only, so no action is being requested. The Human Services Commission should listen and learn about the ways that the City of Sammamish influences the housing supply throughout the City in order to have thoughtful and thorough discussions about housing strategies at future meetings.		
<b>EXHIBITS:</b>	<a href="#">Exhibit 1 - Housing Element of the 2015 Sammamish Comprehensive Plan (Updated in 2016)</a> <a href="#">Exhibit 2 - 2006 Housing Strategy Plan</a> <a href="#">Exhibit 3 - 2017 – 2018 Planning Commission Meetings Recap</a>		
<b>BUDGET:</b>			
Total dollar amount	N/A		<input type="checkbox"/> Approved in budget
Fund(s)	N/A		<input type="checkbox"/> Budget reallocation required
			<input checked="" type="checkbox"/> No budgetary impact
<b>WORK PLAN FOCUS AREAS:</b>			
<input type="checkbox"/> Transportation	<input type="checkbox"/> Community Safety		
<input checked="" type="checkbox"/> Communication & Engagement	<input checked="" type="checkbox"/> Community Livability		
<input checked="" type="checkbox"/> High Performing Government	<input type="checkbox"/> Culture & Recreation		
<input type="checkbox"/> Environmental Health & Protection	<input type="checkbox"/> Financial Sustainability		

**ISSUE BEFORE COMMISSION:**  
Work Session #1 for Sammamish Home Grown – A Plan for People, Housing, and Community

**KEY FACTS AND INFORMATION SUMMARY:**

### **SUMMARY STATEMENT AND PURPOSE**

At a kick-off meeting in September 2017, the City officially commenced its update of the 2006 Housing Strategy Plan (Exhibit 2); the 2018 version of the Housing Strategy Plan has been renamed Sammamish Home Grown - A Plan for People, Places, and Community. The Sammamish Planning Commission is the lead advisory body reviewing Sammamish Home Grown. However, during the early stages of the update effort, the City identified the need and benefit to involve the newly formed Human Services Commission to obtain additional input on the two housing categories of affordability and special needs housing. While the Human Services Commission will not be the lead reviewing body for Sammamish Home Grown, the Commission will be able to provide input and direction on the development of specific strategies for affordable housing and special needs housing.

The purpose and objective of Sammamish Home Grown – A Plan for People, Housing, and Community is to guide the implementation of the goals and policies adopted in the Housing Element of the Comprehensive Plan (Exhibit 1). The City of Sammamish’s Housing Strategy Plan has not been updated since 2006. An updated housing strategy plan is needed to help the City implement the policies it adopted as part of the Housing Element of the Comprehensive Plan in 2015, later amended in 2016 to respond to a Growth Management Act (GMA) compliance challenge.

Sammamish Home Grown will serve as a work plan that helps staff transform policies into near-term actions and determine priorities for the preferred strategies. Sammamish Home Grown is not an action plan, nor is it a policy document in and of itself. Sammamish Home Grown will identify the strategies and actions that align with our policies and address key housing gaps which we want to analyze further in the short term. The policy direction established in the Comprehensive Plan is broad and covers a twenty-year timeframe; Sammamish Home Grown will distill that into the most important actions to be taken in a shorter timeframe of roughly five years.

Involvement of the Human Services Commission will strengthen Sammamish Home Grown and provide diverse perspectives to help address housing issues in Sammamish.

### **PROCESS AND BACKGROUND**

The Planning Commission has held four work sessions in addition to the project kick-off meeting, meaning that the Planning Commissioners are further along in their understanding and comprehension of the various elements necessary for drafting Sammamish Home Grown (Exhibit 3). These elements include the planning framework (Growth Management Act [GMA]), Sammamish housing policy, the purpose of a housing strategy plan, housing data, housing needs, potential housing strategies, and the role of the Planning Commission in the update process.

Therefore, the intent of Work Session #1 with the Human Services Commission is to first provide a foundation for the understanding of the framework within which the City conducts its planning efforts. This is a key first step in understanding the framework for the effort to update the Sammamish Home Grown. Following such an overview, the Human Services Commission will then discuss potential key housing gaps in Sammamish based on data provided by staff. Identifying key housing gaps will assist the Commission in identifying the appropriate strategies and tools available to the City to address

housing affordability and special needs housing. To facilitate this conversation, staff from A Regional Coalition for Housing (ARCH) will present a brief overview of housing data.

Ultimately, the goal of the Human Services Commission is to provide input on housing affordability and special needs housing strategies that are developed in conjunction with the Planning Commission. The Human Services Commission will not be asked for a formal recommendation on this update. City staff strive for Sammamish Home Grown accounting for diverse perspectives in addressing housing needs throughout the City.

#### **NEXT STEPS**

Following a presentation on the planning framework and potential key housing gaps in Sammamish relative to household types and types of housing, the Human Services Commission will begin an initial discussion on Sammamish Home Grown and ask questions about any related topics. Staff will facilitate a discussion on affordable housing and special needs housing strategies at a future meeting with the Human Services Commission.

The Human Services Commission should also know that the first significant outreach effort will be a broad community survey, implemented via a Virtual Town Hall, which will commence on March 19, 2018. The community survey will run through April 9, 2018 and is intended to provide staff with a better understanding of community perspectives and desires. There will be a press release and other media outreach efforts that accompany the survey release so that staff can obtain the highest response rate possible.

Additional details will continue to be provided on the schedule for accomplishing this update and the major milestones in the process. The planning process is expected to take a total of approximately twelve months, with adoption expected toward the end of 2018. The Planning Commission's review expected to conclude in summer 2018.

#### **STAFF CONTACTS**

- Doug McIntyre, AICP, Senior Planner, Department of Community Development  
425-295-0528, dmcintyre@sammamish.us
- Arthur Sullivan, Program Manager, ARCH  
425-861-3676, asullivan@bellevuewa.gov
- Mike Stanger, Associate Planner, ARCH  
425-861-3676, mstanger@bellevuewa.gov

#### **FINANCIAL IMPACT:**

N/A

#### **OTHER ALTERNATIVES CONSIDERED:**

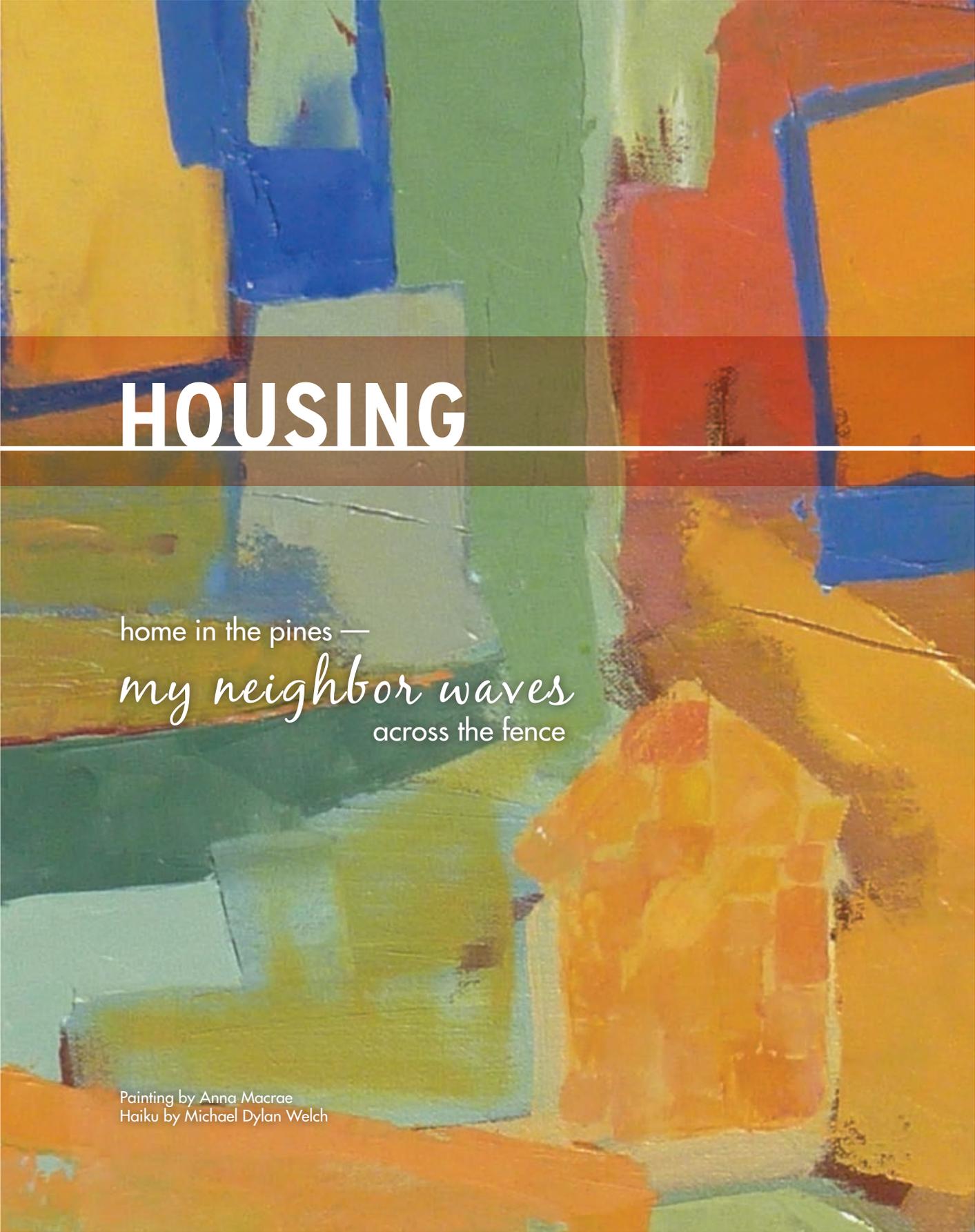
N/A

#### **RELATED CITY GOALS, POLICIES, AND MASTER PLANS:**

The City's housing policy is mainly contained within the Housing Element of the Comprehensive Plan; however, housing policy is developed and implemented in multiple ways, including via the Sammamish

Town Center Subarea Plan, the ARCH Housing Trust Fund, and others. Links to such documents are provided below:

1. [2015 Sammamish Comprehensive Plan](#)
2. [Housing Element of the Comprehensive Plan \(Volume I\)](#)
3. [Technical Background for the Housing Element of the Comprehensive Plan \(Volume II\)](#)
4. [Sammamish Town Center Documents](#)
5. [ARCH webpage](#)



# HOUSING

home in the pines —  
*my neighbor waves*  
across the fence

Painting by Anna Macrae  
Haiku by Michael Dylan Welch

## Housing Goals

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- Goal H.1 Neighborhood Vitality and Character**  
Promote safe, attractive, and vibrant residential and mixed-use neighborhoods. Encourage housing design that is sensitive to quality, design, and intensity within neighborhoods and with surrounding land uses. Land use policies and regulations should emphasize compatibility with existing neighborhood character. In areas where the existing character is in transition, new development should be designed to incorporate the qualities of well-designed neighborhoods.
- Goal H.2 Housing Supply and Variety**  
Ensure that Sammamish has a sufficient quantity and variety of housing to meet projected needs, preferences, and growth of the community.
- Goal H.3 Housing Affordability**  
Provide for a range of housing opportunities to address the needs of all economic segments of the community.
- Goal H.4 Housing for People with Special Needs**  
Support a variety of housing opportunities to serve those with special needs.
- Goal H.5 Regional Collaboration**  
Actively participate and coordinate with other agencies in efforts to meet regional housing needs.
- Goal H.6 Monitoring**  
Implement Housing Element goals in a manner that is effective, efficient and transparent.



## Introduction

The Housing Element addresses the preservation, improvement, and development of housing, identifies land to accommodate different housing types, and makes provisions for the existing and projected housing needs of all economic segments of the community. Sammamish's housing element ensures that there will be enough housing to accommodate expected growth in the city, and the variety of housing necessary to accommodate a range of income levels, ages and special needs. At the same time, the element seeks to preserve existing neighborhood character by including policies that will keep new development compatible.

The Housing Element is supported by a housing needs analysis, which quantifies existing and projected housing needs and identifies the number of housing units necessary to accommodate projected growth. This analysis prompts the City to consider what current and future residents will need, and this in turn informs policies that shape the zoning and development standards in place today and planned for the future. This is an element in which multiple interests need to be balanced, including community character, demographic characteristics, affordability, and others. This analysis is contained in the Housing Element Background Information. Specifically, the



*Lancaster Ridge*



*Multifamily housing*



Please look for this icon for goals and policies that focus specifically on sustainability and healthy communities.

Housing Element Background Information contains the *East King County Housing Needs Analysis*, beginning on page H.3, prepared by ARCH (A Regional Coalition for Housing), in collaboration with the participating cities. The Housing Needs Analysis, dated January 27, 2015, includes a review of demographics, household characteristics, housing supply and summary findings for both the East King County area and the City of Sammamish. The Housing Element Background Information also includes the February 2, 2006 Planning Commission Recommended Draft City of Sammamish Housing Strategy Plan, which identifies recommended actions to implement the Housing Element of the 2003 Comprehensive Plan.

To accomplish aims of this Element, the City will develop a shorter range Strategy Plan that lists potential strategies to implement various goals and policies and their relative priority for consideration. In addition, the results of activities undertaken through the Strategy Plan will facilitate performance monitoring, evaluation, and future planning updates.

Goals and policies that support housing sustainability and healthy communities address energy efficiency.

## Goals and Policies



Single family homes



Townhomes

### Goal H.1 Neighborhood Vitality and Character

Promote safe, attractive, and vibrant residential and mixed-use neighborhoods. Encourage housing design that is sensitive to quality, design, and intensity within neighborhoods and with surrounding land uses. Land use policies and regulations should emphasize compatibility with existing neighborhood character. In areas where the existing character is in transition, new development should be designed to incorporate the qualities of well-designed neighborhoods.

*Policy H.1.1 Ensure new development and redevelopment is sensitive to the context of existing and planned neighborhood character.*

- Policy H.1.2 Support investment in existing neighborhoods and housing in order to preserve the character and condition of neighborhoods and housing.*
- Policy H.1.3 Support the preservation of the city's historically significant housing.*
- Policy H.1.4 Provide notification and foster public awareness and participation in decisions affecting neighborhoods.*

## **Goal H.2 Housing Supply and Variety**

Ensure that Sammamish has a sufficient quantity and variety of housing to meet projected needs, preferences, and growth of the community.

- Policy H.2.1 Maintain an adequate supply of appropriately zoned land to accommodate the city's housing growth targets.*
- Policy H.2.2 Support a variety of residential densities and housing types to meet the needs and preferences of all Sammamish residents.*
- Policy H.2.3 Consider the impacts on citywide housing capacity and diversity when making land use policy decisions or code amendments.*
- Policy H.2.4 Support residential and mixed use development in Town Center and other commercial areas where combining such uses would promote the vitality and economic viability of the area.*
- Policy H.2.5 Permit and promote smaller housing types (e.g. cottages, duplexes, efficiency studios, and townhouses).*
- Policy H.2.6 Promote the development of accessory dwelling units (ADUs).*
- Policy H.2.7 Permit manufactured homes in residential zones in accordance with the provisions of state and federal law.*

*Based on the assumptions described in the Land Use Element, the City has development capacity to meet the adopted 2035 targets of 4,640 houses and 2,088 jobs.*



*Multifamily housing*



*Neighborhood within easy walking distance of Eastlake High School, local transit and Sammamish Highlands*

**Urban infill** is defined as new development that is sited on vacant or undeveloped land within an existing community, and that is enclosed by other types of development. The term “urban infill” itself implies that existing land is mostly built-out and what is being built is in effect “filling in” the gaps. The term most commonly refers to building single-family homes in existing neighborhoods but may also be used to describe new development in commercial, office or mixed-use areas.

**Fair Housing** is the ability for all people to choose where they live without discrimination based on race, color, national origin, sex, family status, or disability—these are the “protected classes” under state and federal law. (Some places also protect age, sexual orientation, or having a Section 8 voucher). Cities may not make zoning or land use decisions or implement policies that exclude or otherwise discriminate against protected persons, including individuals with disabilities. Sammamish’s fair housing practices are evaluated periodically by King County as part of a countywide report to the federal government.

**Location-efficient Housing** refers to homes that have easy or inexpensive access to workplaces, schools, shopping, and other necessary destinations. Housing locations are efficient to the most people when the ways to these destinations are easily walkable, don’t require the resident to own an automobile, and can be reached in 20 minutes or less.

**Policy H.2.8** Avoid creating regulations and procedures that discourage the housing industry’s ability to respond to market needs or unnecessarily increase the costs of developing housing.



**Policy H.2.9** Permit context-sensitive residential clustering, where appropriate, as a means of protecting environmentally sensitive areas and providing more open space.



New housing development under construction

**Policy H.2.10** Promote minimum densities in commercial zones that allow housing to achieve mixed-use development.

**Policy H.2.11** Ensure fair and legal housing practices throughout the city.



**Policy H.2.12** Promote location-efficient and energy-efficient housing choices through incentives and other means.

**Goal H.3 Housing Affordability**

Provide for a range of housing opportunities to address the needs of all economic segments of the community.

- Policy H.3.1 Develop and implement plans and strategies that promote a proportionate amount of the countywide need for housing affordable to households with moderate, low and very low incomes, including those with special needs.*
- Policy H.3.2 Promote the preservation of existing housing which may provide for affordable forms of rental and ownership housing.*
- Policy H.3.3 Consider requiring or incentivizing affordable housing when evaluating rezones and other land use regulation modifications, especially when resulting in increases in development capacity.*
- Policy H.3.4 Offer regulatory incentives such as priority processing of permits, fee waivers or reductions, and/or property tax relief for builders who provide very low-, low- or moderate-income housing or buildings/developers providing housing for demographics needs, such as seniors, singles and two person households.*
- Policy H.3.5 Consider offering financial aid and/or technical assistance to organizations that provide affordable housing for very low-, low- and moderate-income households.*
- Policy H.3.6 Encourage and support non-profit agencies, public-private partnerships, and housing authorities to preserve or build new, sustainable housing affordable to very low-, low- and moderate-income households.*

*Given the unique challenges of providing housing affordable to households at less than 30% AMI (very low-income), local efforts will require collaboration with other jurisdictions and funders.*



*Multifamily housing*



*Single family homes*



*Multifamily housing*



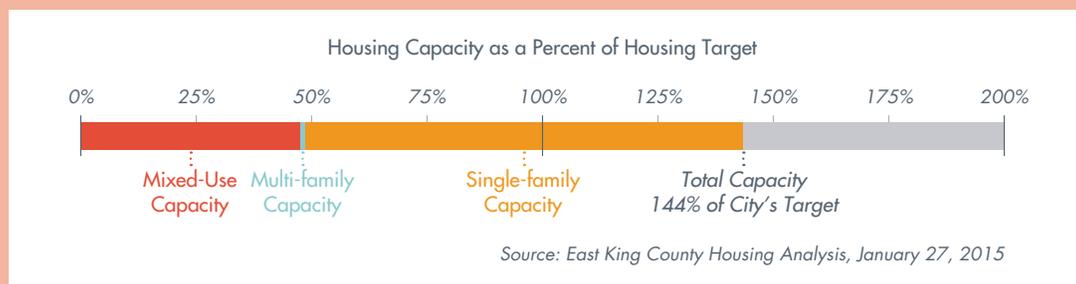
*Low-density development*

Area Median Income (AMI)

## Housing Affordability

### Growth Management Act Context

**Comprehensive Plan Requirements.** The Growth Management Act requires that comprehensive plan housing elements contain an inventory and analysis of projected housing needs to manage projected growth, provide a statement of goals and policies for the preservation, improvement and development of housing, identify sufficient land for housing, and make adequate provisions for existing and projected needs of all economic segments of the community.



As shown in the bar chart above, the City of Sammamish has demonstrated sufficient land for housing, with a housing capacity of 144% of the City's housing target. Given the cost of single family housing, and because mixed use and multifamily housing types are typically more affordable than single-family, detached housing, the City recognizes the importance of having sufficient zoned capacity for multi-family and Town Center mixed use residential development in order to meet affordability needs. As shown above, approximately 50 percent of the City's capacity was in either multi-family or mixed use residentially zoned land. This is an important element in the City's overall approach to providing for affordable housing in Sammamish.

**Countywide Planning Requirements.** The King County Countywide Planning Policies (CPPs), in addition to reaffirming the GMA housing goals, require all cities to share the responsibility for achieving the goal of an equitable distribution of affordable housing in King County. Through the CPPs, cities in King County have agreed that housing in each community should reflect the existing countywide mix of household income. The CPPs define the county-wide need for housing by income as follows:

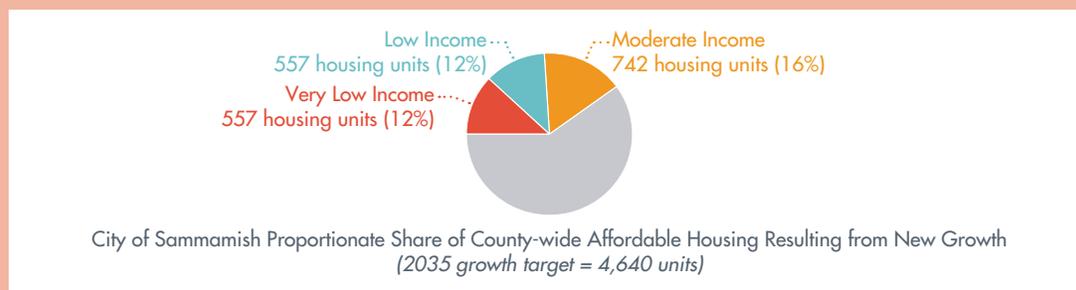
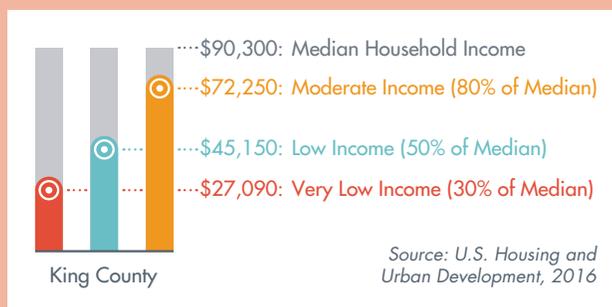
- 50–80% of AMI (moderate) 16% of total housing supply
- 30–50% of AMI (low) 12% of total housing supply
- 30% and below AMI (very low) 12% of total housing supply

Currently the supply of existing affordable housing for lower income households is less than existing needs both countywide and in many cities, especially for very low income households. Sammamish has only about 2 percent of the City's existing housing stock affordable at up to 50 percent of median income, and about 5 percent affordable between 50 percent and 80 percent of median income. This is a much lower proportion than most other cities countywide and in East King County.

The CPPs encourage cities to employ a range of housing tools to address the countywide need and recognize that local jurisdictions should tailor their housing policies based on local circumstances and conditions. Cities are also expected to work collaboratively to meet the regional affordable housing need and to monitor and measure results.

### Measuring Countywide Affordable Housing Need

These charts help to illustrate the estimated City of Sammamish proportionate share of the countywide affordable housing need resulting from new growth. The chart at right summarizes King County household income levels corresponding to 80, 50, and 30 percent of the 2016 HUD estimate of King County median household income. Based on the City’s housing target of 4,640 units, the pie chart below shows the amount of affordable housing needed at each income level to meet a proportionate share of countywide affordable housing demand.



Recognizing that Sammamish has a lower proportion of affordable housing than other cities in East King County, the City will continue to work toward fulfilling its role in meeting the countywide need for affordable housing in King County. The goals and policies in this Housing Element specifically identify the policies, strategies and actions identified by the City to address this goal.

### **Special needs**

**housing** in this plan includes homes suitable for and occupied by people with one or more self-help limitations, such as physical or mental disability, long-term illness, or alcohol or drug issues. The housing may or may not incorporate supportive services, and may be permanent or transitional. Examples include adult family homes, assisted living facilities, and group homes for people with developmental disabilities.

### **Universal design**

refers to a broad spectrum of ideas meant to produce products, buildings, or other built environments that are usable to the greatest extent possible by everyone, regardless of their age, ability, or status in life. Wheelchair ramps, essential for people in wheelchairs but also used by all, are a common example. There are also cabinets with pull-out shelves, kitchen counters at several heights to accommodate different tasks and postures, and low-floor buses that “kneel” (bring their front end to ground level, rather than on-board lifts).

- Policy H.3.7 Support affordable rental and ownership housing throughout the city especially in areas with good access to transit, employment, education and shopping.*
- Policy H.3.8 Ensure that affordable housing achieved through public incentives or assistance remains affordable for the longest possible term.*
- Policy H.3.9 Maintain a record of publicly owned land, and if land is determined to be surplus for public purposes and is suitable for housing, consider its use for affordable housing with a preference for housing for low-income and very-low income households.*

## **Goal H.4 Housing for People with Special Needs**

Support a variety of housing opportunities to serve those with special needs.

- Policy H.4.1 Support ways for older adults and people with disabilities to remain in the community as their housing needs change by encouraging universal design or retrofitting homes for lifetime use.*
- Policy H.4.2 Support a range of housing types for seniors; e.g., adult family homes, skilled nursing facilities, assisted living and independent living communities.*
- Policy H.4.3 Ensure development regulations allow for and have suitable provisions to accommodate housing opportunities for special needs populations in Sammamish.*
- Policy H.4.4 Encourage the geographic distribution of special needs housing throughout the city, understanding that some clustering of such housing may be appropriate if proximity to public transportation, employment opportunities, medical facilities or other services is necessary.*
- Policy H.4.5 Support public and private housing and services for people who are homeless.*

**Goal H.5 Regional Collaboration**

Actively participate and coordinate with other agencies in efforts to meet regional housing needs.

*Policy H.5.1 Support the development of region-wide plans for housing affordable to households with moderate, low and very low incomes, including those with special needs.*

*Policy H.5.2 Support a coordinated regional approach to homelessness by supporting public and private housing and services for people who are homeless and work with other jurisdictions and health and social service organizations, including faith-based and other non-profit organizations, to develop a coordinated, regional approach to homelessness.*

*Policy H.5.3 Maintain membership in inter-jurisdictional agencies to promote affordable housing on the Eastside.*

*Policy H.5.4 Support and encourage housing legislation at the county, state, and federal levels that promotes the City's and region's housing goals and policies, including support for affordable and sustainable housing for all residents in the City and region.*

Single family homes  
near Allen Lake



For more information, see  
the recommended 2006  
Housing Strategy Plan,  
Exhibit A in Volume II.H,  
beginning on page H.77.

### **Goal H.6 Monitoring**

Implement Housing Element goals in a manner that is effective, efficient and transparent.

- Policy H.6.1 Adopt a Housing Strategy Plan to outline benchmarks, steps and milestones toward implementation of this Housing Element.*
- Policy H.6.2 Support regional housing strategies.*
- Policy H.6.3 Monitor the city's housing supply, type and affordability including measurable progress toward meeting a significant share of the countywide need for affordable housing for very low-, low-, and moderate-income households.*
- Policy H.6.4 Evaluate and report on how the goals and policies of this Housing Element are being achieved.*
- Policy H.6.5 On a regular basis, based on results of monitoring local data and effectiveness of local regulations and programs, reassess and adjust policies and strategies to meet local housing needs.*

**CITY OF SAMMAMISH  
WASHINGTON  
RESOLUTION NO. R2006-231**

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**A RESOLUTION OF THE CITY OF SAMMAMISH CITY  
COUNCIL APPROVING A HOUSING STRATEGY PLAN**

WHEREAS, the City of Sammamish has adopted a comprehensive land use plan that includes a housing element as required by the State Growth Management Act; and

WHEREAS, the Housing Strategy Plan is anticipated in the housing element of the City's Comprehensive Plan as a tool to assist the City in meeting it's housing goals; and,

WHEREAS, the adopted Sammamish Comprehensive Plan reflects a balance of many goals and objectives arising from the state Growth Management Act (GMA) and calls for a variety of implementation actions to realize those goals over time;

WHEREAS, this Housing Strategy is one of several current and future efforts to realize the goals and objectives of the Comprehensive Plan, and the priorities described in the Housing Strategy should be pursued in coordination with and balanced with other work program efforts;

WHEREAS, the City Council recognizes the challenge that housing affordability presents in Sammamish and many other communities in the Puget Sound region, and is committed to identifying meaningful and effective strategies to address that challenge;

WHEREAS, many factors are involved in housing affordability and housing choice policy issues, and that policy options for specific regulatory standards or programmatic techniques should take into account and balance a variety of information prior to any decision being made;

WHEREAS, A Regional Coalition for Housing (also known as ARCH) has assisted the City in developing a housing strategy plan utilizing the policy guidance in the City's Comprehensive Plan; and,

WHEREAS, the Sammamish Planning Commission considered the plan at three regular meetings, and has recommended priority rankings for the various strategies within the plan; and,

WHEREAS, an environmental review has been conducted in accordance with the requirements of the State Environmental Policy Act, and a SEPA threshold determination has been prepared under Chapter 43.21C RCW for the plan; and,

WHEREAS, the Sammamish Planning Commission, after conclusion of deliberations on February 2, 2006, voted seven to zero to recommend City Council approval of the Housing Strategy Plan and the priority rankings contained therein; and,

WHEREAS, the City Council held a public hearing on the Housing Strategy Plan on March 7, 2006 and;

WHEREAS, the City Council has considered the plan, the recommendation of the Planning Commission, and public comment received; and

**NOW, THEREFORE, THE CITY COUNCIL OF THE CITY OF SAMMAMISH, WASHINGTON, DO RESOLVE AS FOLLOWS:**

The Housing Strategy Plan, attached as Exhibit A, is hereby approved by the City of Sammamish City Council. This document is intended to help guide future work program efforts by identifying high, medium and low priorities for future work and implementation. The strategies listed are intended to generally describe the type of program, regulation, or effort to be pursued. Each item likely will require follow up work, including public input, environmental analysis, and Planning Commission review before consideration by the City Council.

**ADOPTED BY THE CITY COUNCIL AT A REGULAR MEETING THEREOF ON THE 21<sup>st</sup> DAY OF MARCH, 2006.**

CITY OF SAMMAMISH

  
Mayor Michele E Petitti

ATTEST/AUTHENTICATED:

  
Melonie Anderson, City Clerk

Approved as to form:

  
Bruce L. Disend, City Attorney

Filed with the City Clerk: March 3, 2006  
Passed by the City Council: March 21, 2006  
Resolution No R2006-231

City of Sammamish Housing Strategy Plan – February 2, 2006 PC Recommended Draft

STRATEGY (Related Housing Element Policy)

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
Update	Action					

**A. NEIGHBORHOOD QUALITY** (HP-1, HP-2, HP-3, HP-4, HP-5)

Neighborhood Quality Objectives and Desired Outcomes:

Neighborhood quality policies focus on preserving and enhancing existing residential single family neighborhoods. The plan strives to protect neighborhoods by directing new growth consistent with the community vision to appropriate sites. Policies emphasize compatibility with existing neighborhood character for adjacent and infill development. The plan also strives to involve neighbors and community groups in neighborhood actions and improvements.

**AI. NEIGHBORHOOD QUALITY: LAND USE REGULATIONS**

- Sub Area Plans for Centers** Develop Subarea Plans for the Inglewood and Pine Lake Centers; and a Master Plan for the Sammamish Commons area. Promote public notification and community participation in subarea planning (LUP 2.2, HP-3)
- Community Design Standards** Develop community design standards to reflect the desired characteristics of each neighborhood planning area or designated community center. Design standards should address issues such as: (LUP-3.11, LUP-6.2, LUP-6.3, HP-2, HP-3)
  - Design criteria for SF dwellings on individual lots (LUP-6.2)
  - Requirements for design variety while providing for designs with distinctive local character (LUP-3.11)
  - Compatibility with surrounding uses (LUP-3.11, HP-2)
  - Buildings of a scale and character appropriate to the site (LUP 3.11)
  - Personal safety and reduction of vandalism (LUP-1.1, LUP 6.7)
  - landscape and open space requirements that residential development fit in with the natural landscape; protects the privacy of other residences; and maintains the character of the nearby neighborhoods (LUP 14.1, LUP 3.11)
  - promote public notification and community participation / input (HP-3)

X				X	X	Town Center(TC) H
						Other Centers (OC)-M
X				X	X	M
						M
						H
						M
						M
						M

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- Compatible Infill in Transition Areas & Areas with Certain Services**  
 Develop Community Design Standards for compatible infill, especially in areas which (1) transition between SF residential and other uses or densities;(2) are served by an arterial street system with sidewalks; (3) are located within one-quarter mile of a neighborhood park or recreation area;(4) have nearby pedestrian access to public transit services; and, (5) allow access by service alleys when compatible with topography. (LUP-7.7, LUP-7.8, HP-1, HP-2,HP-3, HP-4)

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
						on-going
X				X	X	H

**AII. NEIGHBORHOOD QUALITY: DIRECT AND INDIRECT FORMS OF ASSISTANCE**

- Neighborhood Enhancement** Provide support for individuals and organizations that promote neighborhood enhancement and public art. Include community participation in neighborhood enhancement programs. (HP-5, HP-3)
- Housing Repair and Preservation** Promote preservation of existing housing by City support of organizations and programs involved in housing repair and education. City actions may include: (HP-18)
  - partner with the King County Housing Repair and Rehabilitation Program or non-profit organizations such as Rebuilding Together Eastside to assist low income residents maintain and repair the health and safety features of their homes
  - educating the community about Housing Repair programs through community fairs, brochures, City website etc.
- Provide Infrastructure Improvements** In the City's Capital Facilities Plan provide for regular infrastructure maintenance in residential neighborhoods. (HP-39)

				X	X	L
				X	X	L
						M
	X	X	X	X	X	on-going

**B. TYPES, VARIETY AND AMOUNT OF HOUSING** (HP-6, HP-7, HP-8, HP-9, HP-10, HP-11, HP-12, HP-13)

Types, Variety and Amount of Housing Objectives and Desired Outcomes:

Types, Variety and Amount of Housing policies focus on allowing new housing types that

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Land Use Code	Council Update	Population Served				Priority
		Low	Mod	Med	Mkt	

give the market the opportunity to provide housing choices to meet changing population needs and preferences. The proposed single-family alternatives, including cottages, ADUs and attached single-family homes, are compatible with existing neighborhoods and the environment.

Providing opportunities for smaller, more affordable starter homes, homes suitable for empty nesters, and homes for those who work in the community is consistent with the essence of the City's vision of community.

**BI. TYPES, VARIETY AND AMOUNT OF HOUSING: LAND USE REGULATIONS**

- ADUs** Track production of ADUs and evaluate effectiveness of land use regulations in encouraging production while balancing maintaining neighborhood compatibility. Explore other actions for encouraging additional creation. Actions may include: (HP-19, HP-10)

  - streamlined permits
  - revise existing ADU regulations (more flexible, less restrictive, reduce procedural requirements) to encourage additional ADU creation while addressing neighborhood compatibility
  - Make ADU permits available on mybuildingpermit.gov
- Mixed Use Design Standards** Develop mixed use design standards and development regulations in City centers, including Inglewood, Pine Lake and the Town Center planning area. Consider issues such as: (LUP-2.4, LUP-2.6, LUP-3.12, LUP-7.5, HP-3, HP-6, HP-9)

  - Attractive street fronts with human scale (MF) (LUP-2.4)
  - Connecting walkways (LUP-2.4)
  - Horizontal façade regulations to ensure variation in façade, rooflines and other building design features to give a residential scale and identity to MF (LUP 7.5)
  - Adaptive re-use of existing structures
  - Innovative design techniques (LUP-2.6)
  - promote public notification and community participation / input (HP-3)
- Incentives to Expand Housing Choice** Provide incentives for diverse housing

X			X	X		M
X				X	X	H H M L TC-H/OC-M on-going
X			X	X	X	

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STRATEGY (Related Housing Element Policy)

opportunities that meet community needs. (LUP-1.4, LUP-2.2, LUP-1.5, LUP 2.5, LUP-2.6, LUP-2.7, HP-6, HP-20, LUP-3.5)

Housing to consider include:

- a. **Diverse housing opportunities in City centers** that may include MF, mixed use and mixed income residential located close to services and arterials (e.g. Inglewood, Pine Lake, the Sammamish Commons SSA, and properties along 228th that may be affected by the Sammamish Commons). Incentives may be considered for community friendly development in centers, such as innovative design, walkway connections, public open spaces, below grade parking and ground floor commercial.
- b. **Affordable or Workforce Housing** including MF close to services and arterials, such as near Inglewood Center, Pine Lake center, and Sammamish Commons SSA.

Incentives to consider include:

- flexible development standards, e.g. reduced/flexible minimum lot area, setbacks, lot dimensions, height regulations or transitional area buffers. Provide residential density incentives where project demonstrates clear and compelling need and public benefit (LUP-3.5)
- height incentives, e.g. allowing modified Type V wood frame construction up to 5 stories in R-6 & R-8 (current limits 35’); R-12 & R-18 (current limits 60’)
- innovative parking designs
- strategic capital investments, infrastructure improvements
- State provision (RCW 84.14) to allow 10 year multifamily tax exemptions in Urban Centers. (HP-6, HP-20)
- permit expediting, streamlined administrative process

- 4. **Innovative Housing** Provide regulatory flexibility to allow innovative housing compatible with SF neighborhoods or SF transition areas. Housing types may include accessory units, small lot SF, attached SF, carriage houses or cottages, townhouses, manufactured housing; and multiplexes (“great-house” that resembles a SF unit). (LUP 1.1, LUP 7.4, HP-6, HP-10, HP-11, HP-12). Strategies

Land Use Code	Council Action	Population Served				Priority
		Low	Mod	Med	Mkt	
						TC-H/OC-M
						TC-H/OC-M due to timing
						M
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						H
						H
						L
						L
X			X	X	X	

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- may include:
- Innovative Housing Demonstration Projects
  - Mixing attached and detached housing in appropriately zoned areas. (LUP 7.4)
5. **Transit Oriented Housing Development** Consider potential sites and appropriateness of land use regulations that could allow for Transit Oriented Housing Development (TOHD) near existing or planned transportation facilities. (LUP-1.4, LUP-2.2, LUP 2.5, LUP-2.6, HP-9)
  6. **Manufactured Housing** Allow manufactured housing in all residential zones consistent with Senate Bill 6593 (enacted 2004) that requires local governments to regulate manufactured housing in the same manner as other housing. (HP-12)
  7. **Flexible Subdivision and Short Plat Standards** Evaluate effectiveness and flexibility of subdivision and short plat standards to allow clustering of new residential development as a means of protecting environmentally sensitive areas. In addition to clustering, consider the following: (HP-3, HP-8)
    - Integrate different housing types and densities within projects
    - density averaging
    - shared driveways
    - small lot and zero lot line development
  8. **Minimum Density Requirements** Adopt minimum density requirements to the R-8, R-18, NB, CB and O zones.
  9. **Growth Phasing for Residential Development** Adopt residential development growth phasing that guides the location and timing of residential growth, recognizing environmental capacities and level of service standards, while providing for residential housing targets, including affordable housing. Account for on-going review. (LUP-3.4)
  10. **Criteria to Allow MF Zoning Increase** Establish criteria for evaluating rezone requests that would establish "demonstration of a clear and compelling need and public benefit"; as well as location criteria; e.g. should be located close to arterials served by public transit and within walking distance of commercial activities, parks and recreational facilities. (LUP-3.5, LUP 7.6, HP-7, HP-21)

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
						M H
X				X	X	H
X				X	X	Done
X					X	M
X				X	X	Done
X				X	X	Done
X		X	X	X	X	H

City of Sammamish Housing Strategy Plan – February 2, 2006 PC Recommended Draft

STRATEGY (Related Housing Element Policy)

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
Update	Action					

**BII. TYPES, VARIETY AND AMOUNT OF HOUSING: DIRECT AND INDIRECT FORMS OF ASSISTANCE**

- ADUs** Develop education and community outreach efforts to increase production of ADUs.
- Support Ownership Opportunities** Support innovative programs to support ownership housing for low, moderate, and middle income households (e.g. owner-built housing, shared housing, 1<sup>st</sup> time homebuyer assistance programs, manufactured housing communities, price-restricted ownership, small lot and multiplex SF). Innovative programs may include: (HP-23)
  - Habitat for Humanity (assisted by ARCH HTF)
  - WSHFC 1<sup>st</sup> time homebuyer state bond mortgage programs
  - WSHFC/ARCH/KC Homebuyer Assistance Program (assisted by ARCH HTF)
  - Manufactured Housing Community Preservationists (assisted by ARCH HTF)
- Capital Investments to Support Mixed-Use and Mixed Income Housing** Include investment strategies, e.g. planned and existing infrastructure, for Town Center planning area that adequately encourages mixed use and mixed income residential neighborhoods. (LUP-1.4, LUP-2.2, LUP 2.5, LUP-2.6, LUP-2.7, HP-9)
- Technical Assistance and Education** Provide technical assistance to establish innovative and diverse housing concepts. City actions may include (HP-22):
  - housing tours for public officials and interested citizens that recognize good quality design, reasonable construction costs, and community acceptance in housing projects
  - information workshops to increase developer interest and capacity for innovative, well designed infill housing
  - Print ads to promote housing choice and diversity
  - residential design awards that recognize good quality design, reasonable construction costs, and community acceptance in housing projects

X			X	X		H
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	X			X	X	H
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STRATEGY (Related Housing Element Policy)

Land Use Code	Council Update	Population Served				Priority
		Low	Mod	Med	Mkt	

**C. HOUSING AFFORDABILITY** (HP-14, HP-15, HP-16, HP-17, HP-18, HP-19, HP-20, HP-21, HP-22, HP-23, HP-24)

Housing Affordability Objectives and Desired Outcomes:

Housing Affordability policies support opportunities to preserve and develop housing in the City and region to meet the needs of all economic segments of the community. The plan includes policies, incentives, regulations and programs appropriate to local housing conditions to accommodate the City’s share of housing affordable to low and moderate-income households, consistent with regional housing targets. Affordability targets are to be achieved in a variety of ways including accessory dwelling units, preservation of existing housing, and working with regional groups that support affordable housing. These options are to include design and review processes with the objective of providing affordable housing options while fitting into existing neighborhood character.

**CI. HOUSING AFFORDABILITY: LAND USE REGULATIONS**

- Criteria for Rezones requiring Affordable Housing** Establish standards and criteria for rezones to require providing affordable housing on or off-site. Criteria to include clear and compelling need and public benefit. (LUP-3.5, HP-7, HP-21)
- Zoning to allow Range of Housing Affordability** Establish a range of residential densities to meet community housing needs and considering compatibility with the character of the City. (LUP 8.2)
- Dispersed Affordable Housing** Through zoning and subarea planning ensure that affordable housing is dispersed throughout the community. (HP-15)

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X			X	X	X	H
X			X	X		H

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**STRATEGY (Related Housing Element Policy)**

4. **Procedures and Regulations** Streamline review procedures and regulation to minimize unnecessary costs and time delays. Balance this objective with maintaining opportunities for public involvement and review, public safety, and other explicitly stated City policies. Actions may include: (HP-17)
- **Fees.** Evaluate the cumulative impact of fees, including off site mitigation, to reduce negative impacts to housing costs without unduly compromising environmental protection, public safety, design, and public review.
  - **Permit process.** Evaluate timeliness of permit process to reduce negative impacts to housing costs without unduly compromising environmental protection, public safety, design, and public review.
  - Review **land use code** for redundant or overly restrictive regulations, particularly those which result in increased housing costs. Examples may include: allow rounding up of mf units at a lower fraction; increasing the distance between streetlights, reducing rights-of-way and street widths.
  - Review **administrative procedures** for ease of administration and consistency with procedures used in other jurisdictions.

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
X		X	X	X	X	L  H-in process  L  L

**CII. HOUSING AFFORDABILITY: DIRECT AND INDIRECT FORMS OF ASSISTANCE**

1. **Applications to other Funders** Provide support for funding applications and other efforts by market and not-for-profit developers to build new or rehabilitate existing housing. Support efforts of affordable housing agencies and social and health service agencies to address housing needs for all economic segments of the population. (HP-16, HP-24)
2. **Direct assistance for affordable housing.** Explore potential for a more dedicated revenue source that could be targeted toward affordable housing. Examples may include: (HP-22)
  - cash mitigation from new developments
  - portion of sales or property tax from new residential construction
3. **Impact Fee Reductions** Consider waiving or reducing fees for affordable housing. Examples may include permit fees, impact fees, hook-up fees. (HP-20, HP-22)

	X	X	X			on-going
	X	X				L
	X	X				M

City of Sammamish Housing Strategy Plan – February 2, 2006 PC Recommended Draft

**STRATEGY (Related Housing Element Policy)**

- evaluate which fees and if done programmatically or case-by-case
- 4. **Homebuyer Assistance** Promote homebuyer assistance programs offered by lenders and public agencies. Activities may include: (HP-23)
  - housing fairs
  - distribute homebuyer program info (Sammamish website, City newsletter/press release, brochure display)

Land Use Code	Council Update	Population Served				Priority
		Low	Mod	Med	Mkt	
			X	X		L

**D. SPECIAL NEEDS HOUSING** (HP-25, HP-26, HP-27)

Special Needs Housing Objectives and Desired Outcomes:

Special Needs Housing policies support equal and fair housing access for all members of the community, including individuals with special needs. City's codes and ordinances provide the necessary flexibility for group homes, home based care or other housing options for persons with special needs.

The plan recognizes that providing housing for persons with special needs often requires regional partnerships, such as Sammamish's participation with the King County Consortium and ARCH.

**DI. SPECIAL NEEDS HOUSING: LAND USE REGULATIONS**

1. **Dispersed Special Needs Housing** Through zoning and subarea planning, ensure special needs housing is dispersed throughout the community. (HP-25)
2. **Fair Housing Act Consistency** Review group homes standards for consistency with the Federal Fair Housing Act. Ensure codes provide opportunities for special needs housing, including emergency housing, transitional housing, assisted living, independent living, family based living and institutions. (HP-27, HP-10)
  - evaluate that provisions allow for reasonable accommodation
  - provide regulatory flexibility to promote independent living (HP-10)
  - ensure that assisted housing and group homes are treated the same as housing of a similar size and density
  - ensure policies do not preclude special needs housing from any residential zoning districts

X		X	X			L
X		X	X			M

City of Sammamish Housing Strategy Plan – February 2, 2006 PC Recommended Draft

**STRATEGY (Related Housing Element Policy)**

- evaluate residential regulations to ensure they allow group living situations
  - to avoid excluding those with disabilities, ensure that land use code definitions (disability, residential care facilities) are current to ADA/FHA
3. **Senior Housing** Review senior housing land use regulations. Ensure that regulations support senior housing and recognize smaller household sizes, which may include: (HP-27)
- reduced parking requirements
  - intensity of development (e.g. density bonus or relaxed density standard)
  - recognize different and emerging types of senior housing and account for different levels of need and impact on the community
4. **Homeless Encampments** Review existing TUP regulations and consider criteria, process and conditions for homeless encampments. (HP-27)

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
						on-going
X			X	X	X	M
X		X				H

**DII. SPECIAL NEEDS HOUSING: DIRECT AND INDIRECT FORMS OF ASSISTANCE**

1. **Applications to Funders** Provide support for funding applications and other efforts by market and not-for-profit developers, housing agencies, and social and health service agencies, to build new or rehabilitate existing special needs housing. (HP-26)

	X	X	X			on-going

**E. REGIONAL EFFORTS** (HP-28, HP-29, HP-30, HP-31, HP-32, HP-33, HP-34)

Regional Efforts Objectives and Desired Outcomes:

Regional Efforts policies support a coordinated, regional approach to meeting housing needs; particularly housing for persons with special needs or lower income families. Policies include support of regional housing coalitions and innovative public-private partnerships that are consistent with the City's land use policies.

**E. REGIONAL EFFORTS** (HP-28, HP-29, HP-30, HP-31, HP-32, HP-33, HP-34)

1. **Countywide Planning Policies** Coordinate with countywide housing policy and analysis, such as updates to Countywide Planning Policies. (HP-30)

X		X	X	X	X	on-going
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**City of Sammamish Housing Strategy Plan – February 2, 2006 PC Recommended Draft**

**STRATEGY (Related Housing Element Policy)**

2. **Housing Balance** Work cooperatively with other jurisdictions to achieve a regional fair share housing balance and maximize housing resources, e.g. ARCH. (HP-34)
3. **Regional Land and Housing Monitoring** Collect housing information on a regular basis needed for regional Benchmarks, Buildable Lands and OFM housing reports. (LUP 16.2, HP-28HP-36, HP-37)
4. **Regional Housing Finance Strategy** Work with other jurisdictions to develop and implement a new regional housing finance strategy. (HP-29).
5. **Federal Housing Legislation** Review, and as appropriate, provide comment on county, state and federal legislation affecting housing in Sammamish. (HP-32)

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
	X	X	X	X	X	on-going
		X	X	X	X	on-going
	X	X	X	X		on-going
	X	X	X	X	X	on-going

**F. LOCAL IMPLEMENTATION / OVERSIGHT**

(HP-35, HP-36, HP-37, HP-38, HP-39)

Implementation Objectives and Desired Outcomes:

Implementation policies focus on review and update of the housing plan and development standards in order to measure their effectiveness in meeting the housing needs of Sammamish residents. Plan implementation may be through sub-area and special district planning, through a housing strategy plan, regulatory amendments, residential development growth management tools, and other amendments to development permit processes that are participatory, timely, predictable and fair to all affected parties.

1. **Single Family Neighborhoods** Monitor zoning guidelines and development to ensure single-family dwellings are the principal use in the City's established single family neighborhoods. (LUP 8.3)
2. **Monitor Innovative Housing Development** Review effectiveness of housing regulations and approval process to allow/encourage a variety of housing types to meet community housing need. Innovative housing types may include: Accessory units; small lot SF; attached SF; carriage houses or cottages; townhouses; mixed use residential; multiplexes ("great-house" that resembles a SF dwelling unit); manufactured housing; and Transit oriented housing development. If a need is

X					X	on-going
X				X	X	future work item

City of Sammamish Housing Strategy Plan – February 2, 2006 PC Recommended Draft

STRATEGY (Related Housing Element Policy)

- determined, consider incentives and programs to encourage, e.g. BI.3, BI.4. (LUP 1.1, LUP 7.4, HP-6, HP-9, HP-10, HP-11, HP-12)
3. **ARCH Housing Trust Fund** Participate in local, interjurisdictional programs, such as the ARCH Housing Trust Fund, to coordinate and distribute funding of affordable and special needs housing. (HP-31, HP-34)
  4. **Housing Supply** Monitor development and evaluate the affects new regulations and/or rezones may have on the housing supply/land capacity, and the community vision. Monitor progress in meeting housing needs and report to City Council. (HP-13, HP-36, HP-37)
  5. **Public Land Survey** Develop and maintain an inventory of surplus and underutilized public lands. Review survey to determine if such lands are suitable for housing and other public uses. (HP-36,HP-38)
  6. **Infrastructure Improvements** Monitor infrastructure improvements and maintenance in residential neighborhoods consistent with City's Capital Facilities and subarea plans. (HP-39)
  7. **Housing Strategy Plan** Prepare a Housing Strategy Plan to develop strategies to address low and moderate income housing targets consistent with the Countywide policies. Update every three years. (HP-14, HP-35)
  8. **Housing Element Updates** Review and update the Housing Element at the time of the Comprehensive Plan Update. (HP-35)

Land Use Code	Council	Population Served				Priority
		Low	Mod	Med	Mkt	
	X	X	X	X		H
			X	X	X	on-going
		X	X	X	X	on-going
	X	X	X	X	X	on-going
	X	X	X	X	X	in process
X		X	X	X	X	on-going

No.	Planning Commission Meeting Date	Meeting Summary and Learning Achievements
<i>Project Kick-off</i>		
#1	<b>September 7, 2017</b>	Staff walked the Planning Commission through the basic purpose of a Housing Strategy Plan, including some of the elements of the City's existing Housing Strategy Plan from 2006, as well as the Commission's role in the update of the Housing Strategy Plan. Another objective of this meeting was to build the Commissioners' understanding of Sammamish housing policy, the planning framework that we work within, and ultimately the manner in which those affect the housing supply. A final intent of this meeting was to inform the Commission of the players involved in housing and the extent to which the City can affect change in the housing supply.
<i>Work Sessions</i>		
#1	<b>December 6, 2017</b>	Planning Commission took the next step in understanding the Housing Strategy Plan at the first work session. There was a heavier focus on data about Sammamish's housing needs and characteristics. Furthermore, specific information was provided to the Planning Commission regarding strategies that are in the current Housing Strategy Plan and strategies that other local jurisdictions use. Planning Commission learned about how staff transforms housing policy into actionable strategies that can be implemented in the short term.
#2	<b>January 18, 2018</b>	At the second work session, Planning Commission heard about the types and amount of data that will help facilitate substantive conversations on housing strategies. Planning Commission also discussed the level and types of outreach efforts that will be used to engage the public and stakeholders. Planning Commission ultimately provided staff input on the appropriateness of the outreach and the types of data that staff should prepare for the upcoming work sessions.
#3	<b>February 1, 2018</b>	The Planning Commission progressed from from learning and gathering information on Sammamish housing policy to having a substantive discussion on housing characteristics and needs. Staff compiled and presented data for the City of Sammamish in the context of the larger region, including King County and east King County. Staff provided the requested demographic and housing data so that the Planning Commission can better understand Sammamish's current characteristics and housing supply. A firm understanding is key for the Planning Commission in understanding the gaps that exist between the current housing supply and the community need for housing.
#4	<b>March 1, 2018</b>	The Planning Commission was provided with clarifying and updated information based on questions and input received during and after the February 1, 2018 Work Session #3. Following a discussion on the clarifications, the Planning Commission then learned additional information about key housing gaps in Sammamish and decided to postpone the planned exercise until the next Planning Commission Work Session to be more deliberate about its approach to using housing data. Finally, the Planning Commission discussed specific housing strategies that the City has used in the past to affect positive impact on the City's housing supply, such as the donation fo surplus public land to Habitat for Humanity to construct affordable cottage units.



# HEALTH AND HUMAN SERVICES NEEDS ASSESSMENT

March 2018



## SAMMAMISH CITY COUNCIL, 2018 COUNCIL MEMBERS

- Christie Malchow, Mayor
- Tom Hornish, Deputy Mayor
- Karen Moran
- Jason Ritchie
- Chris Ross
- Pam Stuart
- Ramiro Valderrama

## SAMMAMISH CITY COUNCIL, 2017 RETIRED COUNCIL MEMBERS

- Don Gerend
- Kathleen Huckabay
- Bob Keller
- Tom Odell

## HUMAN SERVICES COMMISSION, 2018 MEMBERS

- Joyce Bottenberg
- Tom Ehlers
- Stanley Gunno
- C.J. Kahler
- Nushina Mir
- Jodi Nishioka
- Larry Wright

## HEALTH AND HUMAN SERVICES TASK FORCE, 2017 MEMBERS

- Tom Ehlers, Chair
- Larry Wright, Co-Chair
- Joyce Bottenberg
- Jane Dulski
- Nancy Johnson
- C.J. Kahler

## CITY OF SAMMAMISH, STAFF

- Lyman Howard, City Manager
- Jessi Bon, Deputy City Manager
- Angie Feser, Parks and Recreation Director
- Rita Badh, Community Services Coordinator
- Mike Sugg, Management Analyst



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**PROJECT TEAM**

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 Erika Rhett, Project Manager  
 Kristin Mardt, Lead Analyst  
 Jenn Tippins, Analyst & Outreach  
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# City of Sammamish Health and Human Services Needs Assessment

**FINAL** | March 6, 2018

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## Executive Summary

In every community, people have human services needs at some point in their lifetime, and Sammamish is no exception. In fact, the invisibility of these needs makes them particularly urgent. In many cases people do not know where or how to get help. For a teen considering suicide, a senior who needs assistance with daily living, or a recent immigrant who does not understand the health care system, it can be confusing figuring out how to get help. In a community where it



appears that most people have plenty, people may feel stigmatized by reaching out even when they know what they need to do. If the City is to continue to thrive as a “state-of-the-art community – engaged, responsive and generous in its support for the full range of human endeavor,”<sup>1</sup> it must thoughtfully examine the role it plays in supporting health and human services. There are ways the City can help make a difference for those in the community that need support.

This Needs Assessment identifies community needs in the realm of health and human services, and some preliminary ideas for actions the City can take to support those needs. In most cases, the City is not a direct provider of health or human services. However, it does provide crisis response through its emergency services agencies, and recreation through the parks and recreation program. To date, the City has provided small grants that support agencies doing health and human services work that benefits local residents. In the future, the City should consider how it can leverage its existing efforts for additional impact, how it can take a leadership role in developing new resources through community partnerships, and how it can become a stronger advocate for health and human service needs.

The following table includes a list of preliminary ideas for City action chosen for their potential to make an impact on community health and human service needs in the next three years. A few recommendations may have a longer timeline, but significant work could be completed within the next few years if the community is willing to engage. How quickly the City can accomplish these tasks depends on several factors: the availability of staff support, financial resources, and the cooperation of community partners. These ideas are organized around five priority issues: mental wellness, basic needs, cultural inclusion, seniors, and domestic violence. Additional information about the selection of the five priority issues can be found beginning on page 9.

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<sup>1</sup> Sammamish Vision for 2035.

**Preliminary Ideas for City Actions to Support Health and Human Services**

Action	Financial Support	Staff Support	Timeline
<b>MENTAL WELLNESS</b> <i>21% of Sammamish teens have considered suicide in the last year.</i>			
Mental Health Awareness Campaign	\$	2	2
Comprehensive Referral List	\$	2	1
Influence the Choice	\$	2	2
Mental Health First Aid	\$\$	2	2
School Counselor Support	\$\$	1	3
<b>BASIC NEEDS</b> <i>Approximately 1,500 people in Sammamish live in poverty.</i>			
Home Modification	\$\$	2	2
Food Van	\$\$	2	2
Rotacare Clinic	\$\$\$	2	3
<b>CULTURAL INCLUSION</b> <i>27% of Sammamish residents speak a language other than English at home.</i>			
Welcome and Orientation	\$\$	2	1
Cultural Navigators	\$\$	2	2
Bi-cultural Programming	\$\$	2	2
Cultural Competency Training	\$\$	2	1
<b>SENIORS</b> <i>40% of residents over age 75 have a disability in Sammamish.</i>			
Home Modification	\$\$	2	2
Senior Volunteer Bank	\$	2	1
Aging in Place	\$\$	2	1
Recreational Programming	\$\$\$	3	2
Transportation Shuttle	\$\$\$	3	3
<b>DOMESTIC VIOLENCE</b> <i>27% of women will experience domestic violence in their lifetime.</i>			
Domestic Violence Advocate	\$\$	2	1
Regional Support	\$\$	2	1
Domestic Violence Awareness Campaign	\$	2	2
Bystander Training	\$\$	2	1

**Financial Support**

- \$ Under \$100,000
- \$\$ \$100,000 to \$500,000
- \$\$\$ Over \$500,000

**Implementation Timeline Once Project is Started**

- ☞ Within a year
- ☞☞ Within 3 years
- ☞☞☞ Greater than 3 years

**Staff Support**



- Existing staff could be used, but may include a reassignment of work priorities
- Additional staffing needed to manage or coordinate
- Additional staffing needed to manage or coordinate and to implement

## Introduction

The City of Sammamish promotes a healthy community where every person is considered essential, and meeting basic human needs is considered a shared responsibility. In 2017, the City launched its first ever Needs Assessment process working closely with its Human Services Task Force and supported by BERK Consulting. This Community Needs Assessment will help



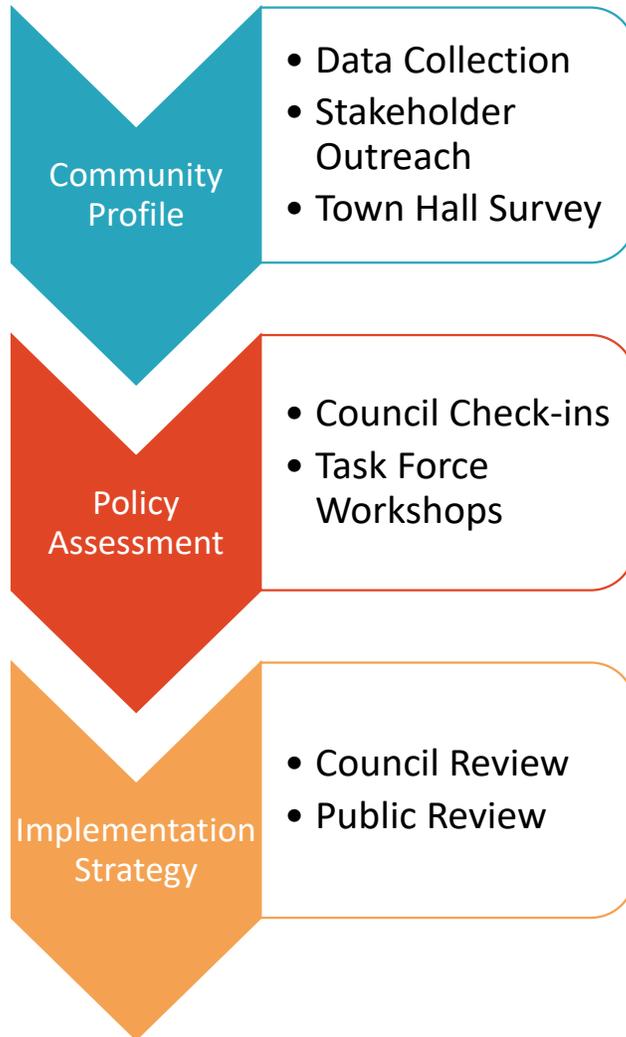
the City prioritize funding for addressing human and social needs and provide common baseline information shared by the City and community service partners. It will also serve as a roadmap for the newly formed Human Services Commission as it begins its work.

Currently, Sammamish does not directly provide human services, but acts as a resource for community members. The City provides grants of over \$200,000 every two years to agencies that provide health and human services to Sammamish residents and maintains a list of resources that people can use for self-referral. It also supports a part time Community Service Coordinator, a position created in 2015 that allows the City to engage more deeply in Human Services than it has in the past.

## PROCESS

Developing this Needs Assessment included three stages:

- **Creating a Community Profile** that describes the current well-being of Sammamish residents. This was developed through review of existing data sources, interviews, and outreach to service providers and community groups. Community input was collected during the summer of 2017 and included stakeholder interviews, three focus groups, four outreach events with providers and relevant organizations, and an online survey through a City of Sammamish Virtual Town Hall. The complete Community Profile and details about the outreach effort can be found in Appendix A.
- **Assessing policy** to understand current and potential strategies to address residents' needs. This included research on current efforts by the City and neighboring cities, presentation to City Council, and workshops with the Human Services Task Force.
- **Developing an implementation strategy** for the recommended policies and programs. This strategy will go through Council and public review.

**Needs Assessment Process**

The rest of this document examines community needs and lists preliminary ideas for actions the City can take to support these needs. It outlines the current state of health and human services, including what roles the City takes on now, then identifies five priority issues and recommends potential City action on each. Each action is assessed to identify potential next steps and preliminary needs for financial support, staff support, and timing.

## Current City Roles in Health and Human Services

The City is not a direct provider of health and human services, but some of the City's policies, services, and programs may intersect with health and human services issues. Where there are overlaps, there are opportunities to support community health and human services. This section describes City departments and programs that intersect with health and human services at this time.



### COMMUNITY DEVELOPMENT

The Department of Community Development maintains the Comprehensive Plan, which includes the development and implementation of policies that *“improve our quality of life by promoting the health, safety and welfare of the community, protecting and enhancing the natural and built environment.”*<sup>2</sup> This includes policies and standards for housing and transportation. There is strong policy support for health and wellness in the community through physical activity, transportation options, and affordable housing.

The Comprehensive Plan includes goals and policies for a healthy community. Land Use and Transportation goals and policies support a land use pattern that promotes walking and bicycling between neighborhoods and to community facilities such as parks, schools, and shopping. Policies include supporting regional transit and transportation systems that meet the needs of non-driving populations (such as seniors, youth, people with low incomes, or people with disabilities), including shuttle service, ride share, car share, or bike share.

Land Use and Housing policies support a high quality of life for families, including a healthy community with a range of housing options that meet all people's needs. This includes supportive housing for people with unique needs such as seniors, people with disabilities, and people experiencing homelessness. Policies also support Sammamish's participation in ARCH (A Regional Coalition for Housing) which develops, manages, and provides affordable housing throughout the Eastside. Currently the City also supports a Habitat for Humanity project that is building 10 homes in Sammamish to make homeownership options available to people with low incomes. Additional policy support for affordable housing is provided in the Sammamish Municipal Code (21B.75 SMC), where regulations specify minimum affordable housing requirements for any residential development in the Town Center. These regulations also include incentives for creating more affordable housing than what is minimally required.

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<sup>2</sup> <https://www.sammamish.us/government/departments/community-development/>

## PARKS AND RECREATION

The Parks and Recreation Department provides parks, trails, and gathering spaces for meetings or events. The department also coordinates community events, which are offered to the community free of charge. Most of the recreational programs in the city are provided by other agencies, such as the YMCA, the Boys and Girls Club, or the Issaquah Senior Center. These agencies allow low cost participation for those who are unable to pay fees for their programs. These services can promote physical and mental health for Sammamish residents through all stages of life.

Parks policies in the Comprehensive Plan focus on the planning, development, finance, and maintenance of facilities for active or passive recreational use. Such policies aim to ensure there are a variety of parks and trails that provide opportunities for fitness, play, exposure to nature, and social gathering, which are all components that support good physical and mental health. Recreation policies support the provision of indoor recreation opportunities that meet the needs of people of all generations, and developing strong partnerships. Currently the City is updating the Parks, Recreation, and Open Space (PRO) plan, which will build upon existing policies and programs.

## POLICE AND FIRE

The Sammamish Police Department provides services related to public safety and law enforcement. Sammamish contracts with the King County Sheriff to provide police services in the City. Eastside Fire and Rescue provides fire and emergency services to Sammamish. Police officers and fire and emergency personnel are sometimes the first, or only, contact from the City for individuals with acute health and human service needs. This can be especially true for people in domestic violence situations, and can also be true for some people experiencing homelessness or with mental health issues. First responders have a list of agencies and referral information they can give to people. Personnel are trained to deal with acute or crisis-level health and human service needs. However, navigating the system can be difficult for many that face basic needs challenges.

## COMMUNITY SERVICES COORDINATOR

The City employs a Community Services Coordinator who convenes the Human Services Task Force and serves as the City liaison to community groups, social service providers, and other human services agencies. As a liaison between the City and the community, the Coordinator is responsible for maintaining a directory of community resources and supporting both formal and informal service networks. The Coordinator participates in a variety of community meetings, programs, and events on behalf of the City. Currently this is a part time position that is funded for approximately 30-hours per week.

## TASK FORCE/COMMISSION

The 2017 Human Services Task Force is composed of six community members appointed by the City Council and represents faith groups, schools, human service providers, seniors, service organizations, public safety institutions, and the community at large. The task force guided this Needs Assessment and has the following responsibilities:

- Provide recommendations to the City Council on human service grant applications and related activities.
- Attend monthly task force meetings.
- Report quarterly to the Council Committee.



In late 2017, the City Council approved the formation of a seven-member Human Services Commission which will officially commence work in February 2018. The Human Services Task Force helped develop the proposal for the formation of the Commission.

## REGIONAL COORDINATION

Many of the health and human service concerns facing Sammamish are common throughout the Eastside and Puget Sound area; regional coordination can result in collective solutions that benefit Sammamish residents. The City of Sammamish is active in both the Sound Cities Association and the Puget Sound Regional Council (PSRC), which appoint members to regional committees that address issues related to health and human services, including aging, homelessness, affordable housing, transportation, public health, domestic violence, and mental illness. City Council members, and sometimes staff, can be appointed to these committees if they apply through Sound Cities or PSRC.

The City is also a member of A Regional Coalition for Housing (ARCH), a coalition of Eastside cities that work together to ensure opportunities for affordable housing. Sammamish contributes to the ARCH trust fund and reduces developer impact fees for projects that include affordable housing units.

- Sammamish provided \$200,000 for affordable housing through a City contribution to the ARCH trust fund in the 2016-2017 budget.
- Additional affordable housing contributions include an estimated \$83,000 per year reduction in impact fees for affordable housing units from 2017 through 2026.

## GRANT FUNDING 2016 - 2017

Sammamish provides grant funding for health and human services as part of the Human Service Funders Collaborative (HSFC), in addition to contributing to the ARCH trust fund. During the biennial budget process, the City Council reviews and approves funding for the Health and Human Services Grant Program. A flat amount is awarded.

In the 2016-2017 biennium:

- Funds distributed totaled \$249,670
- Spending equaled \$4.08 per resident
- 51 programs were funded at 39 different organizations

**By Program (n=51)**

Minimum Grant Size is \$1,000  
 Maximum Grant Size is \$10,000  
 Median Grant Size is \$4,000

**By Organization (n=39)**

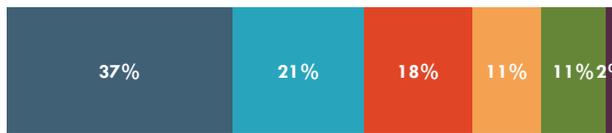
Minimum Grant Size is \$1,300  
 Maximum Grant Size is \$10,000  
 Median Grant Size is \$6,088

**Grant Distribution by Life Cycle**



Lifecycle	Funds Distributed
Adults	\$122,239
Youth	\$85,931
Seniors	\$26,500
Families & All Lifecycle Stages	\$15,000
<b>TOTAL</b>	<b>\$249,670</b>

**Distribution by New Priority Issue**



Category	Funds Distributed
Other	\$92,743
Basic Needs	\$53,588
Mental Wellness	\$44,500
Domestic Violence	\$28,039
Seniors	\$26,500
Cultural Navigation	\$4,300
<b>TOTAL</b>	<b>\$249,670</b>

Note: "Other" includes programs like adult education and job training, legal services, poison center emergency services, and birth-to-three early education opportunities.

## Priority Issues for Sammamish

The Community Profile looked at dozens of potential needs throughout the human lifecycle. Based on the results, the task force identified five priority issues for the City to pursue (not listed in a ranked order). These issues do not represent all needs in Sammamish, nor are they intended to (see the Appendix for a complete inventory of needs). Some needs, such as assisting veterans, will be supported by a focus on larger priorities such as mental wellness, meeting basic needs, or helping seniors. Other needs, such as helping all kids prepare for Kindergarten, were not considered a priority at this time, but that is not an indicator that no need exists. The five priority issues for Sammamish are:

- **Mental Wellness** – This includes both behavior health and substance abuse. Data indicates that Sammamish youth and adults feel stressed, depressed, and anxious at relatively high levels. There is a lot of pressure to be successful. When unaddressed, these types of mental health issues can manifest themselves in reduced quality of life, poor relationships, substance abuse, and self-harm or thoughts of self-harm. Mental health support is one need that appeared to affect many different people in the community.
- **Basic Needs** – Many people in Sammamish are fortunate to have their basic needs met, but some local residents experience periods of acute emergency and insecurity related to basic needs such as housing, access to medical care, or access to food. In a community full of wealth, it is important to help everyone secure their basic needs.
- **Cultural Inclusion** – Sammamish is a community with a high percentage of immigrants. Although other Eastside communities share similar demographics, cultural inclusion is an opportunity for Sammamish to embrace its identity as a welcoming community and ensure it is adequately meeting the service needs of its whole population.
- **Seniors** – Sammamish feels a responsibility to provide a good quality of life for aging residents. The City strives to be a quality place for families to live, and that includes community elders.
- **Domestic Violence** – Domestic violence is a problem that affects communities regardless of income, ethnicity, or other demographics. Rates of domestic violence in Sammamish may be about average, but in a community of generally low crime rates, it is perceived as proportionally larger. Also, the high cost of living in the region can be a barrier for those

### CITY ROLES

The City can take on several roles to implement the Health and Human Services recommendations in this assessment. These roles include:

- Leverage existing programs, plans, or policies for additional action and results
- Create new partnerships
- Provide funding support
- Create new direct-service programs (where applicable)
- Advocate for regional change at the county, state, or federal level.

who want to get out of domestic violence situations but are economically dependent upon their abuser.

Each priority issue is summarized in this assessment. The summary includes key information from the Community Profile to help establish why this issue is important to Sammamish, and includes a story sidebar that illustrates how this issue affects someone in the community. Current City actions are listed next, followed by metrics that show how the City can measure its progress in responding to the needs. Case studies are included in sidebars to demonstrate how other communities respond to these types of needs. A set of recommendations identify potential actions the City can take in the next three years to respond to the need. An implementation table follows the recommendations and identifies the general timeline, level of effort, and financial support needed to implement each recommendation.

In addition to the five priority issues, there are two advocacy issues that affect health and human services in Sammamish: lack of transportation options and affordable housing. These issues were mentioned repeatedly as barriers that affect everyone in Sammamish, but are particularly stressful for people who have other human service needs. Both reduce access to resources and hamper the ability to pay for other basic needs. Yet both affordable housing and transportation are complex regional problems. While the region works to address these issues in the long-term, advocacy is needed to provide short-term and medium-term solutions for Sammamish residents.

## MENTAL WELLNESS

### Community Needs

Sammamish is a community with a need to address mental wellness, both in terms of behavior health and substance abuse. Information from the Community Profile revealed that adults and youth experience significant stress. For adults, it may stem from the pressures of balancing two working parents with child care, concerns about rising costs in the region, or simply too many demands on one's time. Youth described a pressure to excel in school, bullying, and a life that can produce anxiety or depression. Sammamish is a multi-cultural community in which there may be very different attitudes about mental health related to family expectations or culture of origin. There can also be considerable stigma around the issue, which may lead to underreporting.

#### Adult Mental Health

Mental health plays an important role in the overall well-being of individuals and families. Poor mental health, along with a lack of access to mental health support, can have long-term consequences on the emotional, physical, and financial health of households and communities.

- According to the Washington State Department of Health, which publishes an indicator of poor mental health (defined as having 14 or more poor mental health days in the past 30 days), 8% of adults (approximately 4,900 people) in Sammamish reported that they had met this indicator.<sup>4</sup>

## UNDER PRESSURE

Dad is working long hours at his tech job. His team has been working on a project that has had trouble getting off the ground. He worries that his career is stalling and hopes that putting in additional effort will help him get a promotion. That promotion would take some of the pressure off the family finances and make their mortgage a little more affordable.

Mom loves her job, but she commutes into Seattle daily, spending almost two hours on the road each day. She is trying to support her husband by taking on a greater share of the responsibilities at home, but she feels pulled in several directions. She unwinds each night by drinking a bottle of wine.

Their daughter does well in school and has an active schedule of extra-curriculars with an eye toward college. Everything looks great on the outside, but she feels more like a resume than a person. She keeps it to herself because she doesn't want her parents to be disappointed in her. She doesn't want to add to their stress by telling them that she goes through periods of depression and has even had thoughts of suicide.<sup>3</sup>

<sup>3</sup> For each priority issue there is a story that illustrates the need. The characters in the stories are fictional, but they are a composite of real stories and experiences collected during the outreach phase of this project. School personnel, community organizations, and youth reported on the types of needs they encounter and people they know who are struggling.

<sup>4</sup> Most data sources report results in percentages, not hard numbers. That is because the data is collected through a

This measure is used nationally by the Centers for Disease Control (CDC).

- Across King County, this measure has remained flat for the last 15 years with no significant increases or decreases in the share of residents experiencing bad mental health.
- Seniors, who are included in the adult figures for mental health, can experience mental health problems related to social isolation, the stress of living on a fixed income, and the deaths of friends and loved ones.

### *Adolescent Mental Health*

Among adolescents, many factors can lead to anxiety, depression, and suicidal thoughts, including pressure to perform well in school, fixation on weight and appearance, and bullying, whether experienced in person or online. Untreated anxiety and depression can lead to substance abuse and even suicide. Currently, suicide is the leading cause of death for Washington teens aged 15 through 19.

During outreach for the Community Profile, teens commented that they were stressed and tired from school. Interviews revealed concerns about private access to mental health services. Cultural background, family expectations, and social stigma were all factors that make it important to some teens to have the ability to visit providers without peers or parents knowing about it.

The town hall survey conducted as part of this Needs Assessment showed that there is a felt need for mental health services, particularly for youth and teens who are struggling with stress, depression, and suicide. Respondents suggested coaching and counseling for children with attention-deficit/hyperactivity disorder (ADHD), stress management services for teens, and suicide prevention services for youth and teens.

Data from the Healthy Youth Survey<sup>5</sup> is presented in the exhibits below on the state of Sammamish adolescents' mental health, substance use, bullying, and family and community support.

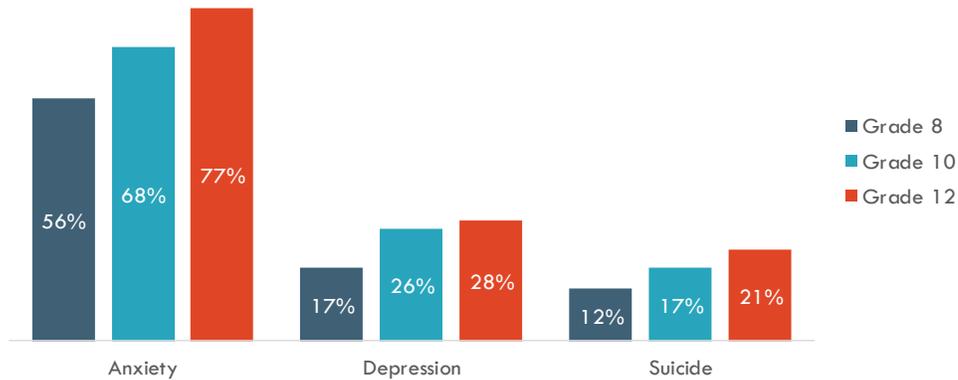
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sampling process that looks at the number of occurrences in a statistically valid subset of the community. Throughout this report, where percentages are reported there may be a number in parenthesis next to it to represent the approximate number of Sammamish residents affected by an issue. Such numbers are not an exact count, but intended to help the reader better understand how many people are directly affected.

<sup>5</sup> The Healthy Youth Survey is a survey conducted by the State of Washington that looks at the health of adolescents. It measures risk factors and behaviors that contribute to illness, disease, death, and social problems in youth. In 2016, over 230,000 students participated in the survey. Survey reports are available showing results at the state, county, and local level. For more information, see Appendix 1.A or visit [www.askhys.net](http://www.askhys.net).

Mental Health

**Exhibit 1. Percentage of Sammamish Schoolchildren Who Reported Mental Health Issues, 2016**

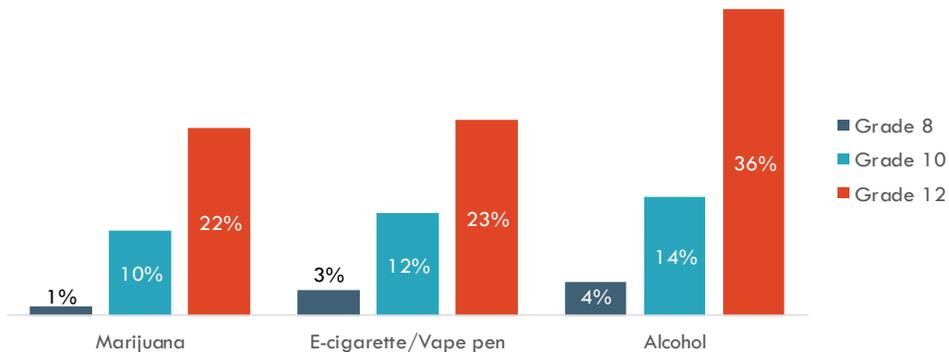


Source: Healthy Youth Survey Fact Sheets, 2016

- By the time students in Sammamish public schools reach the 12th grade:
  - 77% (approximately 745 students) reported being bothered by feeling nervous, anxious, or on edge for several days or more over the last two weeks.
  - 28% (approximately 270 students) reported feeling so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
  - 21% (approximately 200 students) have considered suicide over the past 12 months.
- Anxiety, depression, and suicide all appear to increase from grades 8 to 10 to 12, potentially reflecting increased stresses as youth get older.

Substance Use

**Exhibit 2. Percentage of Sammamish Schoolchildren Who Reported Substance Use, 2016**

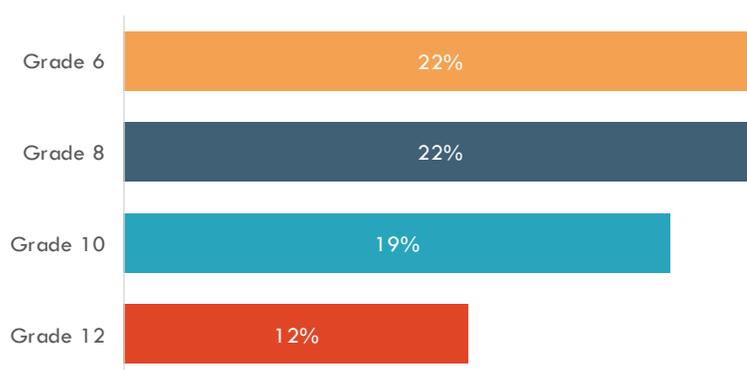


Source: Healthy Youth Survey Fact Sheets, 2016

- Among Sammamish public school 12<sup>th</sup> graders:
  - 22% (approximately 210 students) used marijuana at least once over the last 30 days.
  - 23% (approximately 220 students) used an e-cigarette at least once over the last 30 days.
  - 36% (approximately 350 students) drank alcohol at least once over the last 30 days.
- Marijuana, e-cigarette, and alcohol use all appear to increase as students get older.
- 8% (approximately 80 students) of Sammamish 10<sup>th</sup> graders and 23% (approximately 220 students) of 12<sup>th</sup> graders have had five or more drinks in a row in the past two weeks.

### Bullying

**Exhibit 3. Percentage of Sammamish Schoolchildren Who Reported Bullying, 2016**

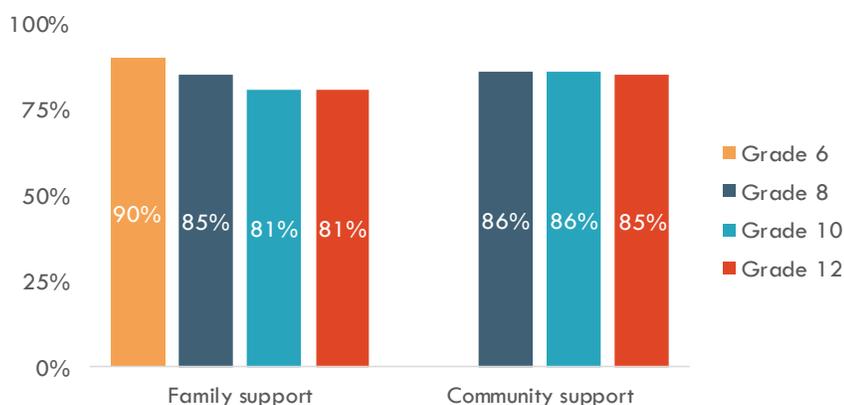


Source: Healthy Youth Survey Fact Sheets, 2016

When asked if students had been bullied at least once over the last 30 days, 22% of Sammamish 6<sup>th</sup> and 8<sup>th</sup> graders (approximately 440 students in both grades) responded that they had. This number decreases in higher grades, with 19% of 10<sup>th</sup> graders (approximately 180 students) and 12% of 12<sup>th</sup> graders (approximately 120 students) responding that they had been bullied in the last 30 days. It is unclear whether the drop in bullying in 12<sup>th</sup> grade is due to a reduction in bullying, the perception of being bullied, or a drop in reporting.

### Family and Community Support

Family and community support can help youth be more resilient to mental health challenges by providing an outlet to talk about important issues and creating a sense that someone is in their corner. In addition to providing a safe space, these supports can help boost self-esteem, problem solving, and coping skills. The Healthy Youth Survey shows that many youths feel they can talk to their mom, dad, or an adult in the community about something important. However, panelists at the Action Forum for Youth, an event that brought together Sammamish youth and community leaders to discuss the results of the Healthy Youth Survey, suggested otherwise. At this event, youth indicated that they hesitate to reach out to parents on important topics like substance use or suicidal thoughts for fear of disappointing them.

**Exhibit 4. Family and Community Support in Sammamish Schoolchildren, 2016**

Source: Healthy Youth Survey Fact Sheets, 2016

- 90% of 6<sup>th</sup> graders feel they can ask their mom or dad for help if they have a personal problem, but this decreases to 81% in the 10<sup>th</sup> and 12<sup>th</sup> grades.
- 85-86% of students in 8<sup>th</sup> through 12<sup>th</sup> grade feel there are adults in the community they can talk to about something important. This survey question was not asked to 6<sup>th</sup> graders.
- School nurses and district family liaisons reported that some families are reluctant to seek help for their children because they believe mental health is a family matter, or they fear social stigma.

### Indicators of Progress

Some of the factors affecting mental health for adults and youth in Sammamish may be related to personal factors such as choice of job or home or influences such as family expectations or support systems. Yet school nurses, youth organizations, and mental health specialists reported that these issues broadly impact the wellness of the entire community. Programs that support people experiencing high levels of stress may help to reduce depression, anxiety, and poor mental health in Sammamish. The most significant way that the community can improve mental health is to:

- Improve access to mental health care, particularly for members of the community that may have trouble obtaining help (such as youth).
- Remove the stigma associated with seeking help.
- Improve opportunities for awareness and early intervention before a mental health issue becomes a crisis.
- Reduce incidence of teen drinking and substance use.

### Current City Response

The City of Sammamish has several policies and programs in place to address mental health issues, though frequently at the point of crisis. In addition, the City provides grants to several

human service providers that offer services for those struggling with mental health issues or substance abuse, as outlined below.

### *Policies and Programs*

- Eastside Fire and Rescue works with King County EMS and Washington State to fund low-acuity type response units, commonly called community paramedic units. These can help address non-emergent medical issues before they either become emergencies or impact response times because of inappropriate use of 911 services.
- Sammamish police officers must attend a mandatory 72 hours of mental health crisis intervention training.
- By the first quarter of next year, Sammamish police officers will attend a 40-hour in-service training that covers talking to mentally distressed people and crisis de-escalation. This is in addition to other required online training on a variety of topics.

### *City Grant Program*

The City of Sammamish has provided grants to several human services providers that offer mental health services, totaling \$44,500 in 2016-2017.<sup>6</sup> These included:

- |                                       |  |
|---------------------------------------|--|
| ▪ Crisis Clinic – 24-hour Crisis Line | ▪ Issaquah School Foundation – VOICE mentoring program |
| ▪ Crisis Clinic – Teen Link           | ▪ National Alliance for the Mentally Ill               |
| ▪ Friends of Youth – Family Services  | ▪ Therapeutic Health Services                          |
| ▪ HERO House: Self Recovery           |  |

## **Preliminary Ideas for City Action**

### *Leverage Existing Policies and Programs*

- **Awareness Campaign.** A public education campaign on mental health awareness can help reduce stigma and promote available resources. City staff could use materials from local or national mental health resources, such as NAMI (National Alliance on Mental Illness) or the Anxiety and Depression Association of America. Staff resources will be needed to research campaign materials, get permission for their use, customize them for Sammamish, and publish and distribute materials. This will also require community outreach, through existing or new events. Specific campaigns could target families, youth, seniors, adults, or particular ethnic groups. The Human Services Commission could be helpful in vetting materials and promoting events.

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<sup>6</sup> Note that under the current grant program, the maximum grant amount is determined by the total budget assigned to the grant program and the number of applicants. It does not reflect the need or demand for services.

*Potential Work Plan Outline:*

- *City staff and Human Services Commission identify specific goals for the Awareness Campaign.*
- *City staff researches and presents materials for Commission review and recommendation, including an outreach plan.*
- *City staff customizes materials, conducts outreach.*
- **Comprehensive Referral List.** The City could create a comprehensive list of mental health referrals that is regularly updated and available online and wherever the City provides services. This would build off the list of resources already maintained by the Community Services Coordinator. Additional effort would be needed to reach out to service providers and verify the list regularly. More frequent updates would also require printing and distribution.
  - *Potential Work Plan Outline: City staff contact service providers and conduct research to develop and enhance existing resource list.*
  - *City distributes list in print and on the internet.*
  - *City establishes a review and update timeline.*

**Influence the Choice.** There have been several attempts to formulate a community effort to reduce youth alcohol and substance abuse, including The Idea Project and Influence the Choice. The Issaquah School District was working on a grant to fund the Influence the Choice program, and the Lake Washington School District was working on a similar program, but in both cases efforts stalled. The City could take a leadership effort in pulling together a partnership and coordinating efforts on a city-wide basis, financial support may depend upon the implementation steps developed by the group.

*Potential Work Plan Outline:*

- *City staff meets with school district representatives, including those from Eastside Catholic, to identify objectives for a program to reduce alcohol and substance use by teens.*
- *Local partners develop a plan of action and assign implementation tasks.*

*Create New Partnerships and Programs*

- **Mental Health First Aid.** The Lake Washington School District participates in a program called Mental Health First Aid ([www.mentalhealthfirstaid.org](http://www.mentalhealthfirstaid.org)), which teaches people how to identify, understand, and respond to signs of mental illness and substance abuse. Much like physical first aid, the training teaches people to recognize mental health issues and get people connected to help. Evergreen Health also sponsors Mental Health First Aid classes, including training for program instructors.

A community partnership between the City, the Lake Washington School District, Issaquah School District, and Eastside Catholic could extend this program. Other community partners could include community agencies like the YMCA, the Boys and Girls Club, or the local

chapter of NAMI. However, the program does not need to be geared only toward youth. City involvement and other partners could focus on broadly educating the community to understand how to identify and respond to mental health issues. A citywide campaign could promote community-wide training events to ensure that every neighborhood, community club, or workplace has at least one person trained in mental health first aid.

*Potential Work Plan Outline:*

- *Meet with Lake Washington School District, Issaquah School District, and Eastside Catholic and talk with representatives at the National Council for Behavior Health about the Mental Health First Aid program.*
- *Convene local partners to develop a community-wide Mental Health First Aid campaign.*
- *Include a representative from the Human Services Commission in the partnership meetings.*

*Provide Funding Support*

- **School Counselor Support.** Provide direct financial support to school districts to increase access to mental health counselors, including culturally appropriate options, for students and their families. The Mercer Island Youth and Family Services program is an example of such a program. This could be run through the grant program or could be a special set-aside fund.

*Potential Work Plan Outline:*

- *Contact school districts to discuss this program.*

**Case Study:  
Mercer Island Youth and Family  
Services**

Working in partnership with the Mercer Island School District, professional counselors from the Mercer Island Youth and Family Services (MIYFS) department are based on site in each public school on Mercer Island. Staff provide counseling services for children, adolescents and their families; hold classroom presentations; and organize group activities to deal with personal difficulties and to promote healthy emotional and interpersonal development.

At the high school and middle school, substance abuse services include prevention, education, intervention and assessment and referral. This is funded by the City General Fund, non-profit organizations, and grants garnered by the School District.

## Implementation Table

The requirements to implement each of the potential actions are shown in the table below, along with a potential timeline for implementation.

Possible Action	Financial Support Needed	Staff Support Needed	Timeline for Implementation
<b>Awareness Campaign</b>	\$ – Materials from local or national organizations can be used. Most of the cost investment is staffing.	Low to Medium – Some research and coordination by staff is needed at the low end. More effort will be needed for community outreach and for targeted campaigns, if desired.	Mid-term.
<b>Comprehensive Referral List</b>	\$ – This is primarily and investment staff time.	Low to Medium – This would be an extension of duties for the Community Services Coordinator. <sup>7</sup>	Short-term.
<b>Influence the Choice</b>	\$ – This is primarily an investment of staff time.	Medium – This work is outside the scope of the Community Services Coordinator; additional staff resources will be needed.	Mid-term.
<b>Mental Health First Aid</b>	\$\$ – Support will be needed for advertising, materials, training, community events, and leadership and facilitation.	Medium – This requires coordination with a team of community partners. The City would be a likely lead or co-lead, especially to get this effort started.	Mid-term.
<b>School Counselor Support</b>	\$\$ – This requires direct financial support or grant program funding.	Low – Some coordination with school districts is needed, but largely this is financial support.	Long-term to ensure sustainable funding.
	Financial Support: \$ - < \$100,000 \$\$ - \$100,000 - \$500,000 \$\$\$ - > \$500,000	Staff support needed: <b>Low</b> - Current staff, may need to adjust work priorities. <b>Medium</b> - Additional staff to manage or coordinate action. <b>High</b> - Additional staff to manage or coordinate and to implement.	Implementation Timeline once initiated: <b>Short-term</b> - 1 year <b>Mid-term</b> - 3 years <b>Long-term</b> - >3 years

<sup>7</sup> This recommendation, as well as others in this document, is within the range of duties of current City staff. However, implementation of some recommendations may require adjusted work priorities, additional hours, or additional staffing.

## BASIC NEEDS

### Community Needs

Lower-income families often feel that their presence in the community is overlooked and that poor people are being pushed out of the City. In addition, families with moderate incomes who must spend a high proportion of their earnings on housing often struggle in silence. Affordable housing was mentioned as a specific need in nearly every stakeholder interview. After affordable housing, transportation was the second most mentioned unmet need in Sammamish. The lack of reliable and affordable transportation affects the ability to access services, particularly for seniors, youth, and low-income adults in the community. Economic pressures related to the cost of living in Sammamish can result in insecurity in access to food, health care, childcare, and other essentials. This section focuses on insecurity in access to basic needs such as health care and food, as well as helping with crisis situations such as lack of shelter.<sup>8</sup>

### Access to Care

Accessing quality health care and preventative services is important not only to physical outcomes but also to social and mental health outcomes. Preventative services can help individuals detect health issues early, avoid illness, and even save lives. Health insurance is one aspect of access to health services, but the location and cost of quality care are other important factors. Reducing these barriers and matching providers to community needs can improve health and well-being.

<sup>8</sup> Although they underlie many health and human service needs, the long-term needs for affordable housing and transportation are very large issues for the region and best addressed by advocacy at a regional level. That is addressed in the section Future State of Health and Human Services in Sammamish.

## JUST GETTING BY

The family moved to Sammamish for the great schools. Their house was a little out of their price range and they figured they could cut back on a few extras and get by. The father works as a manager at a popular local restaurant and the mother is a programmer.

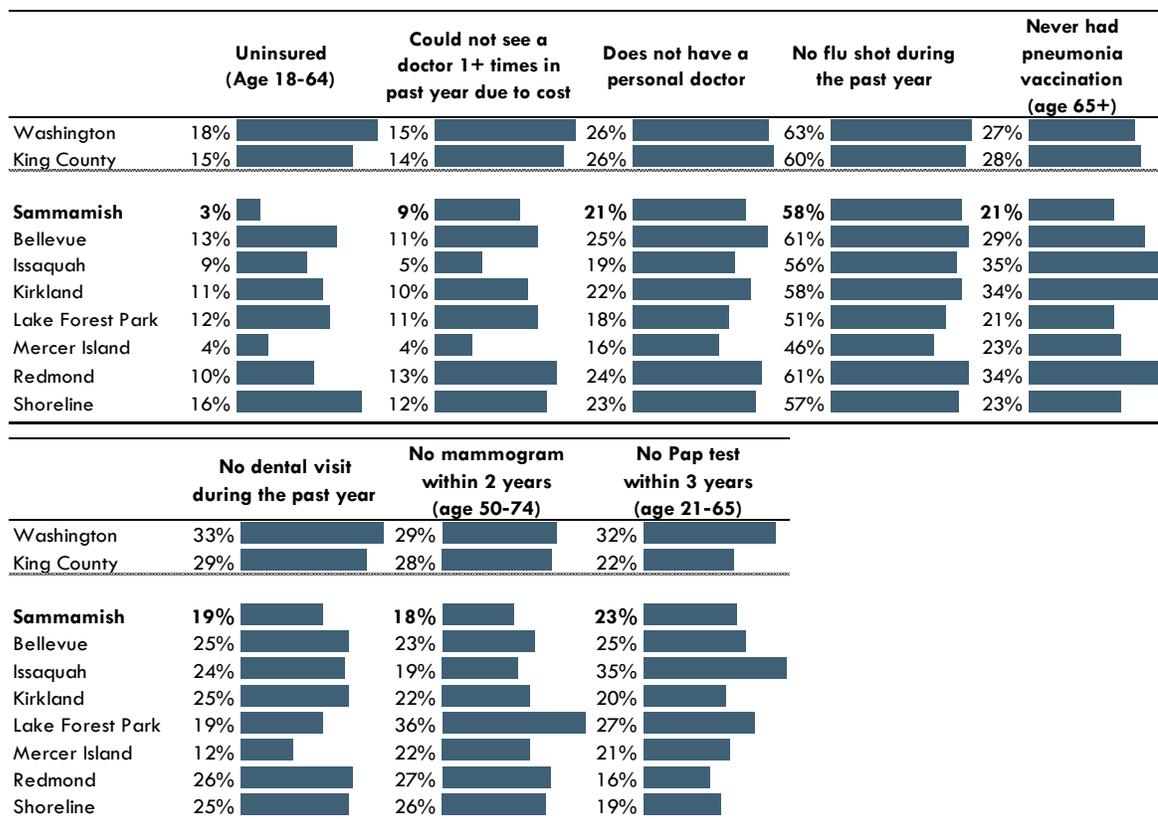
Things were okay until the mother's contract expired. Her company was in the middle of a transition phase and she lost her job. The job she found doesn't pay as much. They don't have a health plan with good coverage. Every time their daughter gets an ear infection it costs about a week's worth of groceries to get her to the doctor.

Unable to afford childcare, their 13-year old son comes straight home from school to take care of his 10-year old sister. They are home alone until their mom comes home around 8 p.m. Sometimes there isn't a lot to eat in the house, so the kids go visit a neighborhood friend and hope his mom invites them to stay for dinner.

They have used up their savings and strained their credit to the max. They don't have the money to move and can't afford the gas to commute to work if they did.

Data on Sammamish residents' access to care and preventive services is shown in Exhibit 5.

**Exhibit 5. Access to Care and Preventive Services**

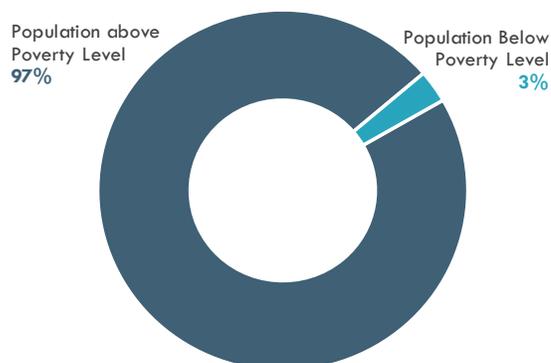


Source: Behavioral Risk Factor Surveillance System (BFRSS), WA State Department of Health, Center for Health Statistics via Public Health Seattle King County City Health Profiles, 2016.

- Over one-fifth of Sammamish residents (*more than 12,000 residents*) do not have a personal doctor that they see for routine visits.
- Nineteen percent of Sammamish residents (*approximately 12,000 residents*) did not see a dentist within the last year. Untreated dental diseases can lead to serious health issues.
- Sammamish residents had better access to care than the county for all measures except “no pap test within three years.”
- Stakeholder interviews indicated that a lack of transportation or cultural barriers may provide challenges to access.

### Household Insecurity

The Census Bureau defined poverty in 2015, the most recently available year of data, for an individual with an annual income less than \$12,082 and for a family of four as less than \$24,257.

**Exhibit 6. Population Above and Below Poverty Level in Sammamish, 2015**

Source: ACS 2015 5-year estimates, Estimate of Poverty Status in the Past 12 Months (Table S1701).

- In Sammamish, 3% of the population (*approximately 1,500 residents*) live in poverty as defined by the federal poverty level.
- In Sammamish, 300% of the poverty level is an annual income of \$36,180 for an individual and \$73,800 for a family of four. This represents over 8% of the families in Sammamish (*approximately 1,400 households fall into this category, or approximately 4,400 people*). Given the cost of housing, it is likely that families under 300% of the poverty level experience insecurity in other basics needs.
- Both the Issaquah and Lake Washington School Districts noted that families well above the poverty line are struggling to make ends meet because of the high cost of housing in Sammamish. When families spend a majority of their income on housing they can struggle to pay for basic needs such as food, childcare, or healthcare.

### Indicators of Progress

Sammamish is defined by its high quality of life and prosperity, but there are times when some families struggle to get by. Ensuring that the whole community has access to the basic essentials such as shelter, food, and health care can be accomplished by:

- Improving access to basic needs and services.
- Putting in place emergency measures for crisis response.

### Current City Response

The City provides grants to several human service providers that offer housing, food, and other emergency assistance.

### Policies and Programs

- Residents are entitled to King County Housing Repair Program for low income households

(income dependent for eligibility). This is the same program mentioned in the senior profile. In addition to modifications for disabilities, the program assists with weatherization and other minor home repairs.

- The Eastside Fire and Rescue's Union Local (IAFF 2878) has a benevolent fund that provides assistance for immediate needs such as food, clothing, minor repair work, etc.

### Grants

The City of Sammamish has provided grants to several human services providers that offer services for basic needs, totaling \$53,588 in 2016-17. These include:

- Catholic Community Services – Winter Shelters and Day Center
- Congregations for the Homeless
- Eastside Baby Corner
- Friends of Youth – The Landing Shelter
- Hopelink – Emergency Financial Assistance and Emergency Food
- Imagine Housing
- Issaquah Food and Clothing Bank
- St. Vincent de Paul – Mary Queen of Peace

## Preliminary Ideas for City Action

### Leverage Existing Policies and Programs

- **Home modification.** Expand eligibility for home repair program to include residents with moderate incomes and/or high housing costs (see recommendation for seniors for next steps).

### Create New Partnerships and Programs

- **Food van.** Partner with the Issaquah Food Bank, Hopelink, or other agencies to develop a mobile food bank that provides regular and emergency food deliveries to Sammamish. Schools in Sammamish already distribute dozens of backpacks full of food to hungry kids to take home over the weekend so they have something to eat. Additional coordination could help families struggling with food insecurity get the help they need.

#### Potential Work Plan Outline:

- Contact local agencies that provide emergency food service to begin planning for a mobile food bank.
- Work through the grant program or another fund to support the mobile food bank.

### Case Study: RotaCare Clinic in Renton

In 2003 community partners in Renton including Valley Medical Center, Renton Rotary, Renton Technical College, and the Salvation Army launched a RotaCare Clinic. Volunteer medical personnel treat illness and minor injury regardless of ability to pay. Basic labs, x-rays, and medications are offered at no or low cost. Additionally, volunteers are available to help patients qualify for medication and treatment through state programs. The clinic accepts walk-in clients every Saturday morning and operates out of the Salvation Army Community Center and Food Bank.

- **Rotacare clinic.** Work with the local chapter of Rotary International to develop a free, walk-in medical clinic one or more days a week, available to anyone who needs care.

*Potential Work Plan Outline:*

- *Meet with the local chapter of Rotary International to work on a strategy for the Clinic.*
- *Work through the grant program or another fund to support the Rotacare Clinic.*

### Implementation Table

The requirements to implement each of the potential actions are shown in the table below, along with a potential timeline for implementation.

Possible Action	Financial Support	Staff Support	Timeline for Implementation
<b>Home modification</b>	\$\$ – The City would need to provide funding for the additional residents served, who might not be eligible for the existing program.	Low to Medium – This depends on the role assigned to City staff. This work is currently not performed by staff.	Mid-term.
<b>Food Van</b>	\$\$ – The City should contribute funding or grant program money to this project.	Medium – City staff is needed to initiate coordination, but once the program is going it could be lower if another agency takes the lead. Ongoing staff support will likely be needed.	Mid-term.
<b>Rotacare Clinic</b>	\$\$\$ – The City should consider a financial contribution to this project.	Medium – City staff is needed to initiate coordination, but once the program is going Rotary volunteers could take the lead. Ongoing staff support will likely be needed.	Long-term.

Financial Support:  
 \$ - < \$100,000  
 \$\$ - \$100,000 - \$500,000  
 \$\$\$ - > \$500,000

Staff support needed:  
**Low** - Current staff, may need to adjust work priorities.  
**Medium** - Additional staff to manage or coordinate action.  
**High** - Additional staff to manage or coordinate and to implement.

Implementation Timeline once initiated:  
**Short-term** - 1 year  
**Mid-term** - 3 years  
**Long-term** - >3 years

## CULTURAL INCLUSION



## FEELING AT HOME

Dadi (Grandma) came to Sammamish to live with her son and his family. The family takes care of each other and this has always been their way. Her dadi slept in her room when she was a little girl. She is proud of her son's success and happy to live here in America. There are other people here from her native country and she has made a few friends.

Yet these new friends aren't the same as her family and friends back home. There is no network of extended family to rely on, nor can they call on her, their favorite "auntie," to help. She sometimes feels a little lost and it's hard to know where she can get help when the family needs it.

### Community Needs

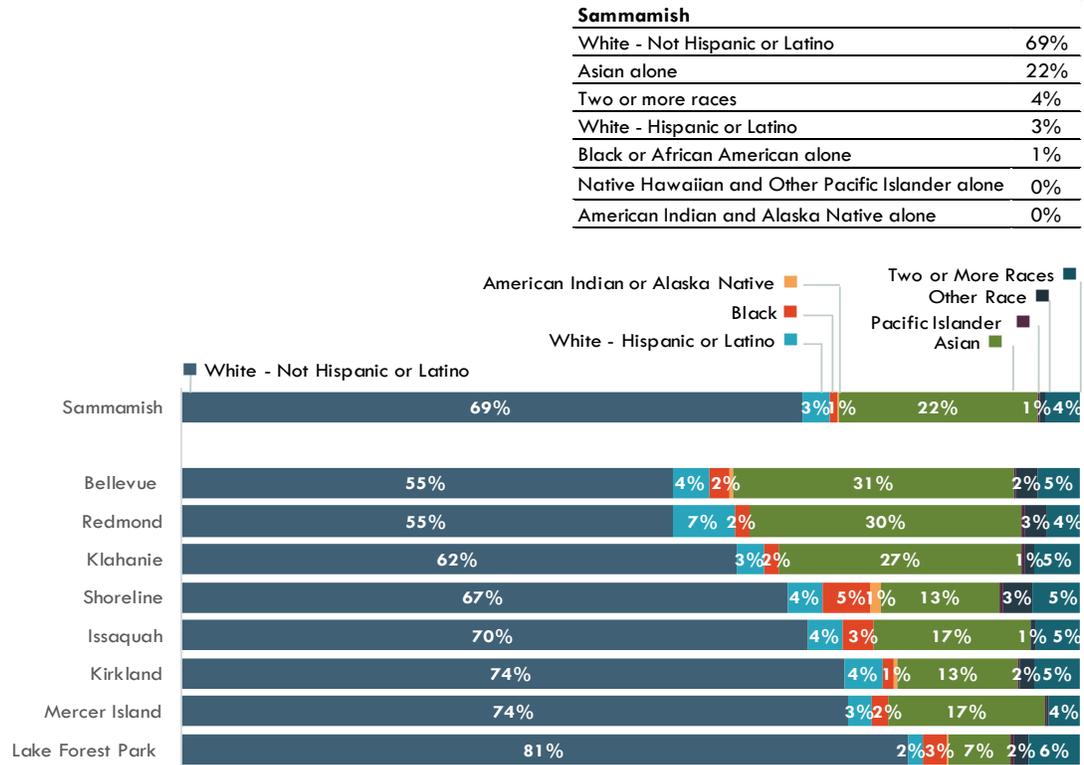
In 2015, the Census Bureau estimated that a quarter of Sammamish residents were foreign born. Sammamish attracts immigrants who are part of the high-tech and global trade economy because of its proximity to companies and organizations with demand for highly skilled workers that come from all over the world. Many immigrants have intergenerational households, with parents living with their adult children and families for extended stays or permanently. For those seniors that do not speak English well or have limited transportation options, social isolation can be a problem.

With diversity growing in the community, many children with immigrant parents have a foot in two different worlds. While American culture tends to emphasize individual success, many immigrant communities in Sammamish value a collectivist mindset. Youth struggle to navigate the tension between American values of forging new paths and their families' wishes to follow a set path. Faced with these pressures, youth may be less likely to turn to their parents and families for help.

Summary data on the race, ethnicity, and language spoken at home for Sammamish residents is shown in the following charts.

Race and Ethnicity

**Exhibit 7. Race and Ethnicity in Sammamish and Peer Cities, 2010-2015**



Source: ACS 2015 5-year estimates, Demographic and Housing Estimates, BERK 2017.

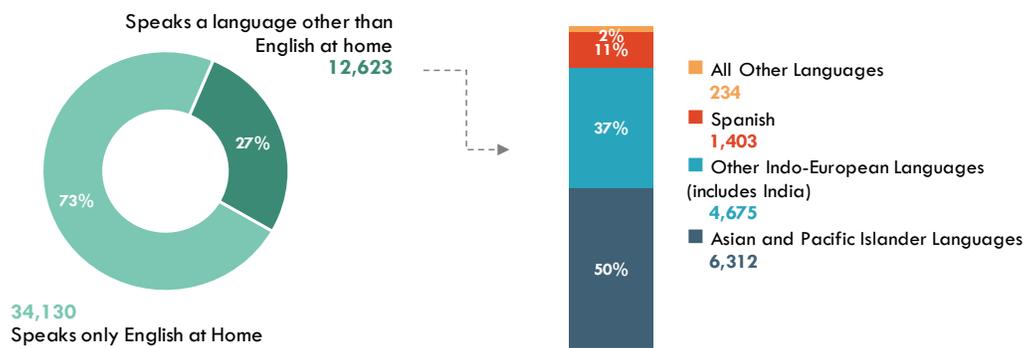
- The white non-Hispanic population in the State of Washington is close to 70%, similar to that of the U.S. overall. King County is more diverse with greater than a third of residents being Hispanic and/or not white alone.
- In Sammamish, most residents are White (69%), with a large proportion of Asian residents (22%). Approximately 3% of residents are White Hispanic and 4% identify as being two or more races. This is similar in racial makeup to neighboring cities of Issaquah and Mercer Island.
- In 2015, the Census Bureau estimated that a quarter of Sammamish residents were foreign born. Of those born elsewhere, the majority originate from Asia (62%), specifically Eastern Asia.
- Many non-citizen foreign born residents in Sammamish may work in the area. In FY2016 (October 1, 2015 – September 30, 2016) King County saw almost 4,000 certified H1B visas for Microsoft (Foreign Labor Certification, 2016).
- In recent decades, Sammamish has seen a decline in the number of foreign born residents

from Europe and Africa, and an increase in the share of residents born in Latin America and Oceania.

- Sammamish, prior to the annexation of Klahanie, saw similar proportions of foreign born Asians from Eastern Asia (42%), which includes China, and South-Central Asia (45%), which includes India. Klahanie has a much higher proportion of Asian residents from Eastern Asia (53%) and South-Eastern Asia<sup>9</sup> (16%) compared to Sammamish before the annexation.

Language Spoken at Home

**Exhibit 8. Languages Spoken at Home in Sammamish, 2010-2015**



Source: ACS 2015 5-year estimates, Language Spoken at Home (Table S1601), BERK 2017.

- A large percentage of Sammamish residents (27%) speak a language other than English at home. Of these, approximately 50% speak an Asian or Pacific Islander language, and 37% speak other Indo-European languages.
- Some families in Sammamish may speak another language at home, even if they are proficient at English. Of the population ages five and over in Sammamish, over 3,000 are estimated to speak English less than “very well” by the Census (7.2%). This is similar to the proportion in Kirkland, and a smaller share of the population than in neighboring Redmond (13.6%) and Bellevue (16.2%)
- Based on a 5-year American Community Survey sample from 2009-2013, 26% of King County residents over age 5 spoke a language other than English at home. These data are self-reported, and people may report they speak English at home if a family member speaks English.

<sup>9</sup> Southeast Asia refers to Bruneian, Burmese, Cambodian, Filipino, Hmong, Indonesian, Laotian, Malaysian, Mien, Papua New Guinean, Singaporean, Timorese, Thai, Vietnamese.

## Indicators of Progress

Sammamish values the diversity of its community and wants to ensure that people feel welcome. Part of a strong network of health and human services is helping people feel connected to community and understand how to use the resources that are available to them. This is especially important for immigrant families who may not understand American institutions or conventions. Success in cultural inclusion will be marked in the following ways:

- Immigrant families and newcomers to Sammamish have the opportunity for a welcome and orientation to the community.
- People know where to find help in navigating health and human service resources.
- City operations and programs have an inclusive mindset based on embracing and engaging all cultures and facilitating shared community experiences.
- Greater participation in community events, programs, and by a variety of cultural communities.

## Current City Response

The City has several policies and programs in place to increase cultural competence. In addition, the City provides grants to human service providers that foster cultural inclusion.

### *Policies and Programs*

- Eastside Fire and Rescue's EMS training builds the cultural competency of firefighters and EMTs for their interactions with patients. Eastside Fire and Rescue has been attempting to utilize technology to improve communication with patients when English is either a second language, or not an option at all.
- The Sammamish Police Department participates regularly in diversity panels, forums, meetings, community events, and gatherings. Police Chief Bennett is involved in many community outreach and engagement efforts focused on cultural inclusion and immigrant concerns. This includes a Muslim Safety Forum, meetings with the Pacifica Institute, the Indian Association of Western Washington, the Issaquah Schools Foundation Cultural Bridges, and others, as well as community picnics and Ramadan Interfaith dinners hosted by the Muslim community.
- Police Chief Bennett created the Healthy Communities Coalition to identify key issues in the Sammamish community and strategize preventive actions and solutions. Over 20 different helping agencies serving the Eastside have attended meetings, and the coalition continues to grow. The top issue to address, as voted on by the coalition, was Cultural Bridges - assisting other cultures via education on both sides to create a healthy Sammamish community. The agencies who have expressed interest or attended meetings include:
 

▪ Athletes for Kids	▪ Central Washington University
▪ Boys and girls Club of King County	▪ CrossPath
▪ CareNet of Puget Sound	▪ Cultural Bridges

- Eastside Catholic
- Eastside Friends of Seniors
- Family to Family Senior Care
- Healthy Youth Initiative
- HeroHouse
- Hopelink
- India Association of Western Washington
- Influence the Choice - Drug Prevention
- Alliance for Youth
- Issaquah Food and Clothing Bank
- Issaquah Schools Foundation
- Kids without Borders
- King County Sheriff
- Kiwanis
- Lake Washington School District
- Lake Washington Schools Foundation
- Nourishing Networks
- Redmond Police
- Sammamish Arts Commission
- Sammamish Chamber of Commerce
- Sammamish Citizen Corps
- Sammamish Hills Lutheran
- Sammamish Rotary
- Sammamish YMCA
- TriAwareness
- YoungLife
- Youth Eastside Service

### Grants

The City of Sammamish has provided grants to human services providers that offer services for Cultural Inclusion totaling \$4,300 in 2016-17. These include:

- Cultural Navigator Program
- India Association of Western Washington

### Preliminary Ideas for City Action

#### Leverage Existing Policies and Programs

- **Welcome and Orientation.** Enhance community welcoming activities and services. This could include a more robust “Welcoming Week” organized by the City, having “Welcome” on the front door of City Hall in the different languages that residents speak, holding a City services roadshow, and distributing welcome and orientation packets for newcomers, working with existing partners.

#### Potential Work Plan Outline:

- Create a staff interdepartmental “Welcome” team.
- Use the team to help plan events, materials, and the roadshow.

#### Case Study: Diversity Advantage Plan in Bellevue

People of color now represent over 40% of Bellevue’s population. Like Sammamish, Bellevue sees its diversity as a strength, but it also presents some challenges.

The Diversity Advantage Plan is Bellevue’s strategy for building inclusion and making sure there is equitable access to community resources including government, education, and human services. It recommends actions for improving cultural competency in government and in the community.

- *Work with partners such as the India Association of Western Washington and the Chinese Information and Service Center to create and distribute materials for specific communities.*
- *Enhance cultural competency, equity and inclusion training for all staff personnel.*

### Create New Partnerships and Programs

- **Cultural Navigation.** Cultural Navigation is a program that offers free and confidential assistance to immigrants. Immigrants and refugees may not understand how to undertake common tasks like meeting with a child's teacher, applying for a job, riding the bus, starting a business, or finding housing or health care. This is because there are different ways of doing these things in their native countries. Sammamish could partner with the Cultural Navigation Program that is currently funded through health and human service grants. This effort could also build off the work of the Healthy Communities Coalition. The City could either provide funds and space to support additional work by the existing Cultural Navigation Program, or it could develop its own volunteer program run out of a community facility or mobile van.

#### *Potential Work Plan Items:*

- *City staff contacts the Cultural Navigation Program and other community partners to discuss options for Sammamish residents.*
- *Human Services Commission evaluates options for Cultural Navigation and sends recommendations to City Council.*
- *City Council provides funding and/or staff support for one of the options.*

### Case Study: Crossroads Mini-City Hall in Bellevue

Originally opened as a neighborhood service center to save residents a trip to City Hall, it became clear early on that culturally competent services would be needed. More than half of the users of the Crossroads Mini-City Hall had a language and/or cultural barrier.

Over the past two decades this facility has become a hub for cultural inclusion. Residents can receive information and services in eight languages. It offers a Cultural Navigator program, healthcare information and referral, and computer skills help. Many of the specialized services are provided through partnership with agencies such as King County Public Health, King County Public Library, or through trained volunteers.

### Direct Service

- **Bi-cultural Programming.** Develop recreational and community bi-cultural programming that both recognizes cultural identity and celebrates being part of American culture. The City has already been exploring some work in this area through its arts and culture program, planning for a Chinese New Year Event, and initial planning for a possible Klahanie Field Day. Partners such as the India Association of Western Washington, the Chinese Information and Service Center, and others may be strategic advisors for this work. The focus for bi-cultural programming should encourage people from different cultural communities to socialize,

recreate together, and get to know each other.

*Potential Work Plan Items:*

- *Develop an interdepartmental team to explore ideas and options for bi-cultural programming and community events.*
- *Vet ideas with the Human Services Commission, the Parks and Recreation Commission, and the Arts Commission.*

- **Cultural Competency Training.** The City of Sammamish staff, Council, Boards and Commissions work very hard in service of the residents of the city. However, the demographic composition of City staff and leadership does not reflect the full diversity of the people who live here. This is an issue that many communities face, particularly when the local population has a high proportion of immigrants (25% for Sammamish). A commitment to diversity and inclusiveness is an important step to ensure equity and to help people from all backgrounds feel comfortable in Sammamish. There are several steps the City of Sammamish can take to improve its cultural competency, provide the best service it can to all its residents, and strive to encourage participation in all levels of government.

*Potential Work Plan Items:*

- *Formally adopt an equity statement that outlines the City's commitment to inclusiveness and diversity. Consider working with the City's Boards and Commissions on recommendations that will be transformed into a formal statement through one or more Council workshops.*
- *Work with a consultant to develop a cultural competency program for staff, elected officials, appointed officials, and volunteers. While the initial program may begin with a large one-time training event, this should be an on-going program to ensure there is a consistent focus on inclusivity, diversity, and meeting community needs.*
- *Develop communications strategies to reach culturally diverse groups in the community.*
- *Gather an interdepartmental team to assess all aspects of City operations through a lens of equity, diversity, and inclusivity. The goal is to bring cultural competency awareness to all City policies, programs, and services.*

### Implementation Table

The requirements to implement each of the potential actions are shown in the table below, along with a potential timeline for implementation.

Possible Action	Financial Support Needed	Staff Support Needed	Timeline for Implementation
<b>Welcome and Orientation</b>	\$\$ – This requires materials development. There would be some costs related to sponsoring community events, small giveaways, etc., and expenses for staff training.	Medium – Participation in an interdepartmental team and development of marketing materials will require additional workload. It is likely this item will require additional staff resources.	Short-term.
<b>Cultural Navigation Program</b>	\$\$ – This would involve funding to support more time and investment in the existing Cultural Navigators Program or costs for training, development of materials, and potentially a dedicated space for a Sammamish- specific program.	Medium – Cultural navigation programs can be run by volunteers, but additional staff resources will be needed to lead, organize, and train them.	Mid-term.
<b>Bi-cultural programming</b>	\$\$ – Funds are need for program development and materials, programming space, event promotion, etc.	Medium – Additional staffing will be needed to plan and implement additional recreation programs or events.	Mid-term.
<b>Cultural Competency Training</b>	\$\$ – Funding is needed to hire a trainer and for on-going staff support.	Medium – Additional staffing needed to coordinate the training program and ensure on-going compliance.	Short-term.

Financial Support:  
 \$ - < \$100,000  
 \$\$ - \$100,000 - \$500,000  
 \$\$\$ - > \$500,000

Staff support needed:  
**Low** - Current staff, may need to adjust work priorities.  
**Medium** - Additional staff to manage or coordinate action.  
**High** - Additional staff to manage or coordinate and to implement.

Implementation Timeline once initiated:  
**Short-term** - 1 year  
**Mid-term** - 3 years  
**Long-term** - >3 years

## SENIOR SERVICES



## Community Needs

As Sammamish seniors age, it is important that they have opportunities to engage with their neighborhood and to access resources that can help them maintain autonomy and independence. In the town hall survey, 41% of respondents indicated that their family would benefit from services or programs for seniors.

- In Sammamish, 6.6% of males and 7.1% of females are ages 65 and over. In Klahanie, 4.7% of males and 9.3% of females are ages 65 and over.
- Based on U.S. Census data, 40% of the Sammamish population 75 years and older has a disability, and 9% of the population ages 65-74 has a disability (*approximately 725 residents age 65 and older*).

Aging in place is a concept focused on ensuring that individuals have the “ability to live in one’s own home and community safely, independently, and comfortably, regardless of age, income, or ability

## HOLDING ON

He and his wife always dreamed of a beautiful home and they found it in Sammamish. It was a welcoming place for their children in their teen years and now they return each year with the grandchildren to spend the holidays together.

A couple years ago his wife passed away. His life isn’t the same without her. Friends and neighbors really helped him overcome his grief.

When the kids came to visit last summer, they told him they were really concerned about him. He’s had two fender-benders in the last six months. They think he should stop driving, but how will he get to the doctor, the grocery store, or his volunteer job as a Salmon Guide at the Issaquah hatchery?

He would feel lonely and stuck at home. If he moved somewhere he can manage better without a car, how would he stay in touch with his friends? He would have to give up his volunteer job, which he loves, and find a new doctor. He doesn’t like these options, but doesn’t know what to do.

levels.”<sup>10</sup> At the community level this often involves increasing the livability of a community by aligning housing, transportation, health services, cultural opportunities, and the physical environment around community needs of older adults.

Supportive services provide the incremental and tailored supports that enable an individual to meet their independent living needs as they age. Supportive services are typically offered by a decentralized network of services across a range of organizations, projects, and initiatives. Many seniors face barriers to accessing the services they need because there is insufficient information (or it exists, but is difficult to find or across multiple websites) on what is available.

In addition to services that address health care and mobility needs, opportunities for social interaction are also important (see also the section on Cultural Inclusion). Social engagement helps prevent cognitive decline in seniors, and those with no social ties face increased risk for cognitive decline compared to those with five or six social ties. (Bassuk, Glass, & Berkman, 1999)

There are several factors critical to maintaining independence:

- Affordability of the home;
- Condition and accessibility of the home (and whether it can be readily and affordably modified);
- Availability of supportive services, including formal and informal help from family and friends; and,
- Whether neighborhood characteristics foster independence or make navigation difficult or unsafe. (Spillman, Biess, & MacDonald, 2012)

Falls often take place in the home and can be a consequence of ill-adapted housing. Installing grab bars in bathrooms and railings on both sides of stairs, removing tripping hazards (e.g., slippery area rugs), and improving lighting around the home and on outdoor walkways are all low-cost measures that can decrease the likelihood of falls (JCHS, 2014).

The cultural values associated with the Boomer Generation, which includes many immigrants, will lead to several trends in service provision, including:

- Emphasis on personal choice and individualized services.
- Movement away from institutional care and toward home and community based services.
- Increased interest in “aging in place.” Many Boomers will wish to stay near their adult children and remain an active, productive member of their communities.
- Demand for active hobbies and activity options (more sports and fitness opportunities). (BERK Consulting, 2015).
- Interest in lifelong learning and continuing education.

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<sup>10</sup>Centers for Disease Control (2015) Healthy Places Terminology <http://www.cdc.gov/healthyplaces/terminology.htm>.

## Indicators of Progress

Sammamish is a community for families. A community committed to families must meet the needs of the entire family, including our elders. Keeping seniors engaged in the community provides a resource of people who can share their knowledge and skills, volunteer their time, and provide a watchful eye over our neighborhoods. We create a safe and healthy intergenerational community when our policies and programs:

- Help create safe and affordable places for older generations to live.
- Increase mobility.
- Encourage social engagement, inclusion, and connection.

## Current City Response

The City of Sammamish has several policies and programs in place to address seniors and active aging. In addition, the City provides grants to several human service providers that offer senior programming, as outlined below.

### *Policies and Programs*

- Eastside Fire and Rescue’s firefighters and emergency medical technicians are mandatory reporters of suspected physical abuse and neglect of children and vulnerable adults. Mandatory reporting occurs through the Police Department or the Washington State Department of Social and Health Services.
- City of Sammamish residents are entitled to the home accessibility modification program through King County Housing Repair Programs such as grab bars, wheelchair ramps, etc. Eligibility is determined by gross annual income.
- Sammamish is working with King County Metro – Community Connections to come up with solutions moving people within Sammamish, and examining options beyond fixed transit. The Council is focused on “last mile” challenges of getting people from the park-and-ride to their homes. Some thought has been given to partnering with Uber and Lyft to address transportation gaps, but there are challenges in implementation. These improvements would help seniors and others without transportation access.

### *Grants*

The City of Sammamish has provided grants to several human services providers that offer services for seniors, totaling \$26,500 in 2016-17. These include:

- Eastside Friends of Seniors
- Elder and Adult Day Services
- Sound Generations – Meals on Wheels
- Providence Marianwood – Issaquah Nursing Home

## Preliminary Ideas for City Action

### Leverage Existing Policies and Programs

- **Home Modifications.** Expand eligibility for home modifications to those with moderate incomes and/or high housing costs. This may involve setting up a fund or offering grant money to King County.

#### Potential Work Plan Items:

- *City staff works with the Housing Repair Program to determine how to expand eligibility for Sammamish residents.*
- *City publicizes the availability of the home repair program.*
- *City dedicates funding to support expanded eligibility.*

- **Volunteer Bank.** Maintain a listing of community-wide volunteer opportunities that may be of interest to seniors. This would allow people to make connections and use knowledge and skills to serve their community.

#### Potential Work Plan Items:

- *City staff develops and maintains a list of volunteer opportunities for seniors, including serving on local boards and commissions, volunteering at one-time events, and ongoing service jobs.*
- *Publish the list online and advertise it through other means.*

- **Aging in Place.** Review planning policies to address aging in place as part of the next Sammamish Comprehensive Plan Update. Include police recommendations as part of the Housing Strategy Plan (a component of the Comprehensive Plan scheduled to be updated in 2018).

#### Potential Work Plan Items:

- *City staff or consultants audit the Comprehensive Plan to identify existing policies and policy gaps for the components of aging in place: affordable housing, housing diversity and choice, social connection, recreation, and transportation and mobility.*
- *Propose policy updates to support aging in place. These should be vetted with the Human Services Commission and the Planning Commission before being recommended to City Council for inclusion in a Comprehensive Plan Amendment.*

### Case Study: Kirkland Senior Council

Established by the Kirkland City Council in 2002, the Kirkland Senior Council (KSC) is a group of concerned citizens dedicated to ensuring that Kirkland is, and remains a safe, vibrant community for residents age 50+. As an advisory group to the City Council, they advocate, support, shape and create programs and services that meet the needs of adults age 50+.

### Direct Service

- **Recreational Programming.** Explore multiple ways of expanding social and recreational programming for seniors aimed at physical health, mental health, mental acuity, and social exchange. This could include things like bridge club, chair yoga, choir, meditation, silver sneakers, etc. Include programming of special interest to different cultures, multi-generational programming, and programming that is free or low cost. The City may also build off existing partnerships with the Issaquah and Redmond Senior Centers, the YMCA, or could integrate shared space with youth programming agencies such as The Boys and Girls Club.

#### Potential Work Plan Outline:

- *Develop a departmental team to explore ideas and options for enhanced inter-generational and senior-oriented programming and events.*
  - *Contact community partners to explore opportunities for collaboration.*
  - *Vet ideas with the Parks and Recreation Commission.*
  - *Develop a strategy for implementing senior programming.*
  - *Publicize the availability of programs and opportunities for seniors, including partner resources. For example, let people know they can participate in YMCA programs for free or low cost if they are unable to pay.*
- **Transportation Shuttle.** A transportation shuttle bus for seniors could be used to attend recreational activities in Sammamish or surrounding communities, or for appointments or errands. There are many options for a transportation shuttle, including: a city operated shuttle, a partner operated shuttle (for example in coordination with King County Metro or a non-profit group), a volunteer operation, or even a subsidy of a for-profit system (such as Uber or Lyft).

#### Potential Work Plan Items:

- *Develop a departmental team to explore alternatives for a transportation shuttle. Conduct a study of alternatives and implementation strategies.*
  - *Vet ideas with the Human Services Commission and the Transit Committee before forwarding a recommendation to Council.*
  - *Council authorizes a Transportation Shuttle program and dedicates funding.*

## Implementation Table

The requirements to implement each of the potential actions are shown in the table below, along with a potential timeline for implementation.

Possible Action	Financial Support	Staff Support	Timeline for Implementation
<b>Home modification</b>	\$\$ – The City would need to provide funding for the additional residents served, who might not be eligible for the existing program.	Medium – This depends on the role assigned to City staff. This work is currently not performed by staff.	Mid-term.
<b>Senior volunteer bank</b>	\$ – This work is not currently included in staff work plans.	Low to Medium – This work is not currently included in staff work plans. Depending on the scope, additional staff resources may be needed.	Short-term.
<b>Aging in place</b>	\$\$ – Will require use of staff and/or consultant time to review existing policies.	Medium – Comprehensive Plan amendments are time consuming and will require additional one-time resources to complete the work.	Short-term.
<b>Recreational Programming</b>	\$\$\$ – This would require additional staffing and funding for program development, program materials, implementation, and potentially program space.	Medium to High – This would require the development of programs and the hiring of staff to run them at the high end, and would require partnership coordination at a mid-cost.	Mid-term.
<b>Transportation Shuttle</b>	\$\$\$ – This would require funding by the City.	Medium to High – The City needs to examine alternatives and coordinate an implementation strategy. Staff needs depend on the role of the City in implementation and management.	Long-term.

Financial Support:  
 \$ - < \$100,000  
 \$\$ - \$100,000 - \$500,000  
 \$\$\$ - > \$500,000

Staff support needed:  
**Low** - Current staff, may need to adjust work priorities.  
**Medium** - Additional staff to manage or coordinate action.  
**High** - Additional staff to manage or coordinate and to implement.

Implementation Timeline once initiated:  
**Short-term** - 1 year  
**Mid-term** - 3 years  
**Long-term** - >3 years

## DOMESTIC VIOLENCE

### Community Needs

Domestic violence affects people of all incomes and backgrounds in Sammamish. Economic abuse and lack of affordable housing options make it difficult for those experiencing domestic violence to leave relationships. In some cases, victims may feel shame about their situation and reluctant to seek help. Since crime rates are low in Sammamish, domestic violence represents a larger share of calls to police than might be typical in other communities (though the numbers are still low).

Domestic violence is physical harm, bodily injury, assault, or the infliction of fear of imminent physical harm, bodily injury or assault, between family or household members. It can include physical assault, sexual abuse, and stalking. The Bureau of Justice estimates that 27% of women and 12% of men have experienced domestic violence and then suffered significant impacts such as post-traumatic stress disorder and injury as a result (Breiding, et al., 2011).

Domestic violence is intimately linked to housing and homelessness, and the fear of becoming homeless is a major reason domestic violence survivors stay with their abusers. Research shows that the need for, and the financial means to maintain, safe housing are two of the most pressing needs among women who are leaving or who have left abusive partners (Clough, Draughon, Njie-Carr, Rollins, & Glass, 2013).

Economic abuse is a common tactic used by abusers to gain power and control in a relationship; it may include tactics to limit the partner's access to assets or to hide information and accessibility to family finances. Financial abuse is a powerful method of keeping a survivor trapped in an abusive relationship, and research shows that financial abuse occurs in 98% of abusive relationships (National Network to End Domestic Violence).

Women from immigrant communities who are experiencing domestic violence may feel additional isolation and may not feel comfortable going outside of the family or cultural community for help with a

## SURVIVING ABUSE

From the outside most people think that she has a great life. She lives in a beautiful house and has quiet, well-behaved children. Her husband makes good money and she doesn't have to work.

Yet she holds on to a secret that makes her feel ashamed. Her husband becomes jealous if she takes too long picking the boys up from soccer or unexpectedly stops at the grocery store for a gallon of milk. First comes the accusations, then the name-calling, and then the rage.

Although she is afraid for herself and her children, she is not sure where to go. She doesn't have family that can help and they have only lived in Sammamish a few years. It's hard to make friends when you can't spend any time with them. He says she can't be trusted with money, so her name isn't even on most of their accounts. When she has tried to leave, he threatened retribution.

She needs a safe place to go, affordable housing, financial support to get on her feet, help to keep her kids in school, counseling, and legal assistance. She isn't sure where to start or how to navigate the systems that might be in place to help her.

private matter. (Senturia, Sullivan, & Ciske, 2000).

For those who leave a domestic violence situation there is emergency shelter on the Eastside, but longer-term shelters are only in Seattle, and housing resources are mostly available in South King County. Housing and employment options and low-cost access to physical and mental health care in Sammamish would help families experiencing domestic violence.

Barriers to accessing resources in Sammamish include a lack of case management and programs that require income eligibility.

### Indicators of Progress

Domestic violence occurs across the community regardless of ethnicity, income, or other demographic factors. Often when people leave domestic violence situations they are at most risk of harm. The region needs a variety of safe and confidential spaces and a secure and available referral network to get people the help they need. Sammamish will not solve this problem alone, but the community can do its part to make regional improvements in domestic violence support, such as:

- Improving the availability of safe houses and shelter resources for domestic violence survivors.
- Increasing awareness of help and resources for those affected by domestic violence.
- Educating the community about the warning signs of domestic violence and harassment.
- Increased contributions of time and funding to regional efforts to address domestic violence.

### Current City Response

The City has several policies and programs in place to address domestic violence, and provides grants to human service providers that offer services for victims of domestic violence.

#### *Policies and Programs*

- The City contracts with King County Sheriff for a full time Domestic Violence Advocate that covers the City of Sammamish and other local communities. The advocate's job is to contact victims of domestic violence to provide further assistance.
- Eastside Fire and Rescue's firefighters and emergency medical technicians are mandatory reporters of suspected physical abuse and neglect of children and vulnerable adults. Mandatory reporting occurs through the Police Department or the Washington State Department of Social and Health Services.
- The City of Sammamish attends regional human service meetings of Eastside Cities' Human Services staff that can touch on domestic violence issues and funding.
- As the Fire Department becomes aware of issues, they assist customers with contacting social services or the Eastside Fire and Rescue Chaplaincy program.
- At any domestic violence event, Sammamish police officers hand out the Domestic Violence Protection Act form as seen below.

**Exhibit 9. Domestic Violence Protection Act Form**

**Rights of Crime Victims and Witnesses**

If you are a crime victim, a survivor of a crime, or a witness to a crime, the State of Washington provides that reasonable efforts be made to ensure you the following rights:

1. To be informed of the final outcome of the case.
2. To be notified of any scheduled changes in the court proceedings.
3. To receive protection from harm or threats of harm arising from your cooperation with law enforcement or prosecution.
4. To receive witness fees to which you are entitled.
5. To be provided, whenever practical, a secure waiting area during court proceedings, away from the defendant or the defendant's family.
6. To have any stolen or other property quickly returned by law enforcement or the superior court when it is no longer needed as evidence.
7. To have someone intervene with your employer if necessary when you are required to come to court.
8. To have access to immediate medical attention. With regard to victims of domestic violence, sexual assault or stalking (or their family members), to be allowed reasonable leave from employment to take care of legal issues, receive medical treatment or obtain other necessary services.
9. To have a crime victim advocate from a crime victim/witness program at any interviews.
10. To be present in court during trial if you are the victim or the survivor of a victim, after your testimony has been given and no further testimony is required.
11. To be informed of the date, time and location of the trial and, if requested, of the sentencing hearing in felony cases if you are the victim or the survivor of a victim.
12. To submit a victim impact statement to the court.
13. To present a statement personally or by representation at the sentencing hearing for felony convictions.
14. To have restitution ordered by the court in all felony cases, unless the court finds this inappropriate.

**Rights of Child Victim and Witnesses**

In addition to the rights that have been provided for all crime victims and witnesses, Washington law requires reasonable efforts be made to ensure the following rights for child victims and witnesses under the age of 18:

1. To have all legal proceedings and/or police investigations explained in language that can be easily understood by a child.
2. To have a crime victim advocate from a crime victim/witness program present at any interview.
3. To have, whenever practical, a secure waiting area provided for the child during court proceedings, and to have a support person or advocate stay with the child.
4. To not have the address or photographs of the child victim or witness disclosed by any law enforcement agency, prosecutor, defense counsel, or private or governmental agency involved in the case.
5. To allow the advocate to make recommendations about the ability of the child to cooperate with the prosecution and the potential effect of the proceeding on the child.
6. To allow the advocate to inform the court about the child's ability to understand the nature of the proceedings.
7. To provide information about social service agencies to assist the child and/or the child's family with the emotional impact of the crime, the investigation, and the judicial proceedings.
8. To allow the advocate to be present in court to provide emotional support to the child during testimony.
9. To inform the court as to the need to have other supportive persons present during the child's testimony.
10. To allow law enforcement agencies to enlist the assistance of other professional personnel such as Child Protective Services, victim advocates or prosecutor's staff trained in interviewing of child victims.

**Domestic Violence Prevention Act  
Victim's Rights**

IF YOU ARE THE VICTIM OF DOMESTIC VIOLENCE, you may ask the city or county prosecuting attorney to file a criminal complaint. You also have the right to file a petition in Superior, District, or Municipal court requesting an order for protection from domestic abuse, which could include any of the following:

- (a) an order restraining your abuser from further acts of abuse against you or your minor children;
- (b) an order directing your abuser to leave your household;
- (c) an order prohibiting your abuser from entering your residence, workplace, school, or your child(ren) school or daycare;
- (d) an order granting you temporary custody of your minor children;
- (e) an order restraining your abuser from interfering with your custody or removing the children from the state.

The forms you need to obtain for a Protection Order are available in any Municipal, District or Superior court or at the

**King County Prosecuting Attorney's Protection Order Program:**  
 King County Courthouse Seattle (Seattle) .....206-477-1103  
 Regional Justice Center (Kent) .....206-205-7406  
<http://www.protectionorder.org>

**Available 24 Hours a Day:**

Information About Shelters and Alternatives to Domestic Violence  
 Washington State Domestic Violence Hotline ..... 1-800-562-6025  
 National Domestic Violence Hotline ..... 1-800-799-SAFE (7233)  
 TTY 1-800-787-3224  
 King County Domestic Violence Recorded Information Line ..... 206-205-5555

**Information Presented Here is Available in Alternate Formats**  
 Voice: 206-296-4078 TTY Relay: 711

Information in other languages – Peace in the Home Helpline.....1-888-847-7205

**Types of Orders for Victim Protection**

Anti-Harassment Order ..... Reference RCW 10.14  
 No Contact Order ..... Reference RCW 10.99  
 Protection Order ..... Reference RCW 26.50  
 Restraining Order ..... Reference RCW 26.09 or 26.26  
 Sexual Assault Order ..... RCW 7.90  
 Stalking Protection Order ..... RCW 7.92  
 Vulnerable Adult Order ..... RCW 74.34  
 Extreme Risk Protection Order ..... RCW 7.94

**Grants**

The City of Sammamish provided grants for 2017-2018 to several human services providers that offer services for victims of domestic violence totaling \$28,039. These included:

- Harborview Sexual Assault/Traumatic Stress Services
- King County Sexual Assault Resource Center
- Lifewire
- Sophia Way

**Preliminary Ideas for City Action**

**Leverage Existing Policies and Programs**

- **Domestic Violence Advocate.** Improve awareness of the Domestic Violence Advocate by listing information and contacts on the City's website.

*Potential Work Plan Items:*

- Develop page on City website with information about domestic violence, the services offered by the Domestic Violence Advocate, and contact information.
- Include culturally appropriate materials in multiple languages.
- **Regional Support.** Continue to work regionally to ensure there is adequate safe housing, affordable housing, and shelter space in and near Sammamish to keep families close to the community when it is safe to do so.

*Potential Work Plan Items:*

- *Work through the Sound Cities Association (and other regional groups) to ensure Sammamish representatives are placed on committees that work on issues that will improve options for survivors of domestic violence. This includes committees related to domestic violence, emergency shelter, and affordable housing.*
- *Develop a regular schedule of briefings and annual workshop where the regional committee representatives and the Human Services Commission exchange information and develop an advocacy strategy for domestic violence issues.*
- *Through the regional committee system, identify a specific need that the City of Sammamish can fund in the long term such as a safe house or emergency shelter.*

*Create New Partnerships and Programs*

- **Awareness Campaign.** The City could partner with Lifewire and other agencies such as King County Sexual Assault Resource Center to create an education and awareness campaign. It should include messages in multiple languages. There should be materials with information and referrals available throughout the community and include contact information for the Domestic Violence Advocate.

*Potential Work Plan Items:*

- *City staff contacts Lifewire and other community partners to develop a campaign. Multiple versions of the campaign may be needed for different cultural communities.*
- *The partnership identifies specific goals for the Awareness Campaign.*
- *City staff researches and presents materials for Commission review and recommendation, including an outreach plan.*
- *City staff customizes materials, conducts outreach.*

*Direct Service*

- **Bystander Training.** Ensure that City Hall and other City facilities are recognized as safe places for people feeling threatened. This involves training for staff, particularly those working in high contact positions with the public, to recognize potentially threatening or abuse behavior and to quickly connect people to resources when needed.

*Potential Work Plan Items:*

- *City staff contacts Lifewire for help with Bystander Intervention Training.*
- *Develop a sign or decal that facilities can display on their front door so people know they can safely ask for help.*

### Implementation Table

The requirements to implement each of the potential actions are shown in the table below, along with a potential timeline for implementation.

Possible Action	Financial Support	Staff Support	Timeline for Implementation
<b>Domestic Violence Advocate</b>	\$\$ – Create a page on the City’s website and potentially develop some informational materials. It may be possible to use materials from national or regional organizations. The Domestic Violence Advocate currently serves a limited scope of work. Expanding services will require additional funds.	Medium – This work is currently contracted and expanding the scope of work and/or implementing and advocacy campaign will require additional staff resources.	Short-term.
<b>Regional Support</b>	\$ – Relies on elected official and staff support to attend regional committees. \$\$\$ - Contributions to a regional project would require direct support or grant program support.	Low to High – Liaison duties with the Human Services Commission are within the duties of the Community Services Coordinator now. If work expands and the City becomes directly involved in managing or collaborating on a regional initiative, additional staff resources will be needed.	Short-term.
<b>Awareness Campaign</b>	\$\$ – It could be possible to use materials from Lifewire or other organizations.	Medium – Some coordination is needed at the low end. More effort will be needed for community outreach and for targeted campaigns. Additional staff resources may be needed.	Short-term.
<b>Bystander Training</b>	Medium – Fund a training program for City staff.	Medium – Additional staff resources will be needed to implement and maintain new training programs.	Short-term.

Financial Support:  
 \$ - < \$100,000  
 \$\$ - \$100,000 - \$500,000  
 \$\$\$ - > \$500,000

Staff support needed:  
**Low** - Current staff, may need to adjust work priorities.  
**Medium** - Additional staff to manage or coordinate action.  
**High** - Additional staff to manage or coordinate and to implement.

Implementation Timeline once initiated:  
**Short-term** - 1 year  
**Mid-term** - 3 years  
**Long-term** - >3 years

## Health and Human Services in the Future



A healthy community in which all people have their basic needs met will require the City to take action. Leveraging existing resources, taking a lead in developing partnerships, and providing a few direct programs will begin to improve health and human services in Sammamish over the next few years. In addition, the City should continue to track long-range issues that have impacts on health and human services. A lack of affordable housing and limited options for transportation complicate each of the priority issues, and these challenges were mentioned in nearly every stakeholder interview. Advocacy on these issues is essential to meeting health and human service needs.

### ADVOCACY FOR AFFORDABLE HOUSING AND TRANSPORTATION

Affordable housing and transportation are complex, regional issues that cannot be solved by Sammamish alone. Yet the high cost of housing and lack of transportation options significantly impact health and human service needs in Sammamish. The City can benefit from investing in regional partnerships that catalyze and support long-term change in the community. In partnering with other peer cities on the Eastside and with local organizations in King County, it will be important to engage a range of community voices and to adopt an approach of information sharing, awareness building, and resource coordination. Legislative advocacy may also help to bring funding resources to the community.

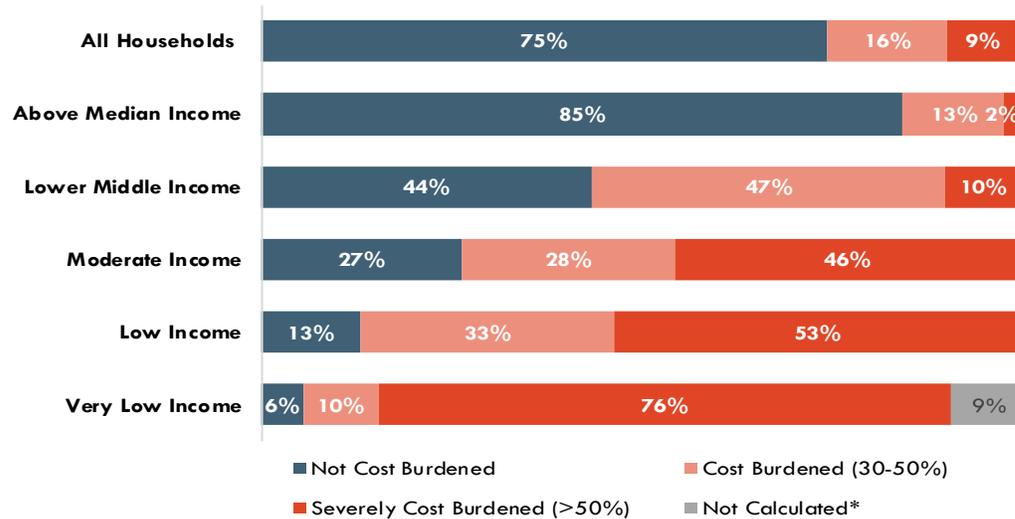
#### Need for Housing Affordability

Housing affordability is a significant concern in the Sammamish community, and rising housing costs across the region are a significant source of stress. This was echoed throughout outreach events and in the town hall survey. If families are housing cost-burdened, they will make trade-offs in areas such as healthcare, childcare, and adequate and nutritious food, to pay for housing. Families who wish to live in Sammamish because of the community or school district may sacrifice these basic needs.

The U.S. Department of Housing and Urban Development (HUD) deems housing to be affordable if a household spends no more than 30% of their gross income on housing costs (rent plus basic utilities or

gross monthly owner costs). Households are cost burdened if they pay more than 30% of their income for housing costs. Households paying more than 50% of their income for housing costs are considered severely cost burdened, leaving less income for other daily living expenses.<sup>11</sup>

**Exhibit 10. Housing Cost Burden by Income Level – City of Sammamish**



- One-quarter of households in Sammamish are housing cost burdened, paying more than 30% of their incomes on housing, and 9% are severely housing cost burdened, spending more than 50% of their incomes on housing.
- Some of the 13,240 households in Sammamish above area median income (AMI) have challenges with housing affordability. Fifteen percent of these households are cost burdened, paying more than 30% of their income on housing (almost 2,000 households), and 2% of these households are severely cost burdened, paying more than 50% of their incomes on housing (approximately 264 households).

### Need for Transportation Options

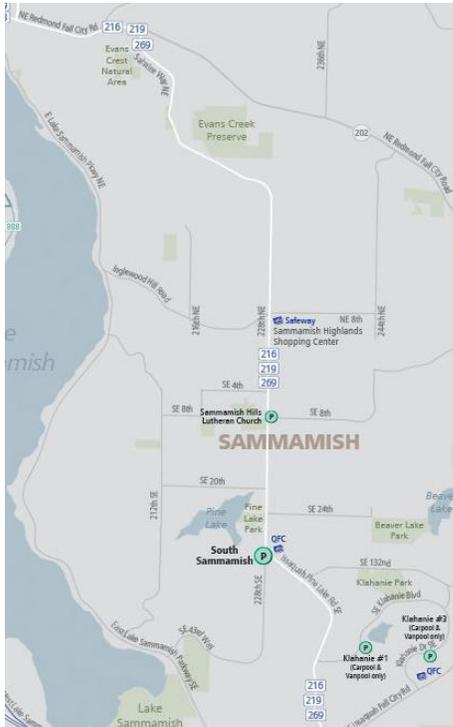
Sammamish is served by limited transit options, necessitating the need to drive most places, whether for work, school, or to grocery shopping or other errands. During outreach with seniors in the Indian community and with the YMCA, Sammamish residents and service providers highlighted a need for better

<sup>11</sup> HUD publishes cost burden estimates based on data from the ACS 5-year Estimates. The latest survey period for which cost burden data is available is 2010 to 2014. This means that cost burden estimates reflect income and housing costs as reported by a sample of residents in Sammamish during a rolling monthly survey between January 2010 and December 2014. This period includes the downturn in the housing market and rise in unemployment during and following the last economic recession. Housing costs have increased during the past few years, a fact that should be considered when interpreting cost burden data from HUD.

public transportation options.

There is minimal bus service in certain areas, and buses do not provide direct access to regional services and medical centers. In the town hall survey, Sammamish residents suggested several ideas related to improved transportation services: a small business service so that residents who don't drive can access the Issaquah Highlands or Redmond Bear Creek mid-day for medical services, or a circulator bus with access to retail centers, parks, the community center, and schools.

**Exhibit 11. King County Metro Systems Map, Sammamish**



Source: King County Metro System Maps

- Sammamish has three buses running north-south on one street through the center of Sammamish.
- Of the four park and ride lots, two are on the main bus line and two are for carpool and vanpool only in Klahanie.
- Residents can be as far as four miles away from a bus line. Walking to 228th Ave SE can take up to an hour.

**Continued Advocacy**

Sammamish should have continued presence on regional committees related to affordable housing, transportation, and health and human services. This may include elected officials applying for additional committees through the Sound Cities Association or PSRC. Part of the work of the Human Services Commission should include briefings on the work of these groups and developing strategies and policy direction to Council that could be forwarded to regional committees to advocate for improved funding and programming that could benefit health and human services in Sammamish.

When viewing complex issues such as transportation or affordable housing through the lens of health and human service needs, the following considerations may be useful:

- Short-term and mid-term solutions may be needed while the details of longer-term solutions are negotiated. For example, shuttle service may be needed as an interim solution while the region addresses mass transit options or develops mixed-use centers.
- Transportation options that increase the availability of alternate modes can positively address health and human service needs.
- Land use policies that make it more difficult to develop housing could negatively impact housing affordability, since a pipeline of housing is needed to develop affordable housing.
- Land use policies that directly or indirectly limit the production of diverse types of housing (townhomes, apartments, cottages, etc.) could negatively impact housing affordability.
- Coordinated land use and transportation policies that place medium or higher densities in a central location where people can walk, bike, or use transit for their daily needs are likely to help with both

housing affordability and transportation.

### Legislative or Congressional Funding

The Washington State Legislature operates a biennial budget process to fund state agencies, programs, and services. In the 2015-2017 budget process, about one-third of the state general fund budget went toward human services. The United States Congress operates an annual budgeting process that distributes federal tax money, including the funding of major programs and federal agencies and the earmarking of funds for special projects. Careful work with local legislative and congressional delegations could result in additional funding to support housing affordability and transportation in Sammamish.

### NEXT STEPS – DEVELOPING AN IMPLEMENTATION STRATEGY

The previous sections identified preliminary ideas for actions the City could take to address human services needs in Sammamish. These recommendations were based on early analysis and findings and were not prioritized. Taking action will require the City to make decisions about funding, staffing, and work program priorities. As an immediate next step, the City may consider developing a strategic plan with the following objectives:

- Define a clear strategy identifying the roles the City will play in each priority issue. For example, will the City be a direct service provider? Or will it continue with indirect services through partnerships and grant funding?
- Develop a prioritized work plan for implementing the City's desired model for staffing, funding, governance, phasing, and reporting.
- Establish long-term goals and policies for the human services program.

Given that the bulk of the analysis was already completed through this Needs Assessment, the final product will be a concise and simple document.

# Appendix 1: Health and Human Services Community Profile

## City of Sammamish Community Needs Assessment

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# Health and Human Services Community Profile

## City of Sammamish Community Needs Assessment

### PURPOSE AND CONTEXT

The City of Sammamish conducted a Community Profile to better understand the health and human service needs of its residents. Currently, Sammamish does not directly provide human services, but acts as a resource for community members looking to find services. In addition, the City grants over \$200,000 every two years to local non-profit organizations that provide health and human service programming to the Sammamish community. The purpose of this profile is to provide the City with a baseline understanding of the current conditions, help the City prioritize needs and where to put limited resources, and assess its role in addressing health and human service needs.

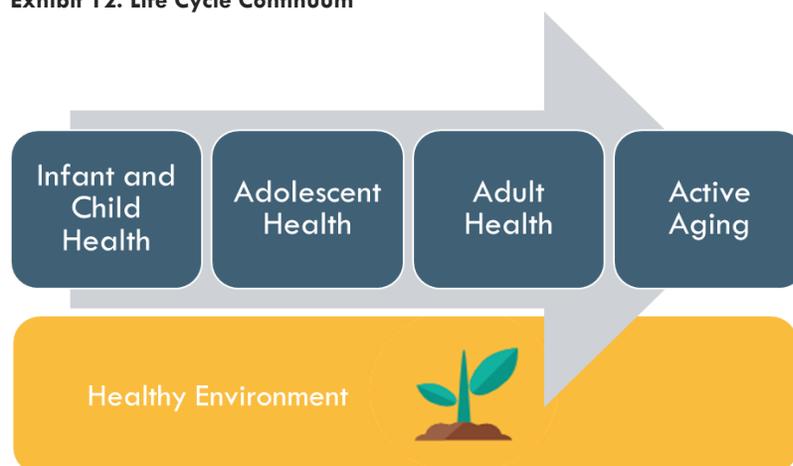
### METHODS AND DATA SOURCES

This Community Profile was compiled between June and September of 2017. The approach uses various methods for data collection and analysis to create an understanding of the education, health, nutrition, and social service needs of the residents of the City of Sammamish.

#### Life Cycle Approach

The Needs Assessment is organized around the life cycle approach to exploring the health and human service needs in Sammamish. This approach follows the premise that health and human services build well-being throughout people's lives and is illustrated in **Exhibit 12**. The report looks at needs of Sammamish residents through each of these life stages. It also assesses the influence of environmental factors on community health such as housing affordability, transportation, and crime.

#### Exhibit 12. Life Cycle Continuum



Source: Frameworks Institute *Talking Human Services*, BERK illustration 2017.

- Pre-natal care is critical to ensuring the health of the mother and baby.
- In childhood, access to early education builds a foundation for future success.
- Through the teen years, human services can provide support for healthy physical, social, and emotional development.
- In adulthood, a focus on access to safe, stable housing, reliable transportation, and mental health support keep communities healthy and vibrant.
- As adults age, services focus on inclusion and engagement to maintain well-being.
- Supporting each stage of the lifecycle is the foundation of a healthy environment.

### Secondary Data Sources

This report uses data from several data sources, which are summarized below.

- **American Community Survey (ACS).** In general, the analysis uses the 2010-2015 five-year estimates to support analysis at the city level.
- **Bureau of Labor Statistics**
- **Center for Disease Control and Prevention**
- **King County Metro**
- **Office of Refugee Resettlement (ORR)**
- **Office of Superintendent of Public Instruction (OSPI),** including the Washington Kindergarten Inventory of Developing Skills (WaKIDS)
- **Partners for Our Children (PoC) Data Portal**
- **Public Health Seattle & King County (PHSKC) City Health Profiles**
- **Seattle/King County Coalition on Homelessness**
- **U.S. Department of Housing and Urban Development (HUD).** HUD releases housing data annually under the Comprehensive Housing Affordability Strategy program (CHAS). Data is based on ACS 5-year estimates, and provides information on housing affordability, household income, and household composition.
- **Washington Healthy Youth Survey**
- **Washington State Department of Commerce and All Home, Seattle/King County Continuum of Care**
- **Washington State Department of Health (DOH) Data and Statistical Reports**
- **Washington State Department of Social and Health Services**
- **Washington State Office of Financial Management (OFM) April 1 population estimates.** OFM develops inter-census estimates of the populations of all cities and towns in the state for April 1. These estimates are considered the official jurisdictional population and are used in state program administration and to allocate revenues.

## Peer Cities

Where possible, data has been included on cities that neighbor Sammamish and/or could be considered peer cities. These cities were vetted with Sammamish city staff and the Human Services Task Force and include:

- Bellevue
- Lake Forest Park
- Redmond
- Issaquah
- Mercer Island
- Shoreline
- Kirkland

These peer cities were chosen due to their proximity to Sammamish, assumed similar socio-economic characteristics, or size. They serve as a point of comparison for Sammamish.

## Klahanie

Sammamish annexed Klahanie in 2016 and the following data summaries attempt to treat the area this way as best as possible with the data available. Depending on the data source, we have approached including Klahanie differently. In most cases we've included Klahanie as a separate census designated place, because the most recent Census data pre-dates the annexation. There are several data sources, such as detailed Census tables and Public Health Seattle King County, that do not include Klahanie at all due to its small size prior to be annexed. In these cases, Klahanie is omitted from the data summaries and its omission noted appropriately. There are several local data sources, such as OSPI's Health Youth Survey, where data is reported by different geographic boundaries than city, such as school district or school. In these cases, we have included Klahanie as part of Sammamish.

## COMMUNITY INPUT

Community input was collected over three months from June to August 2017. This included 20 stakeholder interviews, three focus groups, and four outreach events with providers and relevant organizations. It also included an online survey through the Sammamish Virtual Town Hall.

### Virtual Town Hall Survey

The City of Sammamish Virtual Town Hall website hosted an online survey to learn more about community needs from all members of the Sammamish community. The survey was voluntary and open from June 12 to July 28, 2017. 184 people elected to participate in this survey and the results are shown in more detail in Appendix 1.A – Virtual Town Hall Results. Since third-party data shows that the incidence of health and human services challenges are low in Sammamish, the intent of the survey was to capture more detail about those residents who *may be* facing health and human services challenges. Postcards with survey links were placed in locations throughout the community and distributed by members of the Human Services Task Force at several community events. The City provided electronic links to the survey on its website and through social media. In addition, staff and consultants promoted in the diverse stakeholder outreach events described below.

### Community Stakeholders and Service Providers

With the help of the Human Services Task Force and city staff, the project team identified a variety of community stakeholders and service providers active on the Sammamish Plateau. To collect information about community needs, the project team contacted over 30 groups to participate in telephone interviews

or focus groups. Participants included:

- City Clerk of Sammamish – administrator of the city’s Health and Human Services Grant Program.
- Department of Social and Health Services – administers social services to children and adults in East King County.
- Eastside Catholic School – private middle school and high school.
- Eastside Fire & Rescue – local life safety emergency service provider and community support.
- Friends of Youth – youth service agency that helps address mental health and substance abuse.
- Friends of Seniors – service agency that helps seniors connect with resources to improve daily living.
- Imagine Housing – affordable housing developer, manages the Highland Gardens housing in Klahanie.
- India Association of Western Washington – provides social support for Indian immigrants.
- Issaquah Food & Clothing Bank – provider of food services and other short-term emergency needs.
- Issaquah School District – public education provider.
- Kinderling Center – provides services to children and families with special needs.
- King County Library System – library facility that includes programming for social and community support.
- Lake Washington School District – public education provider.
- LifeWire – connects those experiencing domestic violence to services and assistance.
- Sammamish Police Department – law enforcement agency and community support.
- YMCA – provider of community support and health and recreational services for children, adults, and seniors.
- Youth Eastside Services – youth service agency that addresses mental health.

In addition to these community stakeholders, the project team conducted a focus group with staff from several peer cities to better understand the approaches that other cities take in helping to address health and human services needs.

### Diverse Stakeholder Outreach

In accordance with the Diverse Stakeholder Strategy, the project team completed several outreach events to targeted groups, including youth, diverse communities (Chinese and Indian communities), low income individuals and families, and seniors. The project team held four outreach events within the local community from June to July 2017 to encourage attendees to complete the Town Hall survey. The following is a summary of outreach events to diverse stakeholders.

#### *Diverse Communities: Chinese Play and Learn at KCLS Sammamish Branch Library*

KCLS library staff allowed the project team to set up a table with surveys and flyers before and during their Chinese Play and Learn event at the Sammamish branch library on July 11, 2017. Two volunteer

Chinese language translators from Chinese Information and Service Center (CISC) also came to support the event. The Chinese Play and Learn attracted approximately 30 adults (grandparents, parents) and young children. We talked with many attendees to explain in Chinese what the needs assessment project is and why the City is seeking public input. A couple of attendees completed the survey, and this was a great opportunity to engage the Chinese community in Sammamish about health and human services and public participation in local government.

*Diverse Communities: Chair Yoga Class*

BERK and two task force members attended a morning chair yoga class at the Sammamish Teen & Recreation Center on June 19, 2017. The event was suggested by a contact at the India Association of Western Washington (IAWW), as a class with many Sammamish residents of South Asian/Indian heritage. Most of the attendees were also seniors. Surveys were distributed in English to attendees before the start of the class. About 25-30 surveys were completed at the event. Some attendees with limited English proficiency were not able to participate.

*Youth: Sammamish Teen Center Summer Camp*

The project team held a morning outreach event at the Sammamish Teen & Recreation Center on June 30, 2017. The Boys and Girls Club holds a summer day camp at this location with mainly tweens and teens. Campers were invited to fill out the survey, and morning breakfast treats and fruits were provided by the City. Approximately 20-25 youth completed the survey.

*Youth: 2017 Action Forum for Youth Breakfast*

The Issaquah Schools Foundation hosted a breakfast and invited community stakeholders to a discussion on how to best support youth in Sammamish. Representatives of both the Issaquah School District and the Lake Washington School District attended the event which included a presentation of the 2016 Healthy Youth Survey results. This event also featured a panel of about a dozen middle school and high school youth that answered questions about teen experiences related to substance use, mental health, and community support. City staff and a member of the project team attended to capture the thoughts and insights of the youth panel.

*Families with Low Incomes: Pizza Party at Imagine Housing in Klahanie*

The project team worked with Imagine Housing, a low income and affordable housing provider, to hold an event at their Sammamish property, the Highland Gardens in the Klahanie neighborhood. The event was held from 11:30 to 1:30 pm on June 27, 2017. Many children and some parents attended and a pizza lunch was provided by the City. Parents and older children filled out the survey online. There were approximately 20-30 attendees.

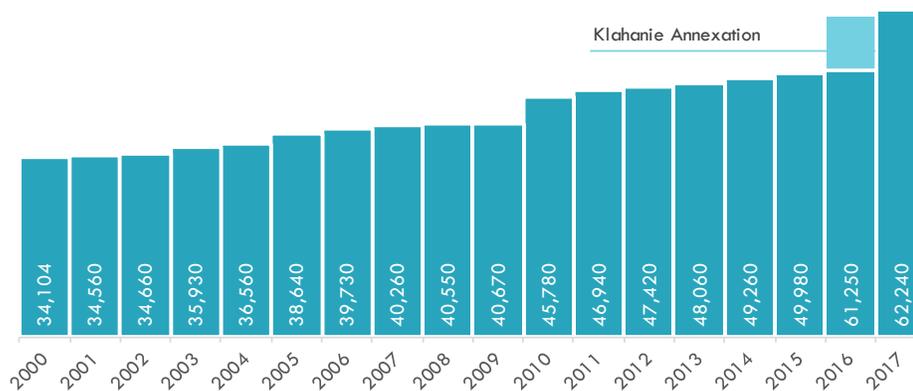
## Population and Demographic Characteristics

By most measures, Sammamish is doing much better than average with high incomes and educational attainment, and good health outcomes. However, there are individuals and families who may need various forms of support at different times in their lives, even if that support is needed at lower rates than in surrounding communities.

### POPULATION

Sammamish has grown steadily since its incorporation in August of 1999, almost doubling its population in just under 20 years. In 2000, the population was estimated to be just under 34,000 residents, and with the annexation of Klahanie in 2016, has grown to over 60,000, an increase of 83%. Prior to the annexation, from 2010 to 2015, Sammamish was growing at an average annual rate of 1.8%. This is a similar, but slightly higher growth rate to King County overall, which grew at 1.7% during the same period.

**Exhibit 13. Sammamish Population, 2000 – 2016**



Source: OFM April 1 population estimates, 2016 and BERK Consulting, 2017.

- The 2016 Sammamish population of 61,250 includes the April 2015 annexation of Klahanie.
- Prior to the annexation of Klahanie, from 2010 – 2015, Sammamish had an annual average growth rate of 1.8%.

## AGE DISTRIBUTION

**Exhibit 14. Percent of Sammamish and Klahanie Population by Year and Sex, 2015**



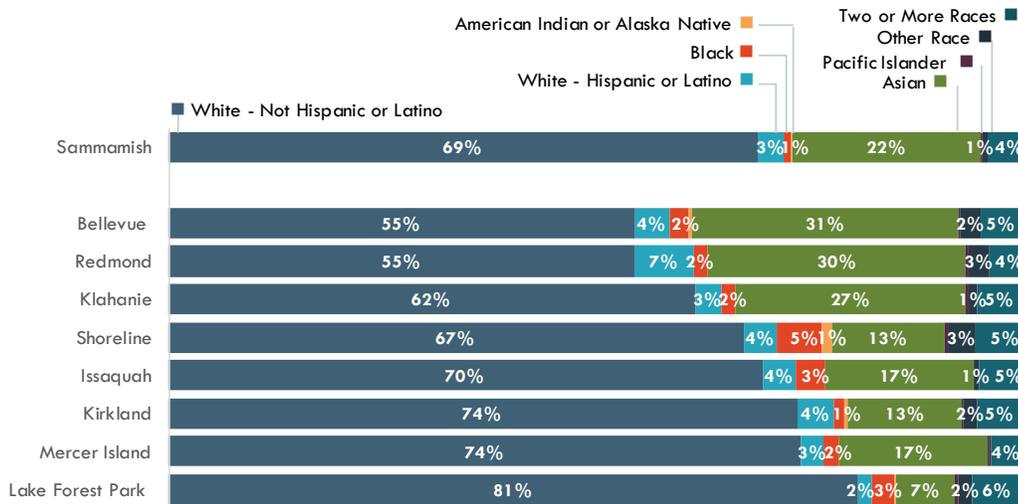
Source: ACS 2015 5-year estimates, Age and Sex, BERK 2017.

- 1/3 of the Sammamish and Klahanie population is under the age of 18 (33%).
- Klahanie has a slightly higher percentage of residents that are older than 55 compared to Sammamish. As of 2015, 19.8% of Klahanie was older than 55 years, while this age group represented only 17.6% of Sammamish residents. 2.1 percentage points of this population difference is driven by those aged 55 to 64.

## RACE AND ETHNICITY

Exhibit 15 presents the distribution of people among the federal race categories and Hispanic ethnicity for the City of Sammamish and nearby cities. The white non-Hispanic population in the State of Washington is close to 70%, similar to that of the U.S. overall. King County is more diverse with greater than a third of residents being Hispanic and/or not white alone.

**Exhibit 15. Race and Ethnicity**



Source: ACS 2015 5-year estimates, Demographic and Housing Estimates, BERK 2017.

Sammamish has a similar racial makeup to neighboring Issaquah, as well as Mercer Island. Most residents are White (69%), with a large proportion of Asian residents (22%). In addition, approximately 3% of residents are White Hispanic and 4% identify as being two or more races.

### IMMIGRANT POPULATION

In King County, the immigrant population is highly diverse with significant variations in life history. Sammamish likely attracts immigrants that are part of the high-tech and global trade-focused economy because of its proximity to companies and organizations that have created demand for highly skilled workers that come from all over the world.

In addition, the diverse ethnic population in King County makes the region attractive for economic immigrants. Long-standing, multi-generational immigrant communities can sponsor the immigration of family members from their home country or from the countries their family members fled to at the time of their displacement.

**What we heard from Youth Eastside Services**

- Diversity is growing, especially Indian and Chinese cultures.
- Youth from different cultures may feel that they are bringing shame upon the family if they reach out for help.

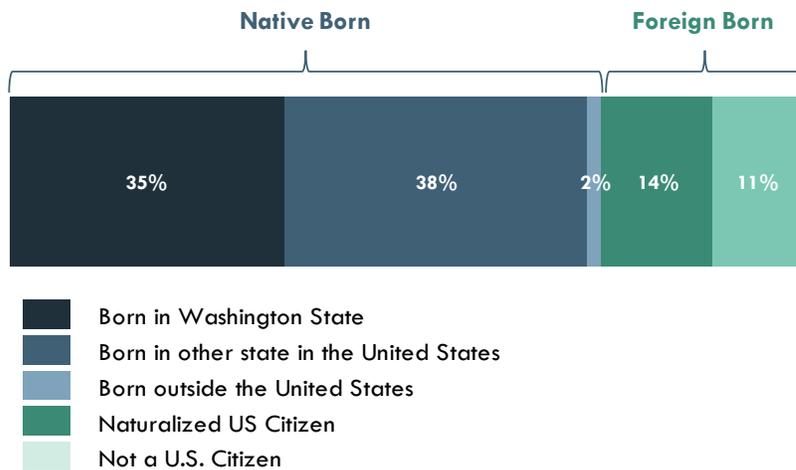
**What we heard from Issaquah School District**

- Kids with immigrant parents have a foot in two very different worlds.
- American culture is about personal, individual success, and forging one’s own path.
- In Sammamish, most of the immigrant cultures are collectivist and value duty, honoring the family, following the path set for you.

### Foreign Born

In 2015, the Census Bureau estimated that a quarter of Sammamish residents were foreign born, as seen in **Exhibit 16**. Of those born elsewhere, the majority originate from Asia (62%), specifically Eastern Asia, as seen in Exhibit 17 and Exhibit 18.

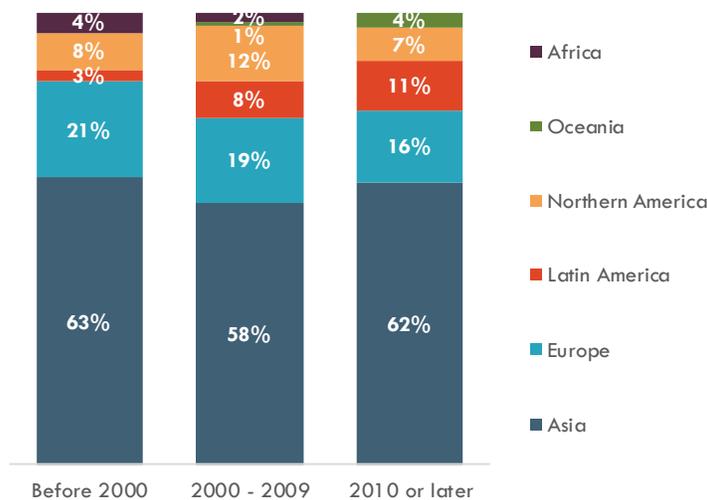
**Exhibit 16. Place of Birth by Nativity and Citizenship Status**



Source: ACS 2015 5-year estimates, Place of Birth for the Foreign-Born Population in the U.S. (Table B05002); BERK, 2017.

- Many non-citizen foreign born residents in Sammamish may work in the area. In FY2016 (October 1, 2015 – September 30, 2016) King County saw almost 4,000 certified H1B visas for Microsoft (Foreign Labor Certification, 2016).

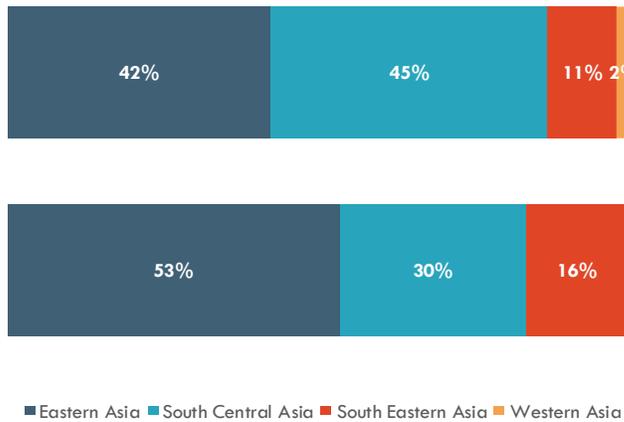
**Exhibit 17. Sammamish Place of Birth for the Foreign-Born Population by Year**



Notes: Oceania includes Australia and the nations of the Pacific. Similar information for Klahanie was not available in 2015. Source: ACS 2015 5-year estimates, Place of Birth by Year of Entry by Citizenship Status for the Foreign-Born Population; BERK, 2017.

- In recent decades, Sammamish has seen a decline in the number of foreign born residents from Europe and Africa, and an increase in the share of residents born in Latin America and Oceania.

**Exhibit 18. Place of Birth for Asian Born Population, Sammamish and Klahanie, 2010 – 2015**



Source: ACS 2015 5-year estimates, Place of Birth for the Foreign-Born Population in the U.S. (Table B05006); BERK, 2017.

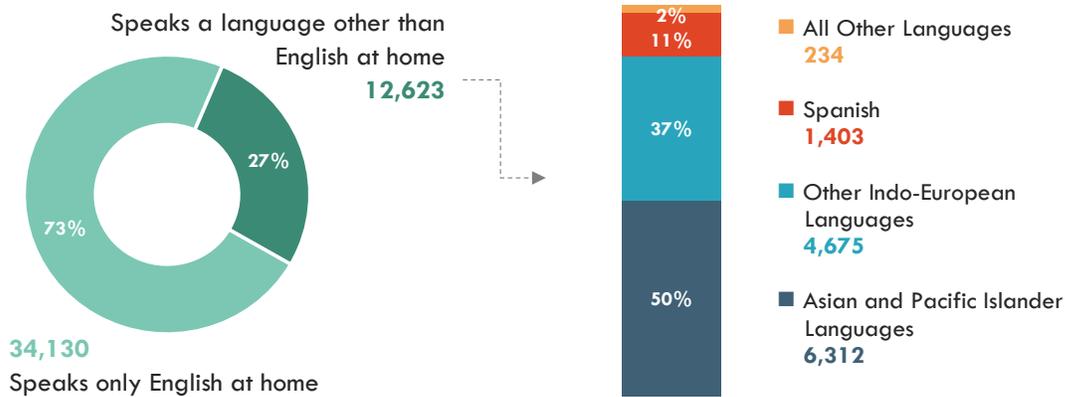
- Sammamish, prior to the annexation of Klahanie saw similar proportions of foreign born Asians from Eastern Asia (42%), which includes China, and South-Central Asia (45%), which includes India.
- Klahanie has a much higher proportion of Asian residents from Eastern Asia (53%), and South-Eastern Asia (16%) compared to Sammamish before the annexation.

### Language Spoken at Home

Analysis of language spoken at home provides insight into both the needs of the community (in terms of barriers to information due to English ability) as well as detail on the ethnic and identity diversity of the community.

In Sammamish, most the population speaks only English at home. However, there is a large percentage (27%) that speaks a language other than English at home, the majority of which speak an Asian or Pacific Islander language (50%) as seen in **Exhibit 19**.

**Exhibit 19. Languages Spoken at Home in Sammamish, 2010 – 2015**

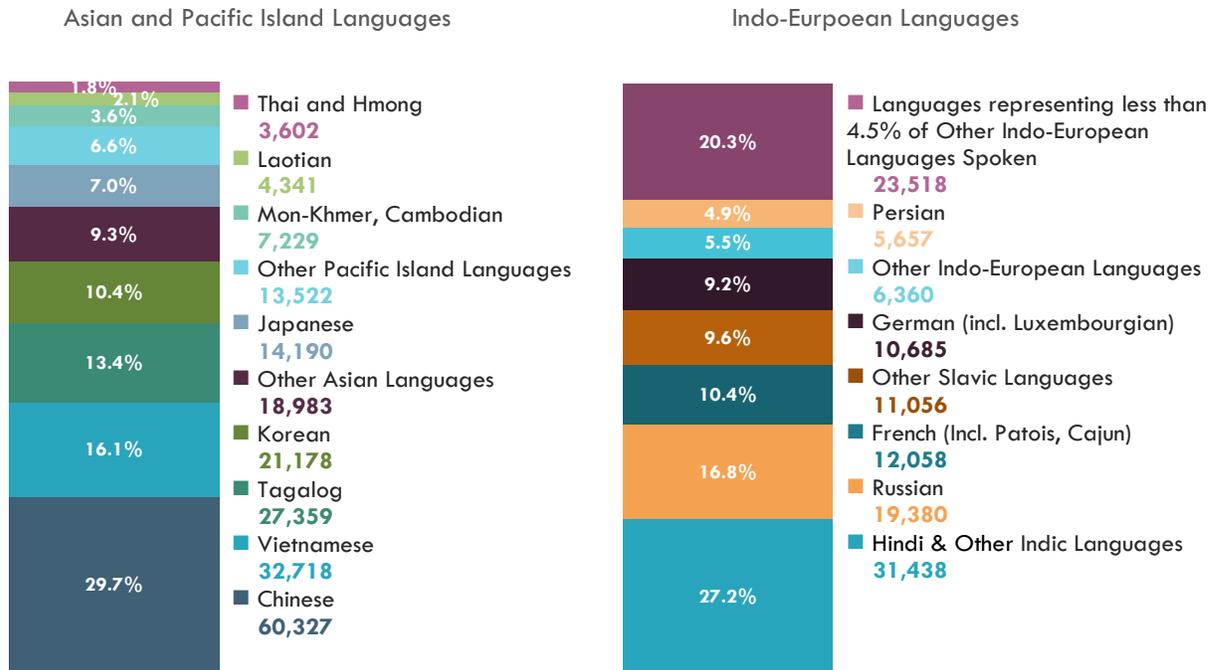


Source: ACS 2015 5-year estimates, Language Spoken at Home (Table S1601), BERK 2017.

Non-English speakers in Sammamish are mostly made of Asian and Pacific Islander Language speakers as well as other Indo-European language speakers. Although detailed language information is not available at the city-level, the U.S. Census published greater language detail based on an earlier American Community Survey sample (2009 – 2013, 5-year estimate) for King County. These data provide more detailed counts on many more languages than are typically published as part of the routine ACS data summary. In that year, there were more than 1.8 million people over the age of 5 in King County, 26% of whom spoke a language other than English at home. It should be noted that these data are self-reported, and people may report they speak English at home if a family member speaks English.

**Exhibit 20** displays the detailed language breakout for King County for the two most prevalent language categories in Sammamish.

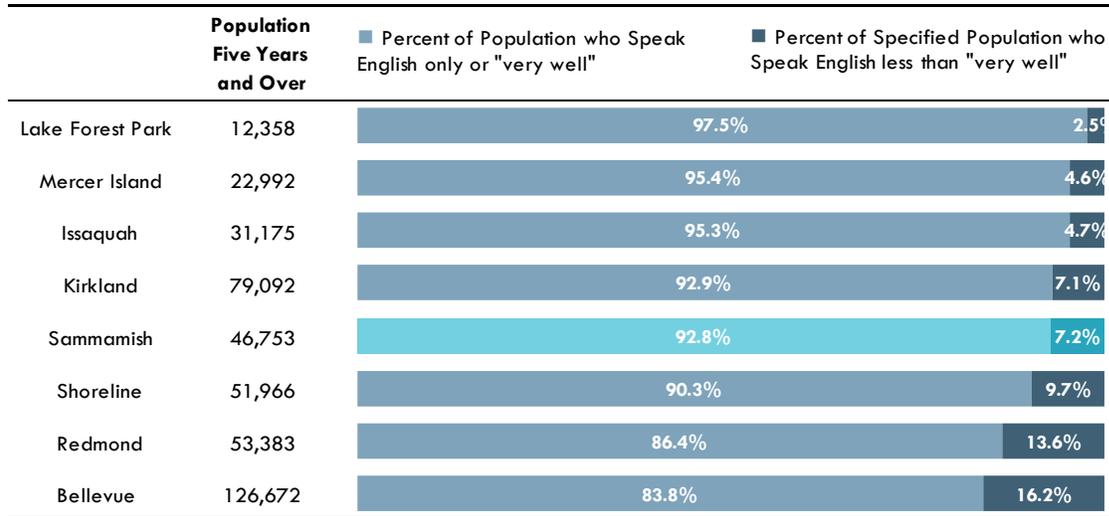
**Exhibit 20. Detailed Languages Spoken at Home in King County, 2009 – 2013**



Source: Detailed Languages Spoken at Home and Ability to Speak English for the Population 5 Years and Over for King County, WA: 2009-2013. Release Date: October 2015.

Some families in Sammamish may speak another language at home, even if they are proficient at English. To get a sense of individuals that may feel isolated or need outreach in another language, Exhibit 21 shows the level of English proficiency for residents of Sammamish and peer cities.

**Exhibit 21. English Proficiency, 2011 – 2015**



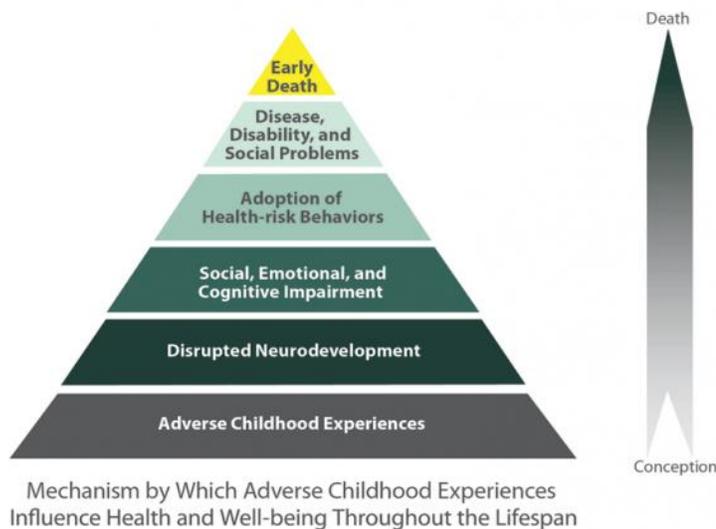
Source: ACS 2015 5-year estimates, Language Spoken at Home (Table S1601), BERK 2017.

- Of the population five and over in Sammamish, over 3,000 are estimated to speak English less than “very well” by the Census (7.2%). This is a similar percentage to the population in Kirkland, and a smaller share of the population than in neighboring Redmond (13.6%) and Bellevue (16.2%)

## Infant, Child, and Adolescent Health

Childhood experiences have a life-long impact on future health and wellbeing (Felitti, 1998). Children and youth who live in healthy and secure environments have been shown to enjoy better health and more success as adults. Children who experience three or more adverse childhood experiences (ACEs) show increased risk for substance abuse, chronic disease, poor work performance, violence, poor mental health, unintended pregnancies, and a whole host of other factors that affect the entire lifecycle. ACEs include situations such as: economic hardship, parental death, divorce, living with someone who is depressed or mentally ill, or living in a household with substance abuse or violence. The Felitti study shows that ACEs are very common – about two-thirds of study participants reported at least one ACE. However, children exposed to more ACEs or with longer duration of exposure, are at increased risk of lifetime effects on physical health, mental health, overall well-being, and personal success. The Center for Disease Control and Prevention uses the figure in **Exhibit 22** to show how ACEs influence a child throughout their lifespan.

**Exhibit 22. Adverse Childhood Experiences Pyramid**



Source: Center for Disease Control and Prevention, 2016.

Reducing exposure to ACEs and addressing other obstacles that prevent children and youth from developing to their full potential helps the whole community thrive. Not only does this have the potential to improve health and life outcomes for individuals, but communities tend to be more stable and prosperous when children grow up to be healthy, capable, and functional adults.

### PRENATAL HEALTH AND BIRTH RISK FACTORS

Birth risk factors are important for understanding childhood outcomes. Low and very low birth weights are known to have adverse effects on long term developmental outcomes of children and can have impacts on chronic conditions in adulthood and on educational attainment (Hack, et al., 2002).

**Exhibit 23. Birth Risk Factors, 2010 - 2014**

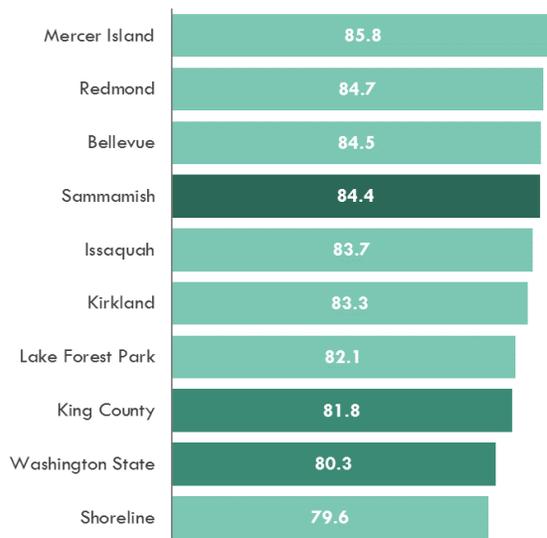
	Low birth weight (<2500 g)/100 births	Late or no prenatal care/100 births	Very low birth weight (<1500 g)/100 births	Smoking during pregnancy/100 births
Washington	6.3	6.1	1.0	10.6
King County	6.5	5.5	1.0	4.4
<b>Sammamish</b>	6.0	3.1	0.8	0.9
Bellevue	7.3	6.2	0.9	1.4
Issaquah	4.9	3.4	0.9	1.4
Kirkland	6.0	3.4	0.7	2.4
Lake Forest Park	5.8	2.9	0.9	2.9
Mercer Island	6.5	2.2	0.8	0.8
Redmond	6.6	3.8	1.1	1.3
Shoreline	6.3	3.8	1.1	5.1

Source: Birth certificate and linked infant birth-death certificate data, Washington State Department of Health via Public Health Seattle & King County City Profile, 2016; BERK, 2017.

- Indicators of birth risk factors are low in Sammamish compared to King County. The City of Sammamish has similar rates of birth risk factors to the cities of Kirkland and Lake Forest Park on many indicators. However, Sammamish has much lower rates of smoking during pregnancy than those jurisdictions (0.9 per 100 births compared to 2.4 and 2.9 respectively).

Life expectancy at birth is often used as an outcome measure for health improvement efforts and population health. The U.S. Office of Disease Prevention and Health Promotion often uses this indicator to measure progress of their ten-year national objectives for improving the health of the U.S. population. The estimate for life expectancy at birth for the United States was 79.8 in 2016. The life expectancy at birth for Washington State, King County, and Sammamish are longer as seen in **Exhibit 24**.

Life expectancy typically depends on multiple factors such as personal and family health, but is also correlated with income. While life expectancy for the wealthy and middle-class have increased, life expectancy for the poor has not (National Academies of Sciences, Engineering, and Medicine, 2015).

**Exhibit 24. Life Expectancy at Birth (years of age), 2010 – 2014**

Source: Death certificate and the Behavioral Risk Factor Surveillance System (BRFSS), Washington State Department of Health, Center for Health Statistics via Public Health Seattle & King County City Profiles, 2016; BERK 2017.

## CHILDHOOD POVERTY & HOMELESSNESS

Childhood poverty presents many risk factors for children that lead to diminished opportunities and success throughout life. Early education and child development services have been demonstrated to improve outcomes for children as they enter elementary school including improved pre-reading, pre-writing, vocabulary, and literacy skills.

The range of children that experience challenges associated with lower incomes can range from children experiencing homelessness, to kids living in subsidized housing, to kids whose families are not in poverty but are severely housing cost burdened to the point that it affects the ability to adequately provide for other basic needs.

### Free and Reduced-Price Meals (FARM)

One measure of family economic hardship is Free and Reduced-Price Meal (FARM) eligibility for school-aged children. The U.S. Department of Agriculture's Food and Nutrition Service determines meal eligibility for school-aged children based on federal poverty levels. Income guidelines are used by schools that participate in the National School Lunch Program, School Breakfast Program, Special Milk Program for Children, Child and Adult Care Food Program, and Summer Food Service Program. Children in foster care and those

### What we heard from school districts and other youth service organizations

Kids from less wealthy or lower income families often:

- Struggle in school because they feel less accepted and like they don't fit in.
- Participate less in sports and extracurricular activities because they can't afford them, have problems finding transportation, or they have responsibility for their siblings after school.
- Experience increased social isolation and stress that can affect academic performance.

receiving services under the Runaway and Homeless Youth Act are also eligible for FARM. **Exhibit 25** shows the number of students eligible for FARM in Issaquah and Lake Washington School Districts.

**Exhibit 25. Enrollment and Eligibility for FARM, 2016-17 School Year**

	Total Number of Students Enrolled	■ Non-FARM Eligible Students	■ FARM Eligible Students
<b>Issaquah SD</b>	20,399	93%	7%
Cascade Ridge Elem.	543	99%	1%
Challenger Elementary	573	95%	5%
Creekside Elementary	719	99%	1%
Discovery Elementary	587	99%	1%
Sunny Hills Elementary	638	95%	5%
<b>Lake Washington SD</b>	25,827	88%	12%
Blackwell Elementary	541	98%	2%
Carson Elementary	441	98%	2%
Margaret Mead Elem.	627	98%	2%
McAuliffe Elementary	533	98%	2%
Smith Elementary	639	99%	1%

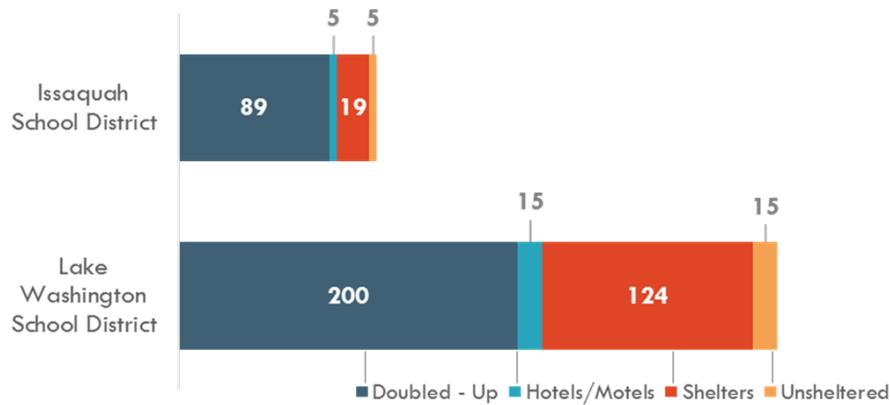
Source: OSPI, <http://www.k12.wa.us/ChildNutrition/Reports.aspx>

- 7% of Issaquah School District students are eligible for free and reduced meals, while 12% of Lake Washington School District students are eligible for free and reduced-price meals. Students at schools in Sammamish are eligible for free and reduced-price meals at lower rates than district averages.
- Schools in Sammamish have a lower percentage of students that are eligible for free or reduced-price lunch compared to the school districts overall.
- Both Sunny Hills and Challenger Elementary Schools in the Issaquah School District have higher shares of FARM eligible students than other Sammamish elementary schools (5%)
- The data not include children not-yet enrolled in school. Additionally, some families who qualify based on income may elect not to participate in the program due to dietary restrictions, not wanting to accept that they need the benefits, or other reasons.

### Homeless Students

Homelessness has a particularly adverse effect on young children. Children who lack a nighttime residence that is fixed, regular, and adequate are considered homeless under the McKinney-Vento Act. This includes children from families sharing housing with others due to loss of housing, economic hardship, or other similar reasons, those living in shelters, motels, cars, and other places not designed for sleeping. **Exhibit 26** present the numbers of McKinney-Vento qualified students in the Issaquah and Lake Washington School Districts.

**Exhibit 26. McKinney Vento qualified students**



Source: OSPI Homeless Students in Washington State by School District

- Percent of children qualifying for McKinney Vento (all grades):
  - 0.6% of Issaquah School District children
  - 1.3% of Lake Washington School District children

## KINDERGARTEN READINESS

There is a large body of evidence on the importance of early education for brain development and lifetime success. Long term evaluations show that children who attend high-quality preschools are better prepared to enter kindergarten. This has led cities like Seattle to focus on implementing universal preschool programs. However, there are still many children who would benefit from quality preschool who remain underserved because of cost, availability, or both (City of Seattle, 2015).

Student preparedness for kindergarten is measured by assessing incoming students in kindergarten according to age-appropriate developmental benchmarks across six domains: social-emotional, physical, cognitive, language, literacy, and mathematics. For the purposes of the following analysis, children who do not meet developmentally appropriate expectations for their age (age 5) are considered not kindergarten ready. Exhibit 15 presents a summary of the assessment of readiness for kindergarten for Sammamish elementary schools in both Issaquah and Lake Washington School Districts.<sup>12</sup> Children who did not meet developmental benchmarks for age 5 across all six domains are listed as not kindergarten ready.

<sup>12</sup> Eastside Catholic provides private middle school and high school education in Sammamish to students who live throughout the region. As a private school, it is not included in most sources of school-related data. However, Eastside Catholic is a community stakeholder and a staff member of the school was interviewed as part of the outreach for this report.

### Washington Kindergarten Inventory of Developing Skills (WaKIDS) Whole Child Assessment

The WaKIDS Whole Child Assessment is one component of a transition process for students and families entering kindergarten. State-funded, full-day students are assessed when entering kindergarten with the goal of identifying ways to improve the transition for children with varying degrees of skills.

During the Whole Child Assessment, six domains of skills are assessed by teachers across the state. Example measures of each domain is included below.

**Social Emotional.** Manages feelings, follows limits and expectations, interacts with peers, makes friends, responds to emotional cues.

**Physical.** Demonstrates traveling and balancing skills, has gross-motor manipulative skills, uses fingers and hands, uses writing and drawing tools.

**Language.** Comprehends language, follows directions, engages in conversations.

**Cognitive.** Attends and engages, solves problems, recognizes and recalls, uses classification skills.

**Literacy.** Notices rhymes, notices discrete units of sound, interacts during reading experiences, identifies and names letters.

**Math.** Counts, quantifies, understands shapes, demonstrates knowledge of patterns.

### Exhibit 27. Kindergarten Readiness, School Year 2016 - 2017

	Percentage Not Meeting Kindergarten Readiness Benchmarks	Percentage Meeting Kindergarten Readiness Benchmarks	Students Assessed
<b>Issaquah School District</b>	26% 	74%	1,395
Cascade Ridge Elementary	33% 	67%	61
Challenger Elementary	36% 	64%	140
Creekside Elementary	20% 	80%	100
Discovery Elementary	10% 	90%	86
Sunny Hills Elementary	32% 	68%	88
<b>Lake Washington School District</b>	36% 	64%	2,300
Blackwell Elementary	25% 	75%	79
Carson Elementary	29% 	71%	62
McAuliffe Elementary	21% 	79%	86
Mead Elementary	19% 	81%	120
Smith Elementary	24% 	76%	84

Source: OSPI, <http://reportcard.ospi.k12.wa.us/DataDownload.aspx> Data Files WaKIDS Scores by District and School; BERK 2017

- The Issaquah School District has a lower proportion of children not meeting developmental benchmarks at age five than the Lake Washington School District. Note that these overall statistics

include schools outside of Sammamish.

- Cascade Ridge Elementary in eastern Sammamish has the highest proportion of students not meeting developmental benchmarks at age five (33%), followed by Sunny Hills Elementary near Klahanie, with 32% not meeting developmental benchmarks at age five.
- In the Lake Washington School District, Carson Elementary, in northern Sammamish, has the highest proportion of students not meeting developmental benchmarks at age five (29%).
- In Sammamish Elementary Schools on the whole, 23% of children do not meet Kindergarten Readiness Benchmarks (176 students in each Sammamish Elementary School), compared to:
  - Issaquah School District: 26% do not meet Kindergarten Readiness Benchmarks.
  - Lake Washington School District: 36% do not meet Kindergarten Readiness Benchmarks.

Nationwide there is a widening income achievement gap that has continued to grow over the last three decades. (Reardon, 2013) The income achievement gap is indicated by low-income students as a group performing less well than high-income students on most measures of academic success. In Sammamish, there is an income gap in Kindergarten Readiness, with students from low-income households performing less well on kindergarten readiness benchmarks, as indicated in **Exhibit 28**.

**Exhibit 28. District Level Kindergarten Readiness by Income**

	Percentage Not Meeting Kindergarten Readiness Benchmarks		Percentage Meeting Kindergarten Readiness Benchmarks	Income Achievement Gap
<b>Issaquah School District</b>				
All Students	26%		74%	<b>32%</b>
Low Income	58%		42%	
<b>Lake Washington School District</b>				
All Students	36%		64%	<b>35%</b>
Low Income	71%		29%	

Source: OSPI, <http://reportcard.ospi.k12.wa.us/DataDownload.aspx> Data Files WaKIDS Scores by District and School; BERK 2017

- Issaquah School District: 74% meet Kindergarten Readiness Benchmarks, while 42% of low income students meet benchmarks, leaving a 32-percentage point income achievement gap.
- Lake Washington School District: 64% meet Kindergarten Readiness Benchmarks, while 29% of low income students meet benchmarks, leaving a 35-percentage point income achievement gap.

Although there are children with limited English that are not meeting Kindergarten readiness benchmarks, the achievement gap is not as great as with income as seen in **Exhibit 29**.

**Exhibit 29. District Level Kindergarten Readiness by Limited English**

	Percentage Not Meeting Kindergarten Readiness Benchmarks	Percentage Meeting Kindergarten Readiness Benchmarks	Limited English Achievement Gap
<b>Issaquah School District</b>			
All Students	26%	74%	10%
Limited English	36%	64%	
<b>Lake Washington School District</b>			
All Students	36%	64%	10%
Limited English	46%	54%	

Source: OSPI, <http://reportcard.ospi.k12.wa.us/DataDownload.aspx> Data Files WaKIDS Scores by District and School; BERK 2017

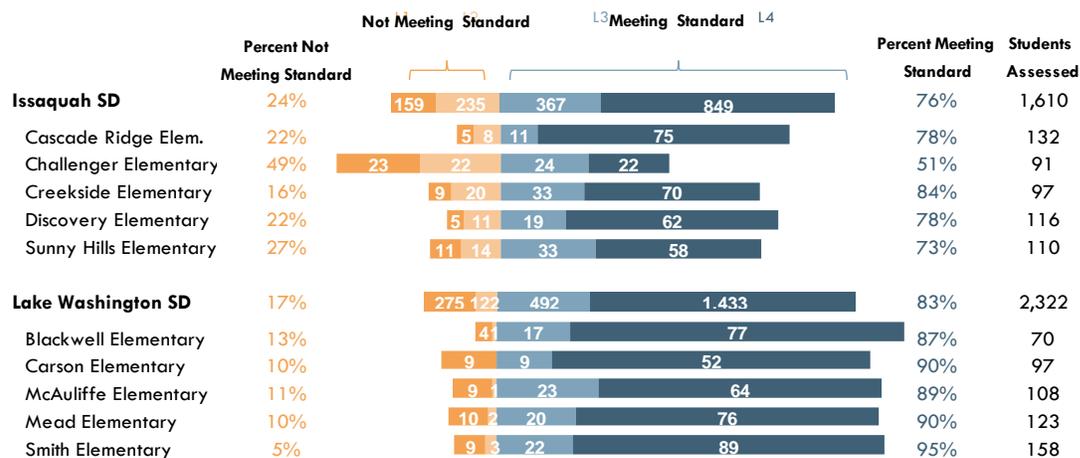
**ACADEMIC PROGRESSION**

Academic progression is fostered and measured by OSPI through the Smarter Balanced program. Smarter Balanced includes digital resources for teachers and a standardized test (the Smarter Balanced Assessment [SBA]) that assesses proficiency in English language arts and math (common core standards). These learning standards are designed to prepare students for college, careers, and life.

Meeting grade-level learning standards in elementary school is predictive of high school completion. Third grade reading specifically is predictive of later academic persistence. After third grade, students must rely on foundational literacy skills to make timely progress on later grade learning objectives. Those who do not meet grade-level expectations in third grade reading and language arts not only struggle in later grades, but often face a knowledge gap that grows through elementary and middle school.

**Exhibit 30** presents the SBA results for third grade reading and language, while **Exhibit 31** presents the SBA results for fourth grade math. Both exhibits show assessment results for the elementary schools in Sammamish as well as for their parent school districts.

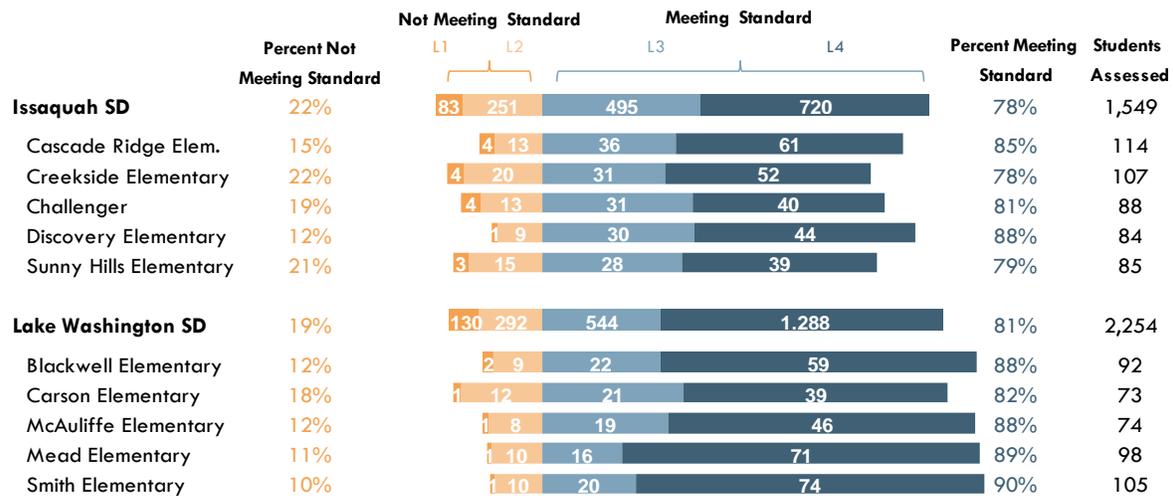
**Exhibit 30. Issaquah and Sammamish School Districts, 3<sup>rd</sup> Grade English Language Arts Assessment Results**



Source: OSPI, <http://reportcard.ospi.k12.wa.us/DataDownload.aspx> 2016 Data Files AIM-EOC-MSP-SBA Assessments School

- On average, 15% of students in elementary schools in Sammamish are not meeting third grade reading and language standards.
  - On average, 22% of Sammamish students in Issaquah School District elementary schools are not meeting reading and language standards, compared to 24% of students that are not meeting reading and language standards throughout all the elementary schools in the Issaquah School District.
  - On average, 9% of Sammamish students in Lake Washington School District elementary schools are not meeting reading and language standards, compared to 17% of students that are not meeting reading and language standards throughout all the elementary schools in the Lake Washington School District.

**Exhibit 31. Issaquah and Sammamish School Districts, 4<sup>th</sup> Grade Math Assessment Results**



Source: OSPI, <http://reportcard.ospi.k12.wa.us/DataDownload.aspx> 2016 Data Files AIM-EOC-MSP-SBA Assessments School

- On average, 15% of students in elementary schools in Sammamish are not meeting fourth grade math standards.
  - On average, 18% of Sammamish students in Issaquah School District elementary schools are not meeting math standards, compared to 22% of students that are not meeting math standards throughout all the elementary schools in the Issaquah School District.
  - On average, 12% of Sammamish students in Lake Washington School District elementary schools are not meeting math standards, compared to 19% of students that are not meeting math standards throughout all the elementary schools in the Lake Washington School District.

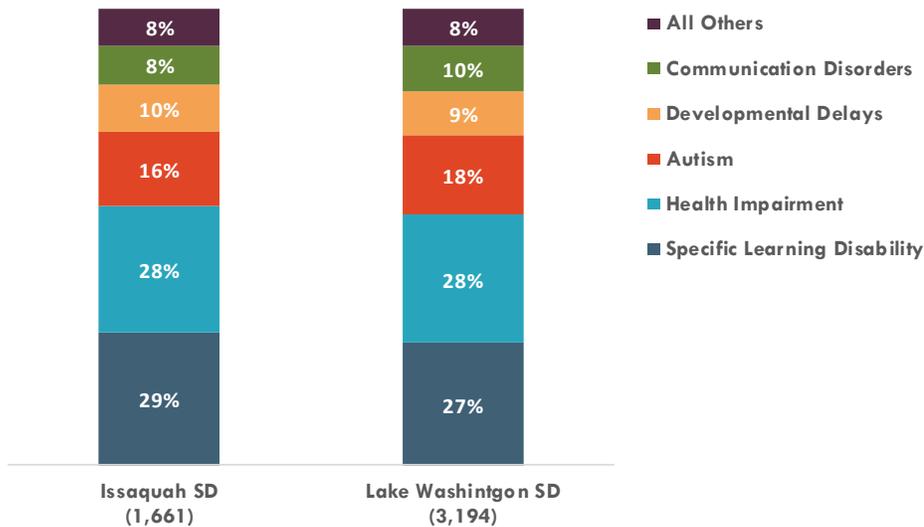
## PREVALENCE AND TYPE OF DISABILITIES IN SCHOOL CHILDREN

The Office of Superintendent of Public Instruction (OSPI) collects data on the numbers and types of special education students by disability category. Documented developmental disabilities may include speech delays or other special needs. This data is available at the school district level by special request and may be helpful for understanding the types of disabilities and prevalence of those disabilities in Sammamish. While **Exhibit 32** shows the shares of the most prevalent disabilities in Sammamish schools, **Exhibit 33** shows details on the number of students by age in each school district that are experiencing these developmental disabilities.

**What we heard from the Kinderling Center**

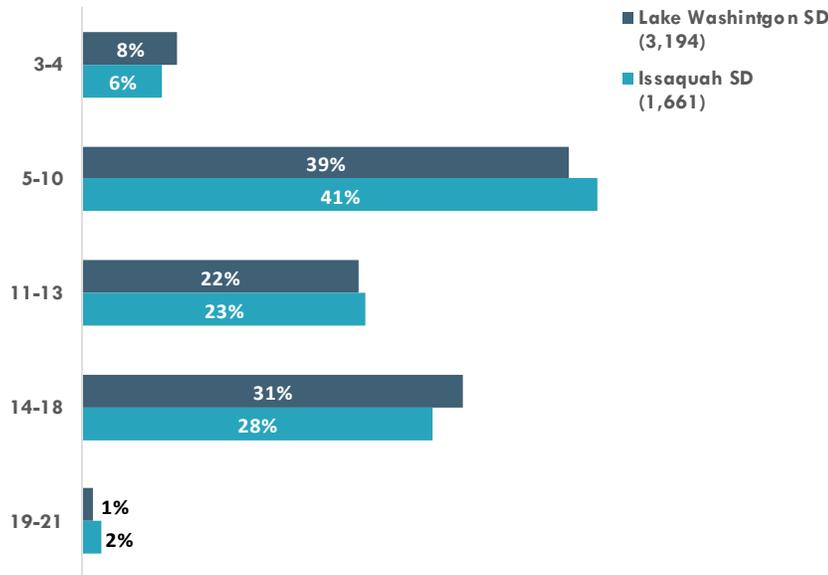
Rates of diagnosis of autism spectrum disorders was higher amongst children whose parents work in tech industries, as a result they see a higher incidence on the plateau.

**Exhibit 32. Prevalence and Type of Disabilities in School Children, All Ages**



Source: OSPI Special Request, 2015 Federal LRE and Child County Data

**Exhibit 33. Age Distribution of All Disabilities, 2016-2017 School Year**



Source: OSPI Special Request, 2015 Federal LRE and Child County Data

- Children with developmental disabilities represent 8% of students in the Issaquah school district and 11% in the Lake Washington School District.
- Both specific learning disabilities and health impairments together make up most of documented disabilities in both school districts serving Sammamish.

**Exhibit 34. Prevalence and Type of Disabilities in School Children**

Age Group	Issaquah SD					Lake Washington SD					3-121	
	3-4	5-10	11-13	14-18	19-21	3-4	5-10	11-13	14-18	19-21		
Developmental Delays	55	119	<10	<10	<10	174	92	211	<10	<10	<10	303
Emotional/Behavioral Disability	<10	<10	14	28	<10	51	<10	46	29	38	<10	113
Orthopedic Impairment	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
Health Impairment	<10	131	119	193	<10	452	16	239	257	370	10	892
Specific Learning Disability	<10	148	157	180	<10	485	<10	284	271	299	<10	857
Intellectual Disability	<10	<10	<10	13	<10	29	<10	18	10	26	12	66
Multiple Disabilities	<10	<10	<10	10	<10	16	<10	11	14	16	<10	50
Deafness	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
Hearing Impairment	<10	<10	<10	<10	<10	13	<10	<10	<10	<10	<10	11
Visual Impairment	<10	<10	<10	<10	<10	14	<10	<10	<10	<10	<10	<10
Deaf-Blindness	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
Communication Disorders	33	101	<10	<10	<10	140	45	252	24	<10	<10	325
Autism	22	113	57	72	<10	264	47	246	117	136	16	562
Traumatic Brain Injury	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10	<10
<b>Total</b>	<b>126</b>	<b>648</b>	<b>367</b>	<b>507</b>	<b>13</b>	<b>1,661</b>	<b>203</b>	<b>1,320</b>	<b>726</b>	<b>897</b>	<b>48</b>	<b>3,146</b>

Note: Age groups with fewer than 10 listed disabilities are subject to suppression for privacy reasons. The totals are the sum of all listed disabilities.

Source: OSPI; BERK, 2017.

## HEALTH AND NUTRITION

The Healthy Youth Survey provides information on eating habits and nutrition of Washington State school children.

Exhibit 35 shows the percentage of Sammamish youth in the 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> grades who are obese, according to their body mass index, based on their reported height and weight. The data is self-reported for each of the three grades and shows an average of Sammamish schools. Obese measures are based on age and gender specific charts developed by the Centers for Disease Control and Prevention. For example, a thirteen-year-old boy, with a height of 5 feet weighing 125 pounds is considered overweight, but the same boy weighing 130 pounds would be considered obese.

**Exhibit 35. Obesity in Sammamish Schoolchildren, 2016**



Source: Healthy Youth Survey Report of Participating Schools, Issaquah School District and Lake Washington School District, 2016.

- Among Sammamish schoolchildren, only 2% of 8<sup>th</sup> graders, 4% of 10<sup>th</sup> graders, and 6% of 12<sup>th</sup> graders are reported as obese, based on their height and weight.
- These numbers are relatively lower than overall obesity rates across Issaquah and Lake Washington School Districts, where on average 4% of 8<sup>th</sup> graders, 5% of 10<sup>th</sup> graders, and 7% of 12<sup>th</sup> graders are obese. Across King County, between 8-10% of 8<sup>th</sup> through 12<sup>th</sup> graders are obese.
- **Exhibit 36** shows the share of students who were physically active for at least 60 minutes per day over the past seven days. This is the recommended level of physical activity from the Center for Disease Control and Prevention (CDC) and encouraged by the Washington State Department of Health. The data is self-reported for each of the three grades and shows an average of Sammamish schools.

**Exhibit 36. Percent of School Children Physically Active For at Least 60 Minutes per Day over the Past Seven Days, 2016**

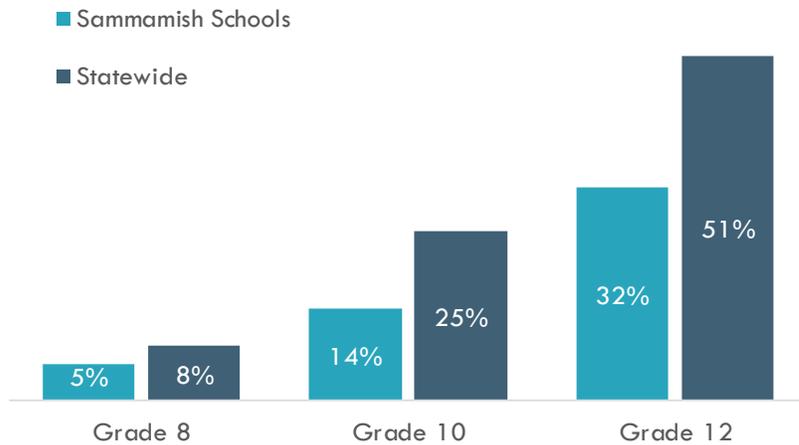


Source: Healthy Youth Survey Report of Participating Schools, Issaquah School District and Lake Washington School District, 2016.

- 36% of Sammamish 6<sup>th</sup> graders completed the recommended level of physical activity – being physically active for at least 60 minutes per day – over the last seven days.
- This number consistently decreases over time as students get older, and only 21% of Sammamish 10<sup>th</sup> and 12<sup>th</sup> graders were physically active for at least 60 minutes per day over the last week.

## SCHOOL-AGED SEXUAL ACTIVITY

The Healthy Youth Survey asks children about sexual behavior, including if they have ever had sexual intercourse, how old they were when they first had sexual intercourse, how many people they have had sexual intercourse with, and if a condom was used. At the school district level, answers to each of these questions are reported. At the school level, only answers to lifetime sexual activity is reported, the results for all the middle and high schools in Sammamish are presented in **Exhibit 37**. Adolescent birth rate data is not available for Sammamish because the incidence is less than five.

**Exhibit 37. Lifetime Sexual Activity, 2016**

- Sammamish students are less sexually active than students of similar age statewide.

## SCHOOL-AGED MENTAL HEALTH & SUBSTANCE USE

### Mental Health

Many factors can lead to anxiety, depression, and suicidal thoughts, including pressure to perform well in school, fixation on weight and appearance, and bullying. Untreated anxiety and depression can lead to substance abuse and even suicide. Currently, suicide is the leading cause of death for Washington teens aged 15 through 19. Professional care for depression and anxiety, treatable mental health conditions, help most people (Healthy Youth Survey Fact Sheets, 2016).

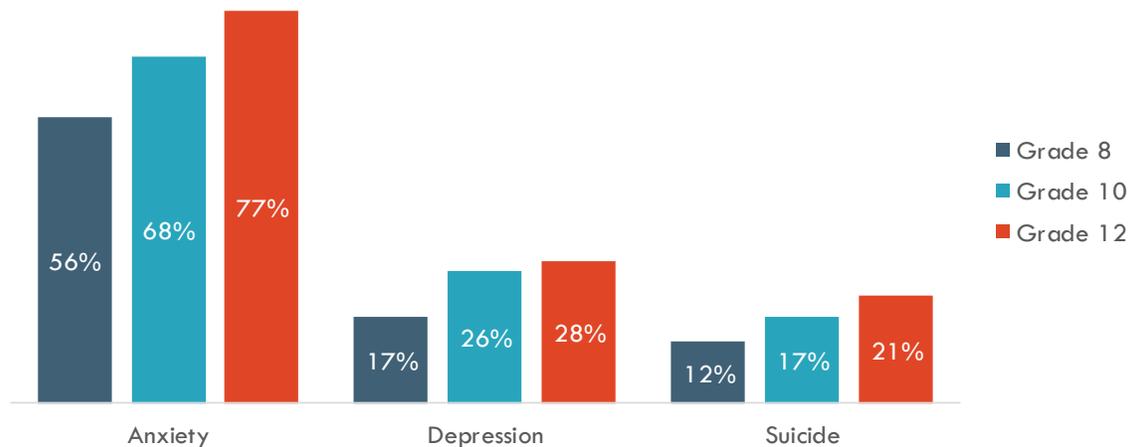
Many teens at the youth outreach event commented that they were stressed and tired from school. Other qualitative interviews revealed that there concerns about private access to mental health services. It was important so some teens that they could visit providers without peers or parents knowing about it.

#### What we heard from Youth

- “I feel more like a resume than a person.”
- Youth feel tremendous pressure to be perfect and live up to parental and family expectations.

#### What we heard from Schools

- Children of successful parents sometimes feel that they are disappointing their parents if they struggle in school or have other difficulties. This leads to anxiety and depression that school nurses reported in kids of all ages – even as young as elementary school.

**Exhibit 38. Mental Health of Sammamish Schoolchildren, 2016**

Source: 2016 Healthy Youth Survey Fact Sheets, Issaquah Schools Foundation, and True Bearing Consulting Action Youth Forum Presentation

- Of the students with suicidal ideation:
  - 8<sup>th</sup> Grade: 41 have attempted suicide
  - 10<sup>th</sup> Grade: 57 have attempted suicide
  - 12<sup>th</sup> Grade: 68 have attempted suicide
- By the time students in Sammamish public schools reach the 12th grade:
  - 77% reported feeling bothered by feeling nervous, anxious, or on edge for several days or more over the last two weeks.
  - 28% reported feeling so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities.
  - 21% have considered suicide over the past 12 months.
- Anxiety, depression, and suicide attempts all appear to increase from grades 8 to 10 to 12.

### Substance Use

One administrator at the Lake Washington School District noted that drug and alcohol use is about the same or lower than state averages before grade 10 for schools in both the Issaquah and Lake Washington School Districts. The percentage of kids using drugs or alcohol at school, which is typically an indication of heavy users and addiction, are also like statewide averages. This indicates that the increased use at the 12<sup>th</sup> grade is due to social use. Panelists at the Action Forum for Youth event indicated that high school senior alcohol use may be higher because seniors have less parental supervision. In addition, panelists indicated that since most high school seniors will be exposed to alcohol at college, it's difficult for them to rationalize the importance behind waiting one year.

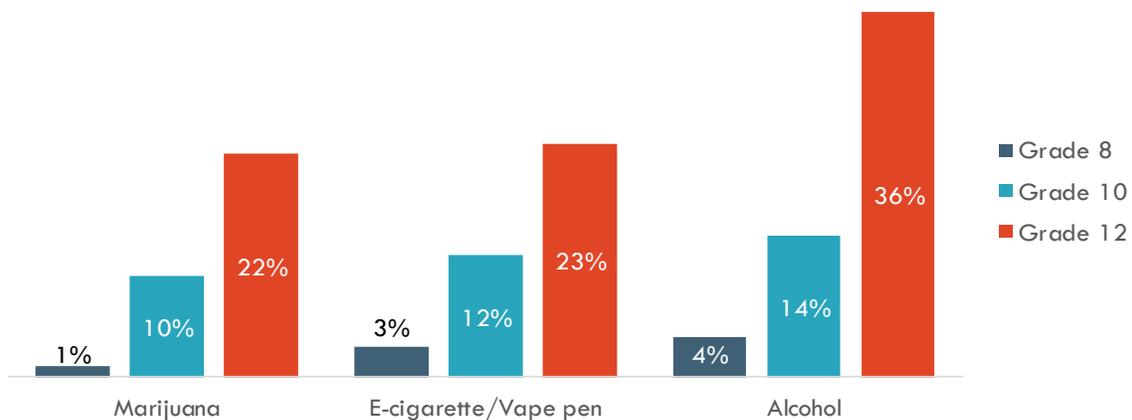
#### What we heard from Friends of Youth

Young people all face challenges as they transition to adulthood, but they will use drugs and alcohol when things are difficult. We see a lot of behavioral health issues for young people in a community that has high success and expectations.

#### What we heard from Youth

Attitudes about drinking, smoking, and drug use change. Middle schoolers at both the Healthy Youth Initiative Event and the Teen Center reported that there was a stigma about substance use amongst their peers. By high school, however, these activities are associated with independence and adulthood.

**Exhibit 39. Substance Use by Sammamish Schoolchildren, 2016**



Source: 2016 Healthy Youth Survey Fact Sheets, Issaquah Schools Foundation, and True Bearing Consulting Action Youth Forum Presentation

- Among Sammamish public school 12th graders:
  - 22% used marijuana at least once over the last 30 days.
  - 23% used an e-cigarette at least once over the last 30 days.
  - 36% drank alcohol at least once over the last 30 days.
- Marijuana, e-cigarette, and alcohol use all appear to increase as students get older.

- 8% of Sammamish 10th graders and 23% of 12th graders have had five or more drinks in a row in the past two weeks.

### Family and Community Support

Family and community support can help youth be more resilient to mental health challenges by providing an outlet to talk about important issues and a sense that someone is in their corner. In addition to providing a safe space, these supports can help boost self-esteem, problem solving, and coping skills.

The Healthy Youth Survey shows that many youths feel they can talk to their mom, dad, or an adult in the community about something important. But, panelists at the Action Forum for Youth suggested otherwise, indicating that many youths hesitate to reach out to parents on important topics like substance use or suicidal thoughts for fear of disappointing them.

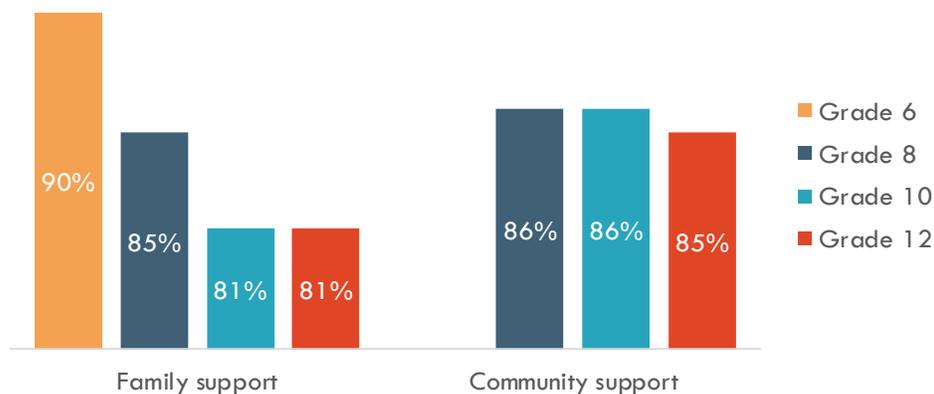
#### What we heard from youth

Hesitance to reach out to parents on issues like substance use or suicidal thoughts for fear of getting into trouble. Some teens also did not want to trouble parents who may be dealing with their own stressors.

#### What we heard from local schools

Youth looking for confidential help have very few options in Sammamish and may not have transportation access to places where they could find help outside the community.

**Exhibit 40. Family and Community Support in Sammamish, 2016**



Source: 2016 Healthy Youth Survey Fact Sheets, Issaquah Schools Foundation, and True Bearing Consulting Action Youth Forum Presentation

- 90% of 6<sup>th</sup> graders feel they can ask their mom or dad for help if they have a personal problem, but this decreases to 81% in 10<sup>th</sup> and 12<sup>th</sup> grade.
- 85-86% of students in 8<sup>th</sup> through 12<sup>th</sup> grade feel there are adults in the community they can talk to about something important. This survey question was not asked to 6<sup>th</sup> graders.

## HIGH SCHOOL COMPLETION

Attrition from school has many causes, including non-academic factors such as housing instability or personal safety. Students that leave school early often have difficulty making the transition to other productive adulthood activities such as training and employment. Exhibit 41 presents the count and rate of high school dropouts for Issaquah and Lake Washington school districts overall and for the high schools in Sammamish. The measure is more inclusive as it allows a fifth year for completing high school, before considering a student has not completed school with a regular diploma.

**Exhibit 41. Dropout Rates**

	Cohort Dropout Count (5 years)	Cohort Dropout Rate (5 years)	
<b>King County</b>	2,565	13%	
<b>Issaquah School District</b>	78	6%	
<b>Lake Washington School District</b>	62	4%	
<b>Sammamish High Schools</b>			
Skyline High School	10	2%	
Eastlake High School	9	3%	

Source: OSPI, <http://www.k12.wa.us/DataAdmin/Dropout-Grad.aspx>

- Only 2-3% of Sammamish high school students dropped out within a five-year period, which is lower than the overall rates for the Issaquah and Lake Washington school districts.
- These rates are all lower than those for King County, where the overall high school dropout rate is 13%.

### Bullying

Feeling safe at school is a protective factor associated with high school persistence and academic performance. Students who are bullied or harassed are likely to get lower grades than those who are not bullied.

The Healthy Youth Survey provides self-reported information on bullying and harassment.

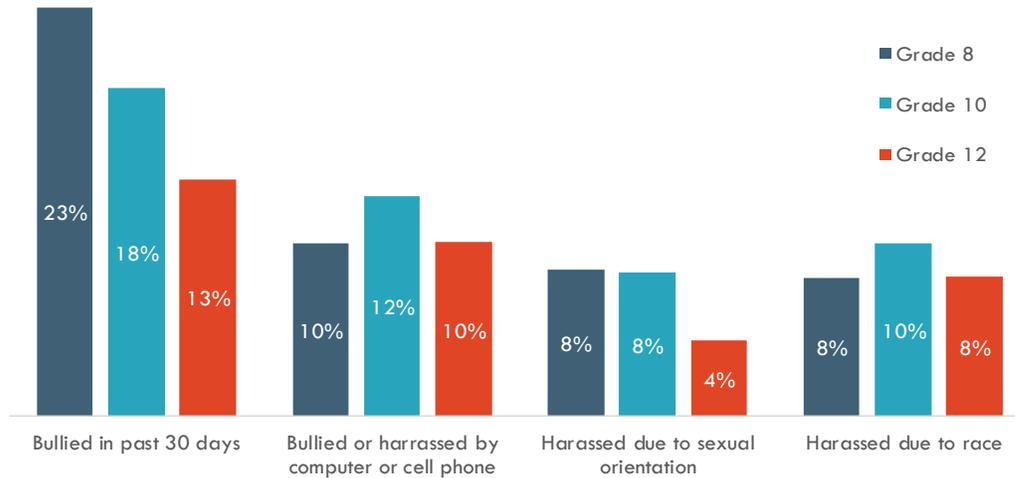
**Exhibit 42** shows student responses relating to bullying in Lake Washington and Issaquah school district schools. The data averages survey results from Issaquah and Lake Washington school districts. **Exhibit 43** shows responses for Sammamish schools; detailed responses for each type of bullying were not available at the school-specific level.

#### What we heard from Youth services organizations

Sammamish is a great, affluent community, but kids face pressures that can lead to serious mental health issues

- There are pressures to succeed academically, fit in, and deal with bullying.
- This can lead to stress, anxiety, eating disorders, family conflicts, and suicidal thoughts.

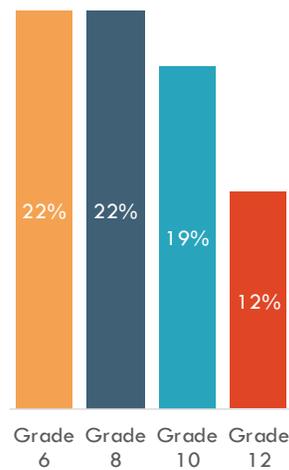
**Exhibit 42. Bullying in Children attending Issaquah and Lake Washington School District Schools, 2016**



Source: Healthy Youth Survey, Issaquah and Lake Washington School District, 2016.

- When asked if students had been bullied at least once over the last 30 days, 23% of 8<sup>th</sup> graders responded that they had. This number is lower in higher grades, with 18% of 10<sup>th</sup> graders and 13% of 12<sup>th</sup> graders responding that they had been bullied in the last 30 days.
- Over the past 30 days, 10-12% of students reported that they were bullied by computer or cell phone, 4-8% were harassed due to sexual orientation, and 8-10% were harassed due to race.

**Exhibit 43. Bullying in Sammamish Schools, 2016**



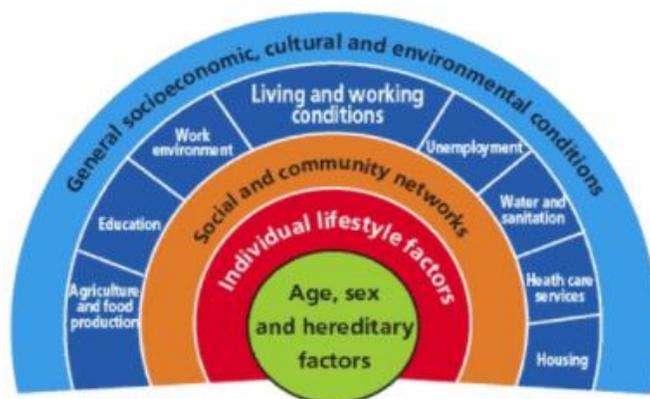
Source: Healthy Youth Survey, Issaquah and Lake Washington School District, 2016.

- When asked if students had been bullied at least once over the last 30 days, 22% of Sammamish 6<sup>th</sup> and 8<sup>th</sup> graders responded that they had.
- This number is lower in higher grades, with 19% of 10<sup>th</sup> graders and 12% of 12<sup>th</sup> graders responding that they had been bullied in the last 30 days.

## Adult Health

Communities thrive when they support the well-being and human potential of the whole population. There are many factors that affect the health and well-being of a community. Some are related to individual factors such as age, sex, and personal habits. Others are highly influenced by the opportunities available to people in the communities, by their living and working conditions, or by general socio-economic, cultural, or environmental conditions. The social, economic, and community influences are called *Social Determinants of Health* and are shown in the orange and blue portions of the graphic in Exhibit 44.

**Exhibit 44. Social Determinants of Health**

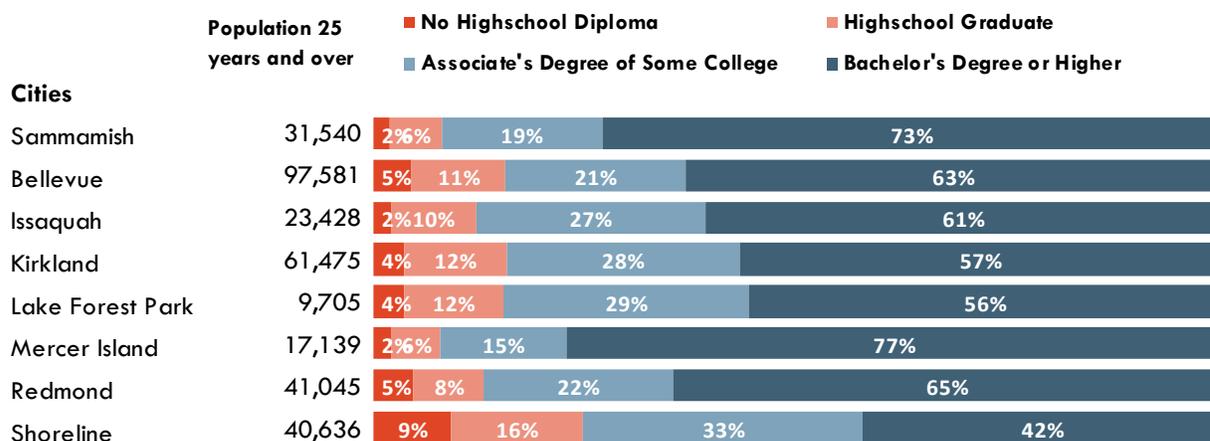


Source: Adapted from Dahlgren and Whitehead, 1991.

Throughout adulthood social determinants have a direct impact on health and well-being. Although people with low incomes are more likely to be affected by social determinants of health, people of all walks of life can be affected at some point in their life. Economic shifts can cause significant stress as people deal with unemployment, loss of insurance, housing affordability, and changes in income. Transportation options in a community may affect opportunities for work, education, housing, and health care as well as directly impact physical health. Connections to social and community networks are a key factor that help people cope in healthy ways with the everyday stress of work and home life, as well as major life events such as death of a loved one, divorce, immigration, or a disability. Community action to address social determinants helps communities thrive by addressing the systemic obstacles to well-being. Health and human service programs can provide support in the meantime by helping adults and families experiencing challenges.

### EDUCATIONAL ATTAINMENT

Educational opportunity is significantly shaped by household economic factors. **Exhibit 45** shows adult educational attainment levels for Sammamish and peer cities.

**Exhibit 45. Adult Educational Attainment**

Source: ACS 2015 5-year estimates, Educational Attainment (Table S1501); BERK, 2017.

- Across Sammamish's adult population years 25 and older, 73% received a Bachelor's degree or higher, 19% received an Associate's degree, and 6% received a high school diploma. Just 2% did not graduate from high school.
- Sammamish has a relatively high rate of bachelor degree recipients, relative to peer cities.

## ECONOMIC INDICATORS

Median incomes are growing in King County; between 2000 and 2015, the King County median household income increased from \$53,157 to \$75,302 (King County Office of Economic and Financial Analysis, 2017). However, economic booms in concentrated industries have raised median incomes without lifting the incomes of middle and low-income groups. Unequal economic growth disproportionately hurts those who are already struggling to meet basic needs.

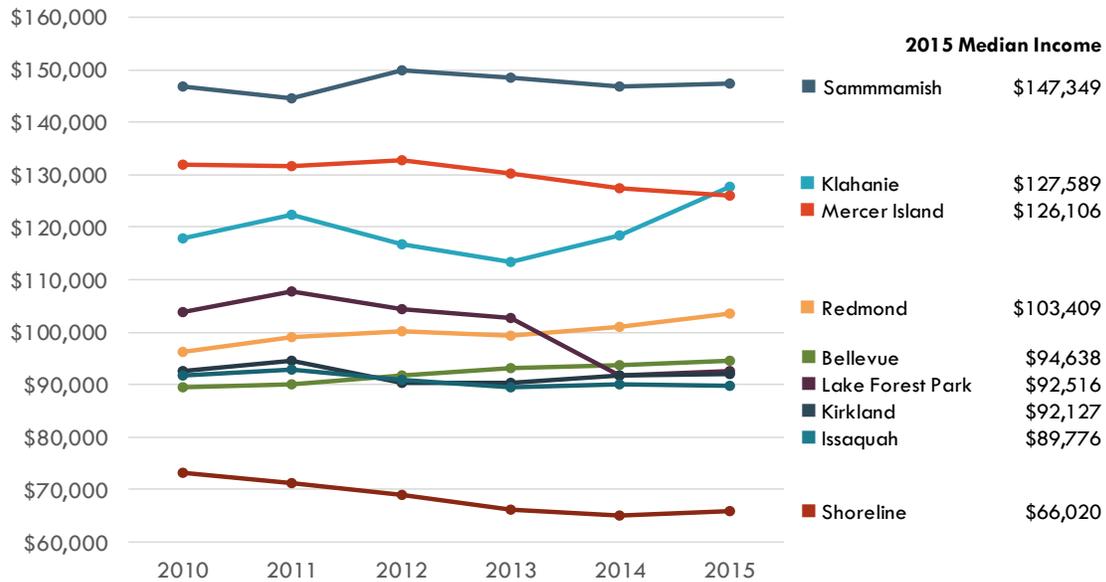
### What we heard from DSHS

More single-adults with barriers to work (such as disabilities, mental health problems, domestic violence, or substance abuse) are moving to the Eastside, including Sammamish. It is difficult for them to establish self-sufficiency due to lack of affordable housing and transportation options.

### Income

Sammamish and Klahanie have high median household incomes compared to their peer cities. Exhibit 46 shows the median income, in 2015 dollars, by city, between 2010 and 2015.

**Exhibit 46. Median Household Income by Service Area, Adjusted for Inflation, 2010 – 2015**



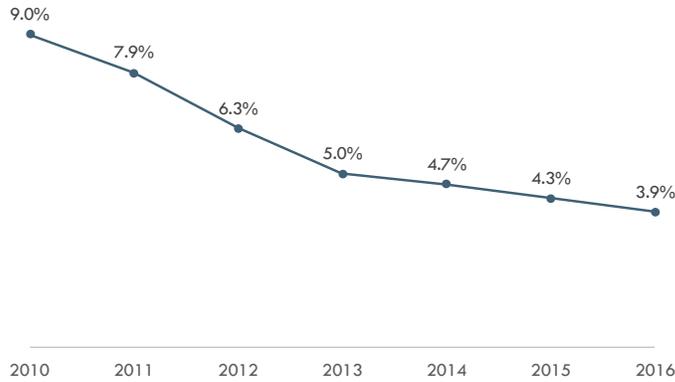
Note: Median Income shown in 2015 inflation-adjusted dollars.  
 Source: ACS 2010 - 2015 5-year estimates, Median Income; BERK 2017.

- Sammamish has relatively high median income, compared to its peer cities. In 2015, the median household income was over \$147,000. Over the last five years, the median household income in Sammamish has kept pace with inflation.
- Median household incomes in Klahanie increased faster than inflation from 2013 – 2015, reaching the highest median income over the last five years of \$127,589.

### Unemployment

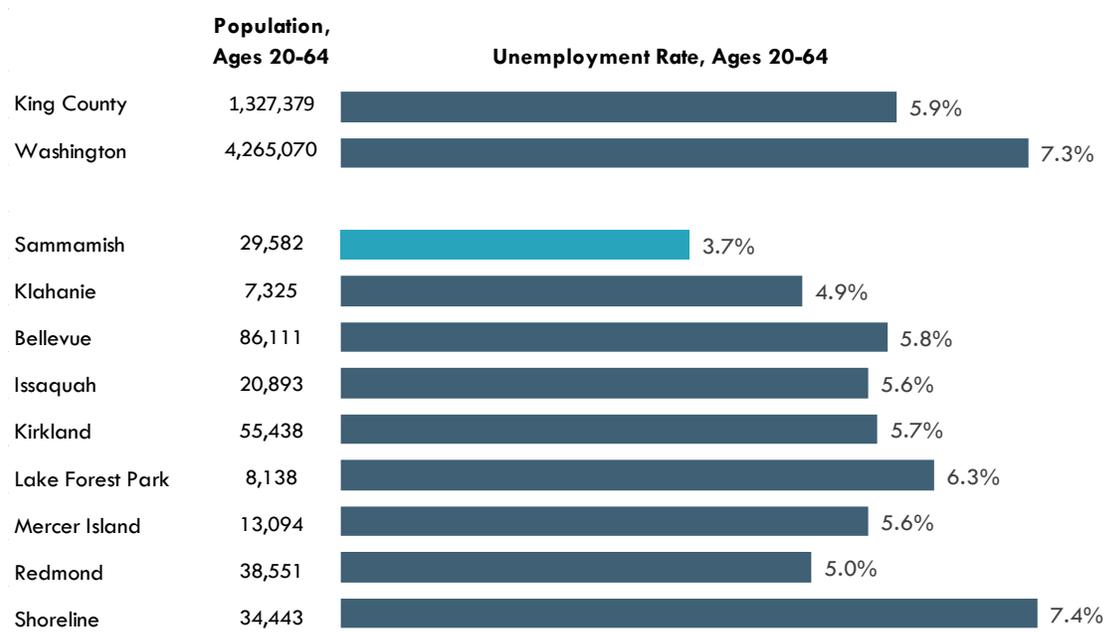
The U.S. economy has largely recovered from the Great Recession, and the unemployment rate has declined in King County over the past five years (**Exhibit 47**). The unemployment rate is relatively low in Sammamish compared to peer cities in King County. The Bureau of Labor Statistics provides unemployment rate information at the county level, but not at the city level. The unemployment rate information at the city level, shown in **Exhibit 48**, is provided by ACS as a five-year estimate of unemployment rates for ages 20-64.

**Exhibit 47. King County Unemployment Rate, 2010-2016**



Source: Bureau of Labor Statistics, 2010-2016.

**Exhibit 48. Unemployment Rates in Sammamish and Peer Cities, Ages 20-64**



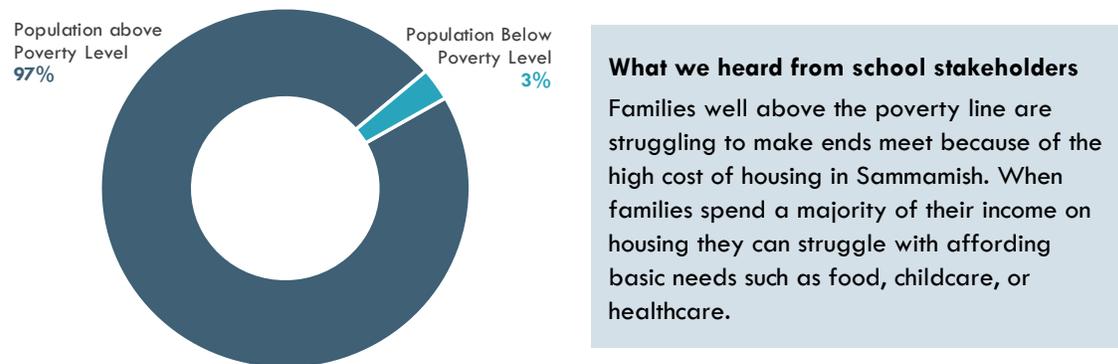
Source: ACS 2011-2015 5-year estimates, Unemployment Status (Table S2301).

- The unemployment rate in Sammamish for ages 20-64 was relatively low at 3.7%, compared to peer cities where the unemployment rate ranged from 5-7%.
- The unemployment rate for ages 20-64 averaged 5.9% in King County and 7.3% in Washington state from 2011-2015.

## Poverty

The Census Bureau defines the federal poverty level by size of family. The census defined poverty in 2015, the most recently available year of data, for an individual with an annual income less than \$12,082 and for a family of four as less than \$24,257.

### Exhibit 49. Population Above and Below Poverty Level in Sammamish, 2015



Source: ACS 2015 5-year estimates, Estimate of Poverty Status in the Past 12 Months (Table S1701).

- Only 3% of the population in Sammamish is considered to be in poverty as defined by the federal poverty level.
- 300% of the poverty level is an annual income of \$36,180 for an individual and \$73,800 for a family of four. 8.8% of the families in Sammamish fall into this category. Given the cost of housing, it is likely that families under 300% of the poverty level are unable to afford other basics. More information on housing affordability can be found in Exhibit 10.

## Supplemental Nutrition Assistance Program (SNAP)

The Supplemental Nutrition Assistance Program (SNAP) is administered by the U.S. Department of Agriculture's Food and Nutrition Service. The program provides nutrition assistance to low-income individuals and families. **Exhibit 50** shows the number and percentage of total households who receive SNAP assistance in Sammamish, along with comparable measures for neighborhood cities.

Exhibit 50. Households Receiving SNAP benefits

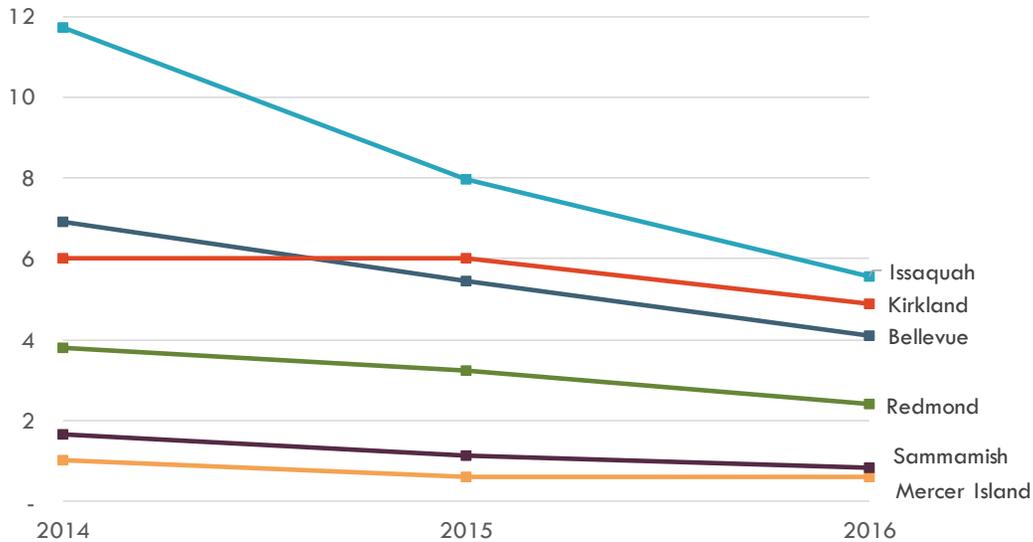
	Households Receiving SNAP Benefits (Food Stamps)						
	Total Households	Households		HHs with Children		HHs with Elderly	
		#	%	#	%	#	%
<b>Sammamish</b>	16,201	270	2%	151	1%	106	1%
<b>Bellevue</b>	54,216	3,047	6%	1,186	2%	1,173	2%
<b>Issaquah</b>	14,018	720	5%	125	1%	346	2%
<b>Kirkland</b>	35,367	1,487	4%	540	2%	598	2%
<b>Lake Forest Park</b>	5,207	272	5%	153	3%	57	1%
<b>Mercer Island</b>	9,583	317	3%	180	2%	65	1%
<b>Redmond</b>	23,389	1,016	4%	437	2%	407	2%
<b>Shoreline</b>	21,668	2,262	10%	703	3%	848	4%
<b>Issaquah SD</b>	38,946	1,434	4%	284	1%	710	2%
<b>Lake Washington SD</b>	74,452	2,600	3%	1,029	1%	1,125	2%

Source: ACS 2015 5-year estimates, Food Stamps/SNAP (Table S2201); BERK, 2017.

- 2% of Sammamish households are receiving SNAP assistance. This is relatively low compared to peer cities, which range from 3% to 10% of households receiving SNAP assistance.
- Just 1% of households with children and 1% of households with elderly are receiving SNAP assistance.

### Temporary Assistance for Needy Families (TANF)

The Temporary Assistance for Needy Families (TANF) grant program is administered by the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Family Assistance. The program provides state funding to help needy families achieve self-sufficiency through temporary financial assistance. **Exhibit 51** shows client counts, per 1,000 residents, for TANF and State Family Assistance in Sammamish and peer cities. The data can provide insight on family assistance needs in these communities over the last three years.

**Exhibit 51. TANF and Family Assistance Rate, per 1,000 population, by city, 2014-2016**

Note: Originally collected at the zip code level, this data has been assigned to cities based on U.S. Postal Service default cities. Shoreline and Lake Forest Park are not included since USPS assigns their zip codes to Seattle.

Source: Washington State Department of Social and Health Services, 2015-2016; Washington State Office of Financial Management; BERK, 2017.

- Client counts for TANF and state family assistance have decreased slightly in Sammamish as well as many peer cities on the Eastside over the last three years. It is unclear whether this is because of declining need or declining funding. The Center on Budget and Policy Priorities notes that “Over time, TANF has provided basic cash assistance to fewer and fewer needy families, even when need has increased” (2017).
- Relative to its neighboring cities of Issaquah, Kirkland, Bellevue, and Redmond, Sammamish has a low client count of people receiving TANF. Its share of residents receiving TANF is slightly higher than that of Mercer Island.

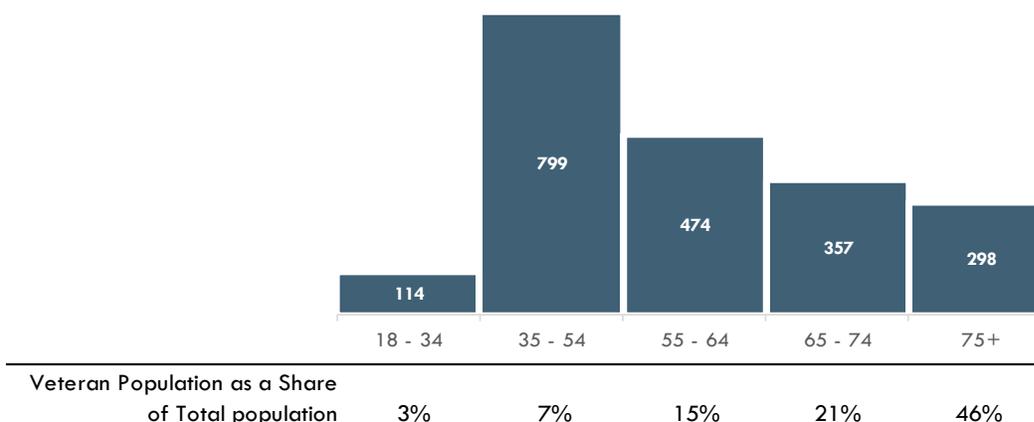
## VETERANS

Veterans face unique challenges in transitioning to civilian life. According to the annual Military Family Lifestyle Survey conducted by Blue Star Families, over 40% of transitioning veterans felt stress about the transitioning process, and civilian employment was one of their top concerns (Brookings Institution, 2015). In this same survey, about half of veterans responded that they were not in their desired career field or did not find meaning in their workplace. Veterans also face mental health barriers; based on research from the RAND Center for Military Health Policy Research, 20% of veterans who served in Iraq or Afghanistan suffer from major depression or post-traumatic stress disorder (National Veterans Foundation, 2016). Job retraining and mental health services are essential to help veterans transition to healthy and meaningful civilian lives.

- **Exhibit 52** shows the age distribution of Veteran’s living in Sammamish. Among those 75 and older, almost 46% are veterans (298 individuals).

- **Exhibit 53** shows data on veteran populations, along with the proportion of veterans in poverty and with disabilities, in Sammamish, King County, and Washington.

**Exhibit 52. Sammamish and Klahanie Veteran Population, Number and Share of Total Population, 2015**



Source: ACS 2015 5-year estimates, Veteran Status and Age and Sex, BERK 2017

- Although the largest number of veterans are found in the 35 – 54-year-old age group, they represent only 7% of the total population in Sammamish and Klahanie combined.
- Among those 75 and older, almost 46% are veterans (298 individuals).

**Exhibit 53. Veterans in Poverty and with Disabilities in Sammamish, 2015**

	Civilian Population 18+	Veteran Population		Veterans Below Poverty Level		Veterans With Disability	
		Count	% of Civilian Population	Count	% of Veteran Population	Count	% of Veteran Population
King County	1,613,259	115,239	7%	8,226	7%	26,582	23%
Washington	5,340,310	564,864	11%	37,721	7%	153,745	27%
Sammamish	34,013	1,769	5%	17	1%	235	13%
Klahanie	8,348	273	3%	0	0%	16	6%
Bellevue	107,091	6,649	6%	228	3%	1,625	24%
Issaquah	25,171	1,538	6%	79	5%	389	25%
Kirkland	67,269	4,439	7%	141	3%	1,084	24%
Lake Forest Park	10,719	793	7%	33	4%	154	19%
Mercer Island	18,121	1,469	8%	33	2%	348	24%
Redmond	44,751	2,126	5%	39	2%	559	26%
Shoreline	44,566	3,991	9%	371	9%	946	24%

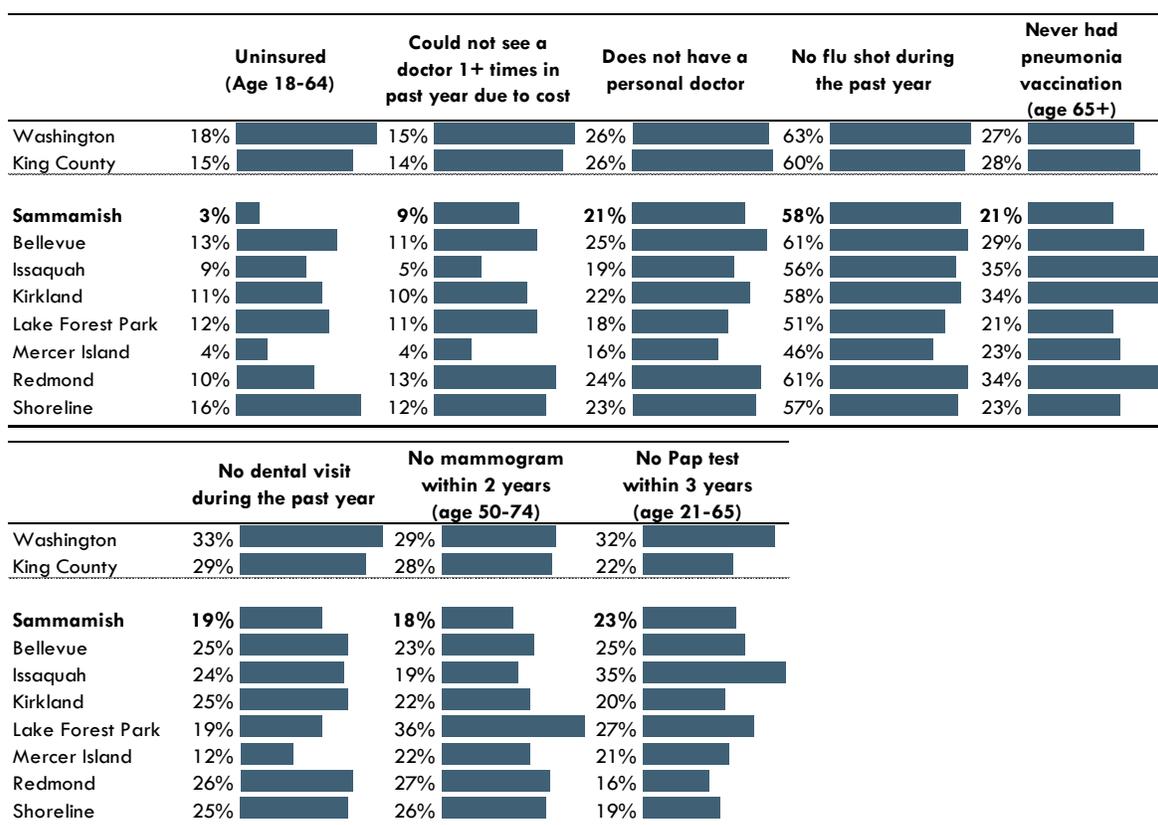
Source: ACS 2015 5-year estimates, Veteran Status, BERK 2017

## HEALTH

### Access to Care and Preventative Services

Accessing quality health care and preventative services is important not only to physical outcomes but social and mental health outcomes as well. Preventative services can help individuals detect health issues early, avoid illness, and potentially save lives. Health insurance is one aspect of access to health services, but the location and cost of quality care are other important factors. Reducing these barriers to care and matching providers to community needs can improve health and well-being. **Exhibit 54** shows several access to care and preventive services measures for the state, the county, Sammamish and peer cities.

**Exhibit 54. Access to Care and Preventive Services**



Source: Behavioral Risk Factor Surveillance System (BFRSS), WA State Department of Health, Center for Health Statistics via Public Health Seattle King County City Health Profiles, 2016.

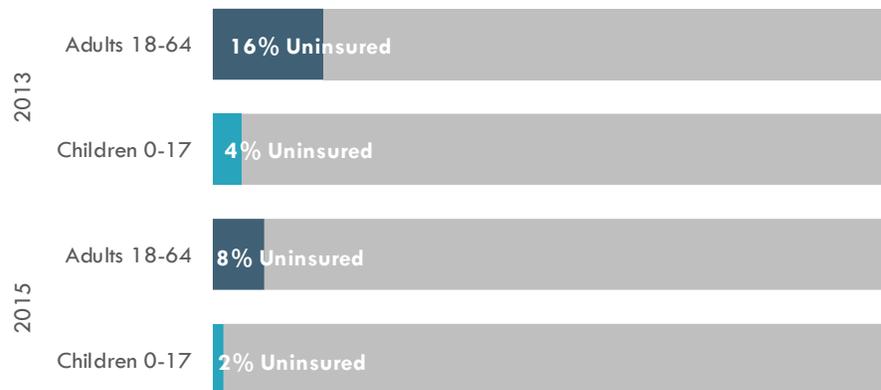
- Over one-fifth of Sammamish residents do not have a personal doctor that they see for routine visits.
- Just under one-fifth (19%) of Sammamish residents did not see a dentist within the last year. Untreated dental diseases can lead to serious health effects.
- Shares for Sammamish were lower than for the county in all measures except no pap test within three years, which is higher by one percentage point.

## Insurance

Health insurance is an important aspect of ensuring that people receive the care they need. Uninsured individuals may be less likely to see a primary care provider; they may receive less timely care and have worse health outcomes. Lack of insurance also places a financial burden on families. Health insurance coverage data can help to understand these vulnerabilities.

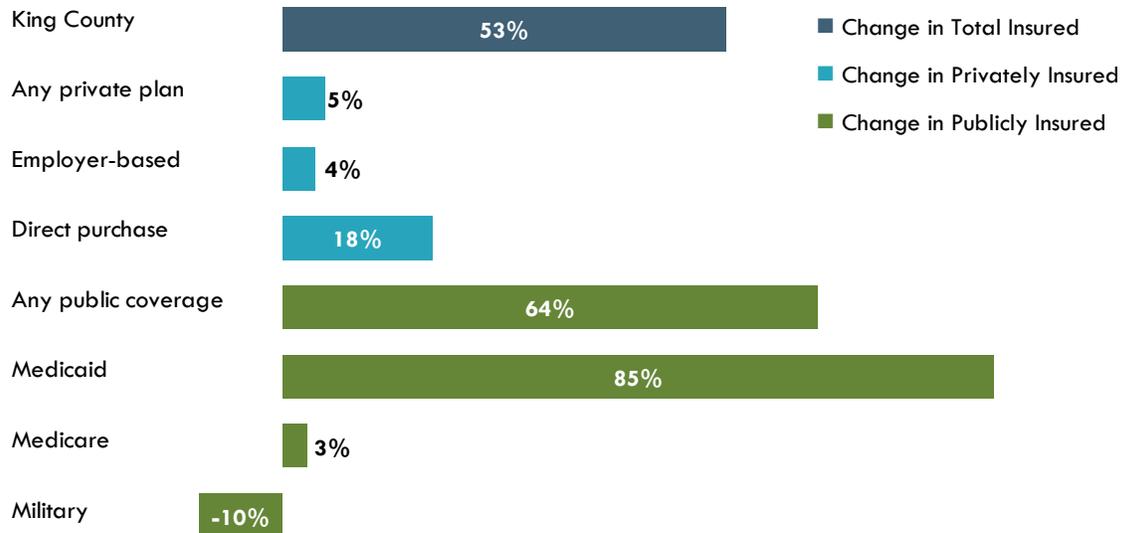
The Affordable Care Act was followed by large declines in the share of uninsured adults and children in King County. In 2014, insurance coverage options expanded for all adults. **Exhibit 55** compares uninsured rates in 2013 and 2015 in King County. **Exhibit 56** shows the percentage change in various types of health insurance coverage.

**Exhibit 55. Uninsured Rates in King County, Before and After Affordable Care Act**



Source: ACS, 2015; Public Health Seattle King County, Policy Development and Evaluation Unit, 2016.

- 16.4% of King County adults ages 18-64 were uninsured in 2013; this number declined to 7.7% by 2015. This is a 53% decline between 2013 and 2015.
- 4.3% of children ages 0-17 were uninsured in 2013; this declined to 1.6% in 2015.
- King County's decline in uninsured rates is similar to Washington State's average reduction in uninsured adults, which is also 53%; however, there is wide variation across the state.

**Exhibit 56. Change in Coverage between 2013 and 2015, Adults Ages 18-64**

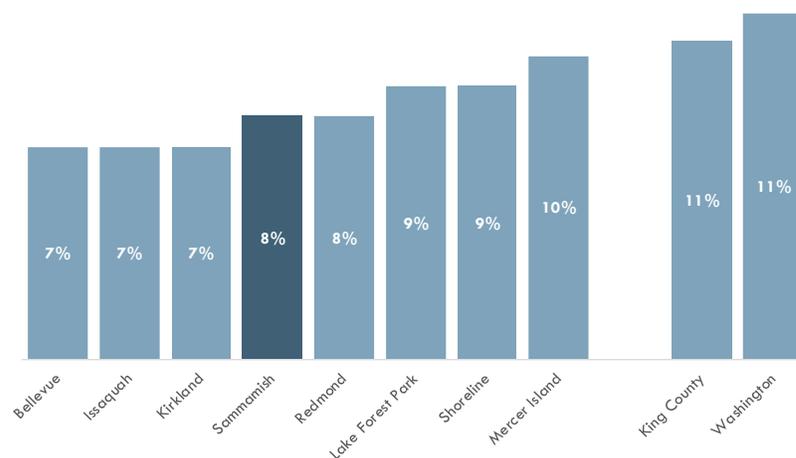
Source: ACS, 2015; Public Health Seattle King County, Policy Development and Evaluation Unit, 2016.

- There was a 5% increase in private plans, including a 4% increase in employer-based and 18% increase in direct-purchase.
- There was a 64% increase in public coverage, including an 85% increase in Medicaid and 3% increase in Medicare coverage. Military coverage decreased by 10% in King County.

### Mental Health

Public Health Seattle & King County publishes community health indicators for many cities in the county in an effort to isolate determinants of health. One indicator reports mental distress of adults measured as having fourteen or more *poor mental health days* in the past 30 days. This measure *poor mental health days* is used nationally by the Center for Disease Control (CDC) and emphasizes those that are experiencing chronic and likely severe mental health issues. In this measure, poor mental health includes: stress, depression, and problems with emotions.

Countywide, this measure has remained flat for the last fifteen years with no significant increases or decreases in the share of residents experiencing bad mental health. King County residents experiencing poor mental health at rates higher than average include: younger residents (18 – 24), those residing in South King County, Hispanic residents, and those with household incomes below \$25,000.

**Exhibit 57. Frequent Mental Distress, Adults age 18+**

Note: Frequent Mental Distress Indicator is for adults age 18+

Source: Risk Factor Surveillance System (BRFSS), Washington State Department of Health, Center for Health Statistics, via Public Health Seattle King County City Health Profiles, 2016.

- Using this national measure of mental health, 8% of adults in Sammamish reported that they had experienced 14 or more bad mental health days in the past 30 days.
- Poor mental health along with a lack of access to mental health support can have long-term consequences on the emotional, physical, and financial health of households and communities.

### Health Risk Factors

Access to nutritious food and physical activity are important contributors to a community's good health. A lack of physical activity can contribute to increased risk of health conditions, including heart disease, diabetes, and some cancers (Robert Wood Johnson Foundation; Trust for America's Health, 2013). Half of adults in the U.S. do not meet the Center for Disease Control and Prevention's recommended levels of physical activity. Being overweight or obese increases the risk for many health conditions, including type 2 diabetes, heart disease, stroke, hypertension, cancer, Alzheimer's disease, dementia, liver disease, kidney disease, osteoarthritis, and respiratory problems (Robert Wood Johnson Foundation; Trust for America's Health, 2013).

Smoking kills 480,000 Americans each year, including 41,000 from exposure to secondhand smoke; over 16 million Americans are living with a disease caused by smoking (Center for Disease Control and Prevention, 2015). Smoking causes cancer, heart disease, stroke, lung diseases, diabetes, and chronic obstructive pulmonary disease (COPD), which includes emphysema and chronic bronchitis. The health consequences of smoking mean that tobacco use has financial implications for communities.

**Exhibit 58** shows measures of several health risk factors and chronic diseases in Sammamish and in neighboring cities. The social determinants of health model shown in **Exhibit 44** shows how community factors can contribute to chronic disease. For example, a community's infrastructure can either support or limit opportunities for physical activity depending on the availability of sidewalks, safe biking routes, and

access to parks and recreation facilities. Understanding the profile of chronic disease can help to identify potential social determinants that need to be addressed through long-term efforts or through health and human services programs.

**Exhibit 58. Health Risk Factors and Chronic Diseases**

	<b>Obese (BMI &gt;= 30)</b>	<b>Did not participate in any physical activity</b>	<b>Have been told to have diabetes</b>	<b>Have high blood cholesterol</b>	<b>Had coronary heart disease or heart attack</b>
Washington	28%	20%	9%	38%	4%
King County	22%	16%	7%	35%	3%
<b>Sammamish</b>	<b>15%</b>	<b>9%</b>	<b>3%</b>	<b>38%</b>	<b>3%</b>
Bellevue	16%	16%	5%	33%	3%
Issaquah	22%	15%	5%	23%	7%
Kirkland	22%	12%	5%	40%	3%
Lake Forest Park	19%	11%	3%	39%	2%
Mercer Island	12%	9%	5%	32%	2%
Redmond	16%	15%	6%	32%	3%
Shoreline	19%	13%	7%	37%	3%

	<b>Current smoker</b>	<b>Have current asthma</b>	<b>Excessive alcohol consumption</b>	<b>Ever been told to have high blood pressure</b>
Washington	17%	10%	19%	30%
King County	14%	9%	22%	26%
<b>Sammamish</b>	<b>5%</b>	<b>9%</b>	<b>16%</b>	<b>21%</b>
Bellevue	10%	6%	17%	26%
Issaquah	9%	12%	18%	22%
Kirkland	11%	10%	22%	31%
Lake Forest Park	8%	6%	18%	20%
Mercer Island	6%	7%	15%	26%
Redmond	8%	8%	14%	25%
Shoreline	13%	8%	19%	29%

Source: The Behavioral Risk Factor Surveillance System (BRFSS), Washington State Department of Health, Center for Health Statistics via Public Health Seattle King County City Health Profiles, 2016.

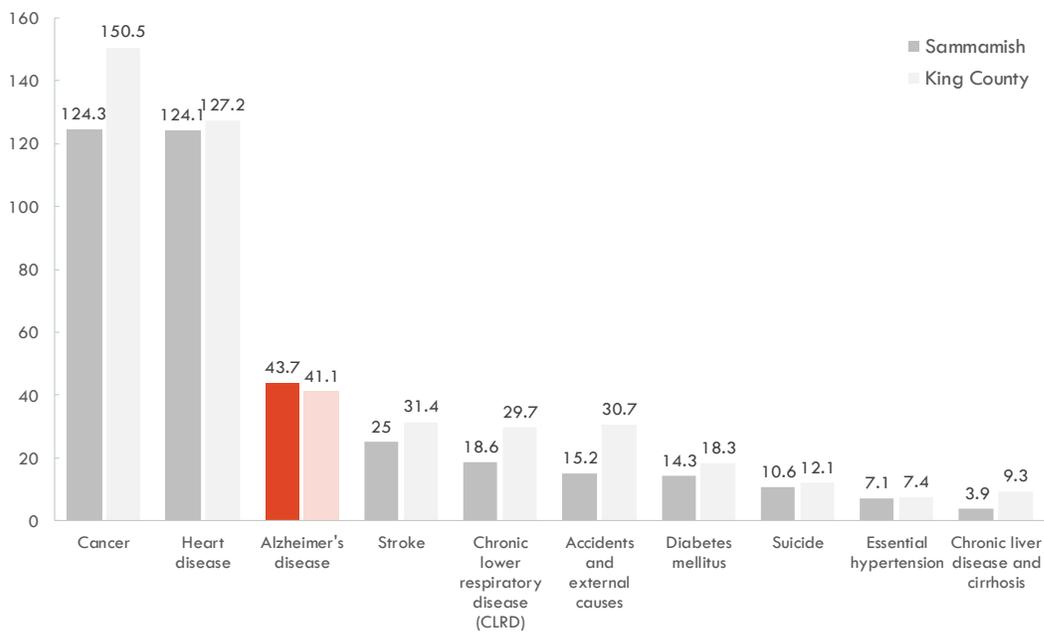
- In 2016, 15% of Sammamish residents were considered to be obese, and 9% did not participate in any physical activity. 3% were told to have diabetes, 28% to have high blood cholesterol, and 3% have had coronary heart disease or a heart attack. Physical activity and diabetes rates are relatively good compared to neighboring cities, while the heart disease and high blood cholesterol rates are about average.
- 5% of Sammamish residents are currently smokers, which is relatively low compared to peer cities or

to King County or Washington State.

### Leading Causes of Death

Leading causes of death can help illuminate the effectiveness of an area’s health system and can help local health officials determine how to focus their resources. Many leading causes of death are related to healthy lifestyles and diets, such as heart disease, stroke, diabetes and hypertension. Others are less preventable, such as certain types of cancer, or Alzheimer’s disease which has a higher prevalence in Sammamish than in King County overall. Recognizing symptoms, accessing care, and determining treatment plans, can help lessen the burden of these diseases.

**Exhibit 59. Top 10 Leading Causes of Death in Sammamish, compared to King County, 2016**



Source: Death certificate data, Washington State Department of Health, Center for Health Statistics via Public Health Seattle King County City Health Profile, Sammamish, 2016.

- Sammamish has a higher rate of Alzheimer’s disease, with 43.7 people per 100,000 residents, than King County overall (41.1 people per 100,000 residents).

### Excessive Drinking

Excessive or binge drinking is defined different for women and men. For women, it is defined as consuming more than four drinks on a single occasion and for men it is more than five drinks. In 2014, the most recent year of data available, Public Health Seattle & King County reported that 20% of adults binge drink (or had done so in the last 30 days).

In the East Region of King County, the percent of adults that excessively drink is slightly lower at 16%, compared to 26% in Seattle.

## Drug Induced Deaths

Drug induced deaths are deaths due to drug poisoning. These deaths include accidental, intentional, and undetermined poisoning by exposure to any drug, medication, or biological substance. In King County in 2014, the most recent year of data available, there were 313 drug-induced deaths, or 14.1 deaths per 100,000 residents. For the East Region of King County, the rate was lower with 8.2 deaths per 100,000 residents.

The country is in the midst of an opioid epidemic with an estimated 59,000 to 65,000 people dying from drug overdoses in 2016. Drug-induced deaths are now the leading cause of death among Americans under 50. (Katz, 2017) Several recent studies suggest the opioid epidemic is partially caused by job loss, with areas experiencing economic hardship being more affected by the crisis. One study found that an unemployment rate increase of 1 percentage point results in an opioid death rate increase of 3.6 percent. (Hollingsworth, Ruhm, & Simon, 2017) Although Sammamish its surrounding Eastside peers are partially insulated from this epidemic by strong economics, high incomes, and low unemployment, they have not been completely untouched. In 2016 a 26-year-old man was arrested for heroin possession in Sammamish and in 2013 an Issaquah man was arrested and charged with homicide for allegedly selling heroin to a man that died from an overdose.

## Active Aging

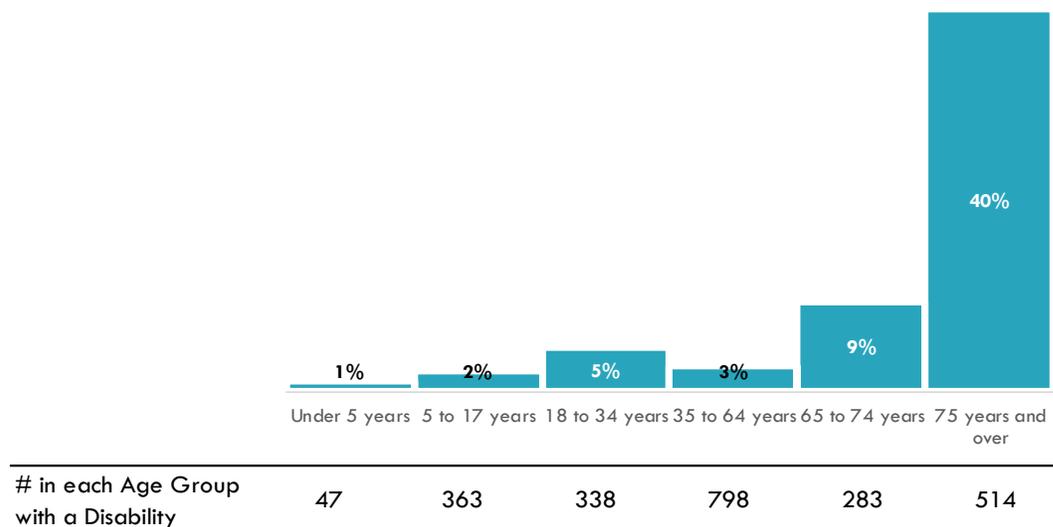
Active aging is the process of optimizing opportunities for health, participation, and security to improve the quality of life as people age (World Health Organization). This process allows people to continue to participate in society as they age, and it involves many aspects of wellness including physical, social, spiritual, vocational, emotional, environmental, and intellectual. As Sammamish seniors age in their community, it is important that they have opportunities to engage with their neighborhood and to access resources that can help them maintain autonomy and independence.

Physically, active aging means maintaining health and physical activity. Seniors with disabilities (see **Exhibit 60**) need special services both in terms of transportation and facilities. Seniors' elevated risk of falling brings implications for fire and medical emergency services as shown in **Exhibit 61**, which shows the percent of older adults who have ever been injured by a fall in various King County regions.

Emotionally and socially, seniors need to continue interacting meaningfully with members of their community. Mobility is an important component of independence and socialization, and seniors frequently depend on public transportation to access community spaces.

Understanding the senior community can provide insight on how the City of Sammamish can best serve its senior population.

**Exhibit 60. Percent of Population in Age Group with a Disability in Sammamish, 2015**

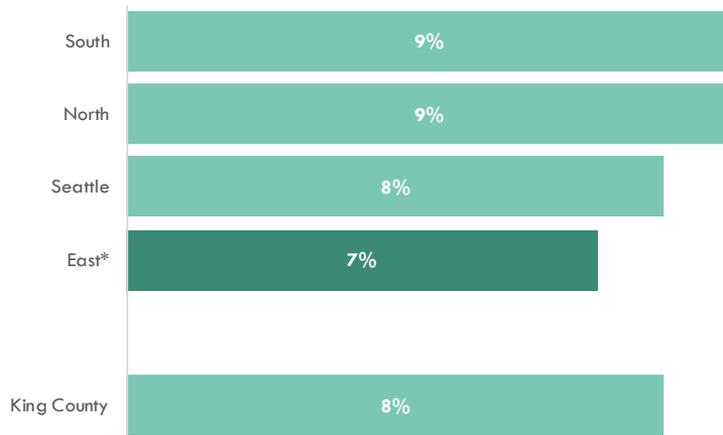


Source: ACS 2015 5-year estimates, Sex by Age and Disability Status, BERK 2017.

- The population with disabilities in the age group 75 and older is large, and represents 40% of the total population in that age group (514 individuals).
- 9% of the population aged 65 to 74 has a disability.
- While only 3% of the total population aged 35 to 64 has a disability, that figure means that 798 adults in that age group have a disability. Improvements to make the community more accessible to

seniors will also improve quality of life for people with disabilities in every life stage.

**Exhibit 61. Percent of Older Adults (45+) Ever Injured in Fall by King County Region, 2014**



\*East Region includes Sammamish  
 Source: Public Health Seattle King County.

- 7% of older adults in the East Region of King County, which includes Sammamish, have been injured in a fall.

## Healthy Environment

The National Research Council and Institute of Medicine jointly wrote in 2013 that “health determinants cannot be fully understood in isolation from the environmental contexts that shape and sustain them” (National Research Council and Institute of Medicine, 2013). They found that environmental factors related to the physical form of regions or neighborhoods exist even when controlling for socioeconomic and demographic differences, suggesting that environmental factors play an important role in health outcomes.

Some factors in the physical environment can affect health including air pollution, the way neighborhoods are designed and built, housing affordability, and access to recreational facilities and transportation systems. Factors in the social environment that can affect health are those related to safety, violence, and social connection (National Research Council and Institute of Medicine, 2013).

### HOUSING

#### Housing Affordability

In 2016, Money magazine ranked Sammamish as the number 14 best place to live in the country. Credit for the ranking was given for schools, proximity to employers, and green space.

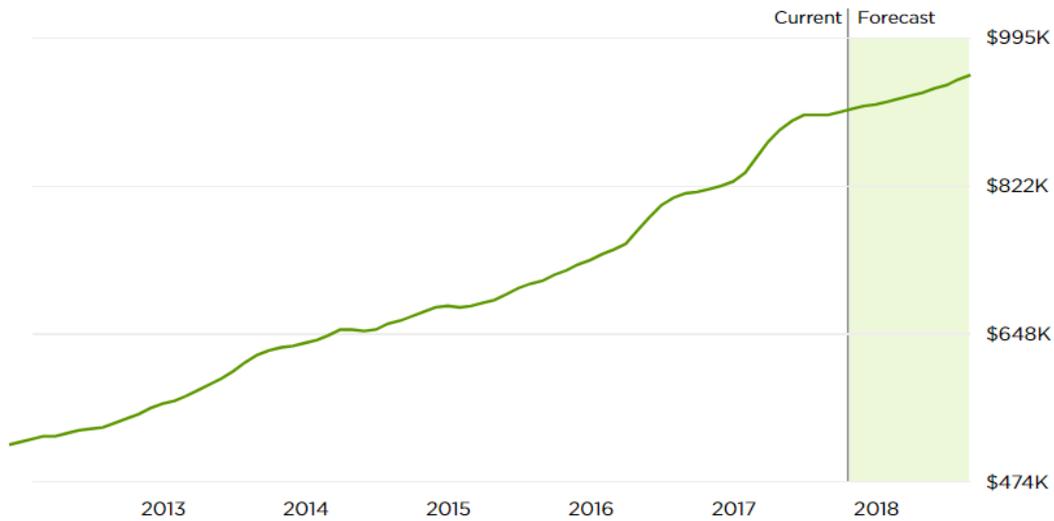
Along with being a great place to live, Sammamish has high home values. Zillow’s home price index for Sammamish, a median current market valuation for the city, shows strong

growth in home prices over the last five years and forecasts continued growth in 2018, as seen in **Exhibit 67**.

#### What we heard from a majority of sources:

- Housing affordability is an unmet need in the community.
- Adults and families with good employment and wages are making trade-offs (in areas such as healthcare, childcare, adequate food) to pay for housing.
- Housing costs are a significant source of stress for people in this community.

**Exhibit 62. Sammamish Home Value Index, 2017**

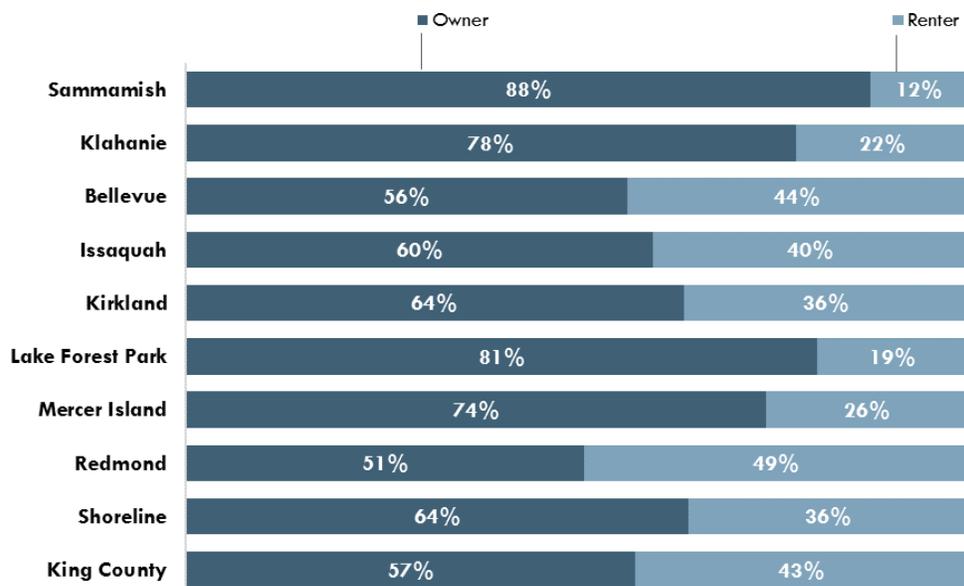


Source: Zillow’s Sammamish Home Value Index, retrieved October 24, 2017.

- Zillow estimates that the median home value in Sammamish as of August 2017 was \$905,800, up from \$543,000 in August of 2012.
- Zillow estimates that home values have gone up 11.4% over the last year and will continue to increase, at a rate of 5.1% over the next year.

### Housing Tenure

**Exhibit 63** shows housing tenure for Sammamish, peer cities, and all of King County. As shown below, Sammamish has a significantly higher share of owner households than neighboring cities at 88%. It also has nearly 30% more owner households than for King County overall.

**Exhibit 63. Housing Tenure – Sammamish and Peer Cities**

City / Place	Owner	Renter	All Households
<b>Sammamish</b>	13,855	1,965	15,820
Klahanie	3,165	890	4,055
Bellevue	30,035	23,200	53,235
Issaquah	8,275	5,595	13,870
Kirkland	22,110	12,650	34,760
Lake Forest Park	4,180	1,000	5,180
Mercer Island	6,990	2,440	9,430
Redmond	11,975	11,545	23,520
Shoreline	13,710	7,650	21,360
<b>King County</b>	<b>464,584</b>	<b>344,099</b>	<b>808,683</b>

Source: U.S. Department of Housing and Urban Development, Consolidated Housing Affordability Strategy (based on U.S. Census American Community Survey 5-year Estimates, 2010-2014)

- 88% of all households in Sammamish are owners (13,855 households), and just 12% are renters (1,965 households). Klahanie also has a high percentage of owner households (78%).
- Sammamish and Klahanie have a higher percentage of owner households compared to neighboring cities and King County overall (57% owner households). Lake Forest Park is the only other city that has a similar proportion of owner households (81%).

### Tenure by Income Level

The U.S. Department of Housing and Urban Development (HUD) calculates area median income (AMI) for King County. In 2017, AMI was \$96,000 for a four-person household. The data in this section is presented relative to HUD AMI. It is prepared by HUD's Consolidated Housing Affordability Strategy (CHAS) program, based on ACS data, and gives a more accurate depiction of various household

attributes than is available using just the ACS data.

This section groups households based on income categories relative to the county AMI, rather than the Federal Poverty Level. Note that HUD accounts for household size when grouping households into income categories.

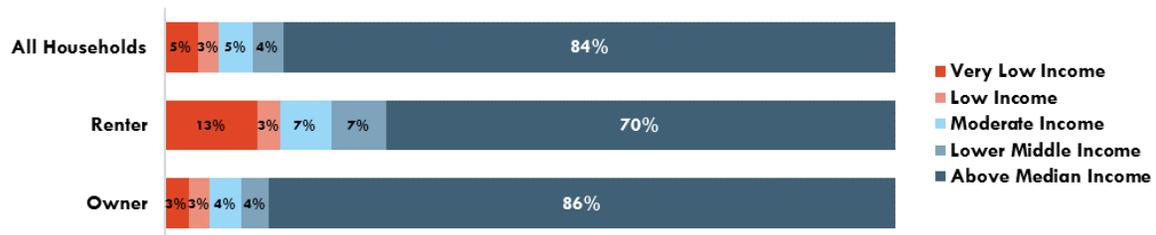
- Very Low Income – Under 30% of AMI
- Low Income – 30-50% of AMI
- Moderate Income – 50-80% of AMI
- Lower Middle Income- 80-100% of AMI
- Above Median Income – Over 100% of AMI

Conversations with HUD indicate users of this data often use the Very Low-Income category – Under 30% of AMI – interchangeably with the Federal Poverty Level.

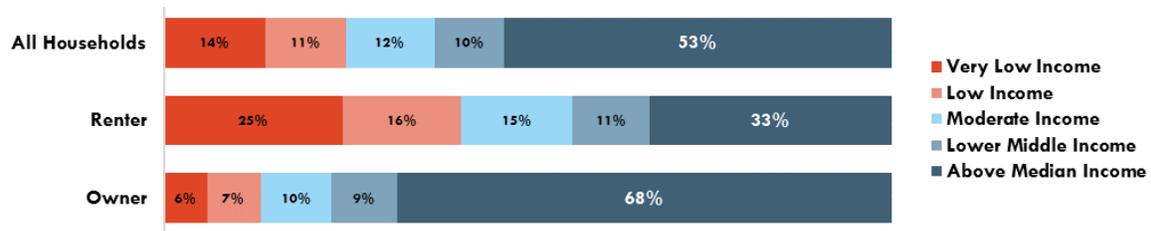
Exhibit 64 and Exhibit 65 summarize households in the City of Sammamish and King County within each income category, by housing tenure. Consistent with the data above in Exhibit 63 which shows the high number of owner households in Sammamish, nearly 85% of all households in Sammamish have income above AMI (\$96,000). Compare this to all of King County, where just 53% of all households have income above AMI.

In renter households, the gap is even wider. In Sammamish, 70% of renter households have income above AMI, whereas across King County, only 33% of renter households have income above AMI. Only 5% of all households in Sammamish are living in the Very Low-Income category, or living in poverty.

**Exhibit 64. Tenure by Income Level – City of Sammamish**



**Exhibit 65. Tenure by Income Level – King County**



Source: U.S. Department of Housing and Urban Development, Consolidated Housing Affordability Strategy (based on U.S. Census American Community Survey 5-year Estimates, 2010-2014)

## Household Composition by Income Level

**Exhibit 66** shows the household income breakdown by household type, as well as descriptions for the HUD designated household types (household types are mutually exclusive). This data shows very low numbers of elderly non-family households living in Sammamish. Many people in this group are retired, living on a fixed income, and may or may not have additional retirement savings to help cover housing costs. These would also be households likely in need of public/private assistance of some variety. Conversely, many Sammamish households are small families with income above AMI, and are likely not in need.

### Exhibit 66. Household Type by Income Level – City of Sammamish

	Very Low (<30%)	Low (30-50%)	Moderate (50-80%)	Lower Middle (80-100%)	Above AMI	All Households
<b>Elderly Family</b>	110	94	230	165	1,090	<b>1,689</b>
<b>Elderly Non-Family</b>	120	100	29	15	240	<b>504</b>
<b>Large Family</b>	35	50	65	60	1,610	<b>1,820</b>
<b>Small Family</b>	305	145	320	325	9,275	<b>10,370</b>
<b>Other</b>	140	65	95	100	1,025	<b>1,425</b>
<b>Total</b>	<b>710</b>	<b>454</b>	<b>739</b>	<b>665</b>	<b>13,240</b>	<b>15,808</b>

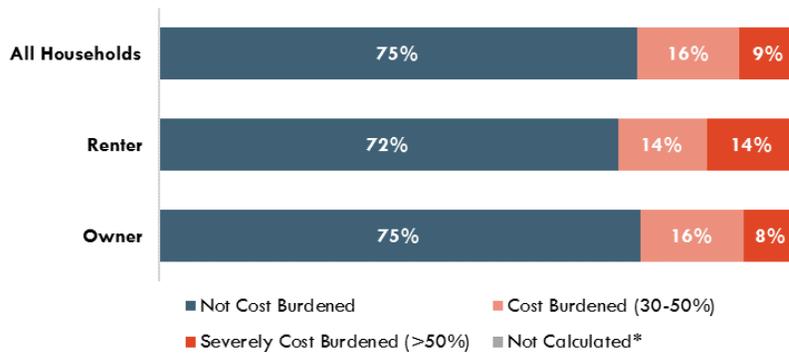
<b>Household Type Description</b>	
<b>Elderly Family</b>	2 persons, either or both age 62 or over
<b>Elderly Non-Family</b>	Age 62+, living alone
<b>Large Family</b>	Families with 5 or more members
<b>Small Family</b>	Families with 2-4 members (excluding elderly families)
<b>Other</b>	Non-family, non-elderly households

Source: U.S. Department of Housing and Urban Development, Consolidated Housing Affordability Strategy (based on U.S. Census American Community Survey 5-year Estimates, 2010-2014)

### Housing Cost Burden

HUD deems housing to be affordable if a household spends no more than 30% of their gross income on housing costs (rent plus basic utilities or gross monthly owner costs). Households are cost burdened if they pay more than 30% of their income towards housing costs. Households paying more than 50% of their income towards housing costs are considered severely cost burdened, leaving that much less income for other daily living expenses.<sup>13</sup>

**Exhibit 67. Housing Cost Burden by Tenure – City of Sammamish**

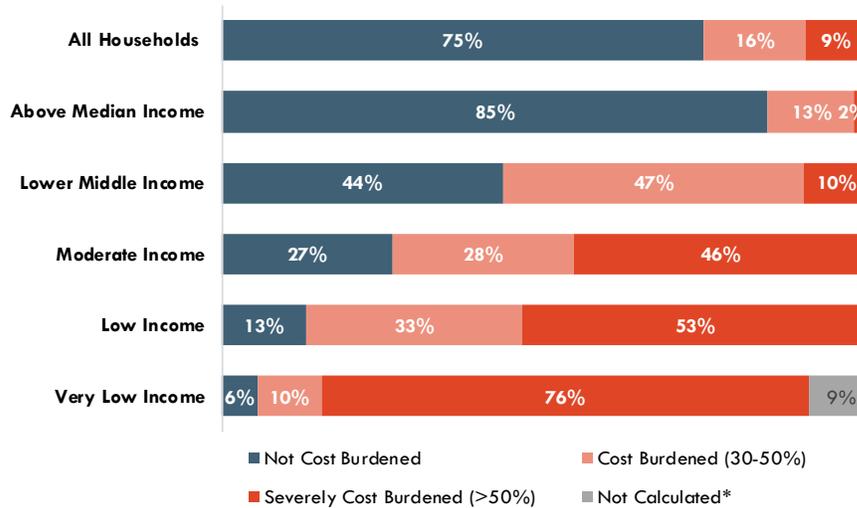


Source: U.S. Department of Housing and Urban Development, Consolidated Housing Affordability Strategy (based on U.S. Census American Community Survey 5-year Estimates, 2010-2014)

- One quarter of all households in Sammamish are cost burdened, spending 30% or more of their monthly income on housing costs.
- Renter households are slightly more likely to be cost burdened than owner households, and about twice as likely to be severely cost burdened, spending 50% or more of their monthly income on housing costs.

<sup>13</sup> HUD publishes cost burden estimates based on data from the ACS 5-year Estimates. The latest survey period for which cost burden data is available is 2010 to 2014. This means that cost burden estimates reflect income and housing costs as reported by a sample of residents in Sammamish during a rolling monthly survey between January 2010 and December 2014. This period includes the downturn in the housing market and rise in unemployment during and following the last economic recession. Housing costs have increased during the past few years, a fact that should be considered when interpreting cost burden data from HUD.

**Exhibit 68. Housing Cost Burden by Income Level – City of Sammamish**



- 25% of households in Sammamish are housing cost burdened, paying more than 30% of their incomes on housing, and 9% are severely housing cost burdened, spending more than 50% of their incomes on housing.
- Some of the 13,240 households above AMI have issues with housing affordability. 15% of these households are cost burdened, paying more than 30% of their income on housing (almost 2,000 households), and 2% of these households are severely cost burdened, paying more than 50% of their incomes on housing (approximately 264 households).

### Homelessness

All Home, the Seattle/King County Continuum of Care, conducts an annual point-in-time (PIT) homeless count. The PIT offers a snapshot of the number of people experiencing homelessness in emergency shelters, transitional housing, those sleeping outside and in other places not meant for human habitation. Even with the assistance of homeless providers and advocates, as a non-intrusive, visual enumeration of homeless individuals that occurs on one night, the PIT likely undercounts homeless individuals.

Exhibit 69 shows the total number of individuals experiencing homelessness, and whether they are sheltered or unsheltered. Exhibit 70 provides a more detailed breakout of where unsheltered individuals were found, whether it was outside, in a car, tent, or abandoned building.

**Exhibit 69. Homeless Point in Time Count by King County Region, 2017**

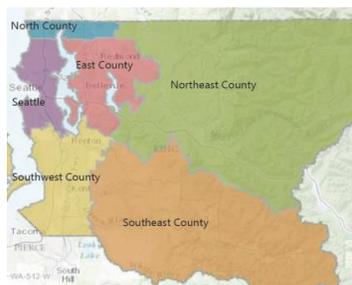
Region	Total Homeless Count	Unsheltered		Sheltered	
		Number	% of Region	Number	% of Region
East County	631	284	45%	347	55%
North County	201	53	26%	148	74%
Northeast County	166	119	72%	47	28%
Seattle	8,522	3,857	45%	4,665	55%
Southwest County	2,017	1,102	55%	915	45%
Southeast County	106	70	66%	36	34%
<b>King County</b>	<b>11,643</b>	<b>5,485</b>	<b>47%</b>	<b>6,158</b>	<b>53%</b>

Note: Contains data collected during the General Street Count, the Youth and Young Adult Count, and Count Us In Survey.

- In “East County”, which includes Sammamish, there were over 600 individuals counted as homeless with about 45% of them counted outside.

**Exhibit 70. Unsheltered Persons by Region, 2017**

REGION	PERSONS ON STREETS/OUTSIDE		PERSONS IN CAR/RV/VAN		PERSONS IN TENTS		PERSONS IN ABANDONED BUILDINGS		TOTAL UNSHELTERED PERSONS
	Number	% of Region	Number	% of Region	Number	% of Region	Number	% of Region	
East County	33	12%	201	71%	46	16%	4	1%	<b>284</b>
North County	16	30%	35	66%	-	0%	2	4%	<b>53</b>
Northeast County	22	18%	29	24%	66	55%	2	2%	<b>119</b>
Seattle	1,076	28%	1,550	40%	1,153	30%	78	2%	<b>3,857</b>
Southeast County	22	31%	39	56%	9	13%	-	0%	<b>70</b>
Southwest County	313	28%	460	42%	277	25%	52	5%	<b>1,102</b>
<b>TOTAL</b>	<b>1,482</b>	<b>27%</b>	<b>2,314</b>	<b>42%</b>	<b>1,551</b>	<b>28%</b>	<b>138</b>	<b>3%</b>	<b>5,485</b>



EAST COUNTY	NORTHEAST COUNTY	SOUTHWEST COUNTY	NORTH COUNTY	SOUTHEAST COUNTY
Beaux Arts Village	Carnation	Algona	Bothell	Black Diamond
Bellevue	Duvall	Auburn	Kenmore	Covington
Clyde Hill	Issaquah	Burien	Lake Forest Park	Enumclaw
Hunts Point	North Bend	Des Moines	Shoreline	Maple Valley
Kirkland	Skykomish	Federal Way	Woodinville	
Medina	Snoqualmie	Kent		
Mercer Island		Milton		
Newcastle		Normandy Park		
Redmond		Pacific		
Sammamish		Renton		
Yarrow Point		SeaTac		
		Tukwila		
		Vashon Island		

Source: One Night Count 2017

- The majority of unsheltered individuals in East County are found living in a vehicle (71%), while most others are found sleeping on streets or in tents (28% total).

## TRANSPORTATION

Sammamish is served by limited transit options, as seen in Exhibit 71, necessitating the need to drive most places, whether for work, school, or to grocery shopping or other errands.

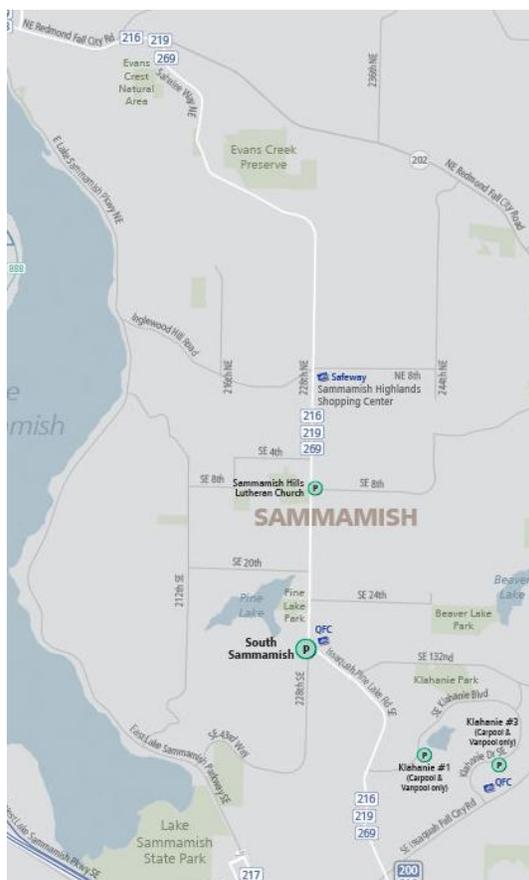
During outreach with seniors in the Indian community and with the YMCA, Sammamish residents and service providers highlighted a need for better public transportation options.

Many seniors rely on public transportation to access community spaces and resource centers. Without a car and/or the ability to drive a car, seniors can struggle to access basic health and other resources. A lack of reliable and affordable transportation can also present barriers to socialization. Meaningful interaction with other members of the community is important for overall well-being, yet accessing senior activities such as trips, social gatherings, games, and events requires a means of transportation. The lack of mobility as a challenge for seniors was echoed through outreach events.

### What we heard from the community

- After affordable housing, transportation is the second most mentioned “unmet need.”
- Lack of reliable and affordable transportation affects the ability to access services for seniors, youth, and low-income adults in the community.

### Exhibit 71. King County Metro Systems Map, Sammamish



### Community Connections and Transportation

- Three buses run North/South on one street through the center of Sammamish.
- There are four park and ride lots
  - Two on the main bus line
  - Two for carpool and vanpool only, in Klahanie
- Residences can be as many as four miles away from the bus line and walking to 228<sup>th</sup> Ave SE can take up to an hour.
- Mid-day service recently started on Route 269 serving Issaquah, Redmond, and Sammamish. This route now provides 30-minute weekday service between 6 am and 8:30 pm where previously there were infrequent transit options outside of commuting hours.

Source: King County Metro System Maps

## PERCEPTION OF SAFETY

### Crime

The City of Sammamish contracts with King County to provide police services. Sammamish has relatively low crime rates that have remained steady over the last three years. The part 1 crime rate (including burglary, larceny, and other violent crimes) is 8 crimes per every 1,000 residents over the last three years (2014 – 2016).

The most prevalent incident types in Sammamish are car prowls and vandalism, with almost 200 car prowls and 150 vandalism reports in 2016. Aside from a high-profile drug case this year, the largest number of drug and alcohol crimes in most recent years has been Driving Under the Influence (DUI) (30+ crimes in 2016), and DUI accidents (almost 20 crimes in 2016). The third and fourth most prevalent drug and alcohol crimes are controlled substance violations (over 17 in 2016) and narcotic activity reports (16 in 2016). Over 90% of drug and alcohol crimes are committed by adults in Sammamish (Bennet, 2017).

### Domestic Violence

Domestic violence is abusive behavior used by one in a relationship to gain or maintain power and control over another partner. It can include physical assault, sexual abuse, and stalking. The Bureau of Justice estimates that every year over one million women and almost 835,000 men are physically assaulted by an intimate partner. 27% of women and 12% of men have experienced domestic violence during their lifetime and then suffered significant impacts such as PTSD and injury as a result (Breiding, et al., 2011).

Domestic violence is intimately linked to housing and homelessness, and the fear of becoming homeless is a primary reason why domestic violence survivors stay with their abusers. Research shows that the need for, and the financial means to maintain, safe housing are two of the most pressing needs among women who are leaving or who have left abusive partners (Clough, Draughon, Njie-Carr, Rollins, & Glass, 2013).

In addition, economic abuse is a common tactic used by abusers to gain power and control in a relationship; it may include tactics to limit the partner's access to assets or to hide information and accessibility to family finances. Financial abuse is a powerful method of keeping a survivor trapped in an abusive relationship, and research shows that financial abuse occurs in 98% of abusive relationships (National Network to End Domestic Violence).

Women experiencing domestic violence that are from immigrant communities may feel additional isolation and may not feel comfortable going outside of the family or cultural community for help with a private matter. (Senturia, Sullivan, & Ciske, 2000)

#### What we heard from LifeWire

- Domestic violence affects people of all incomes and backgrounds in Sammamish. Economic abuse and lack of affordable housing options make it difficult for those experiencing domestic violence to leave relationships.
- For those who leave a domestic violence situation there is emergency shelter on the Eastside, but longer-term shelters are only in Seattle and housing resources are mostly available in South King County.
- Housing and employment options and low-cost access to physical and mental health care in Sammamish would help families experiencing domestic violence.
- Barriers to accessing resources in Sammamish include a lack of case management and programs that require income eligibility.

October 5, 2017

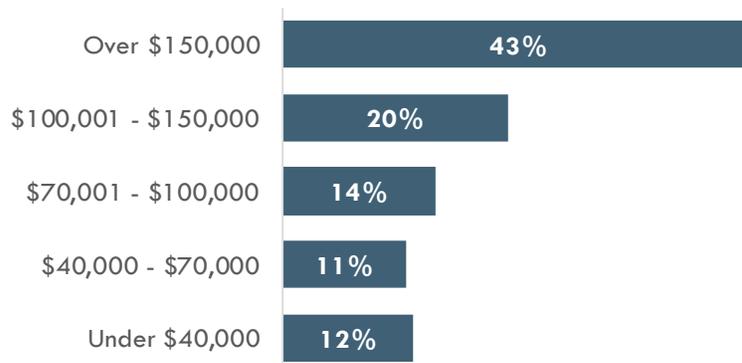
## Appendix 1.A - Virtual Town Hall Results

A Virtual Town Hall online survey was hosted on the City of Sammamish Town Hall website to learn more about community needs from all members of the Sammamish community. The survey was open from June 12 to July 28, 2017. 184 people participated in this survey. Not all respondents answered every question.

*Where did you hear about this Health and Human Services Needs Assessment?*

177 respondents provided information on where they heard about the survey. 27% of respondents heard about this survey from their city email, followed by 16% from a friend or neighbor, 12% from a community event, and 8% from the city website. Other common sources were Facebook, Twitter, the Farmer's Market, Boys and Girls Club Teen Center Outreach Event, postcard in the mail, and a yoga class at Teen Center.

*What is your annual household income?*



Number of respondents: 152

- Respondents that provided household income information reflect the spectrum of incomes in Sammamish. Data USA reports that the median household income in Sammamish is \$147,349. The median income of those who responded to the survey falls within that range. 43% of respondents have an annual household income over \$150,000, and 20% are between \$100,000-\$150,000. Only 12% of respondents have an annual household income under \$40,000.

*What kinds of services or programs would best support you or your family? These could be services or programs that you currently use or would like to have available to you.*

182 respondents answered this question.

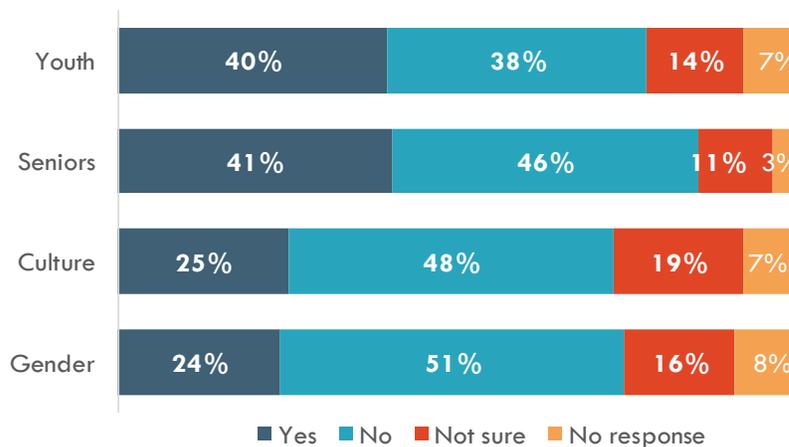
- Physical health: 77% of respondents showed interest in staying physically active. There is also interest in good nutrition and accessing healthy food, affordable access to healthcare, and getting

adequate rest.

- **Mental and emotional health:** 44% of respondents indicated interest in services to help manage stress, access to counseling or mental health services, and managing depression or anxiety.
- **Emergency support:** 77% answered that they and their family do not need these support services. A small share of respondents indicated interest in temporary financial assistance, domestic violence help, food assistance, and short-term housing.
- **Youth support:** 40% of respondents did not need these services; 39% indicated interest in teen activities, followed by 36% for academic support for kids and 33% for academic support for teens.
- **Senior support:** 49% did not need these services; 40% were interested in senior activities and 36% in transportation assistance.
- **Community support:** 51% did not need these services; there was moderate interest in job training, finding affordable housing, legal aid, and support for people with disabilities.

This question only addresses whether respondents currently use or desire services or programs. It gives an indication of which types of programs would be used by the respondents, it does not indicate if there are current gaps in services and program. Information on the locations of services and programs can be found in Appendix 1.B – Inventory of Services and Programs.

*Would you or your family benefit from services or programs that offered support based on age, gender or sexuality, culture, or other factors?*

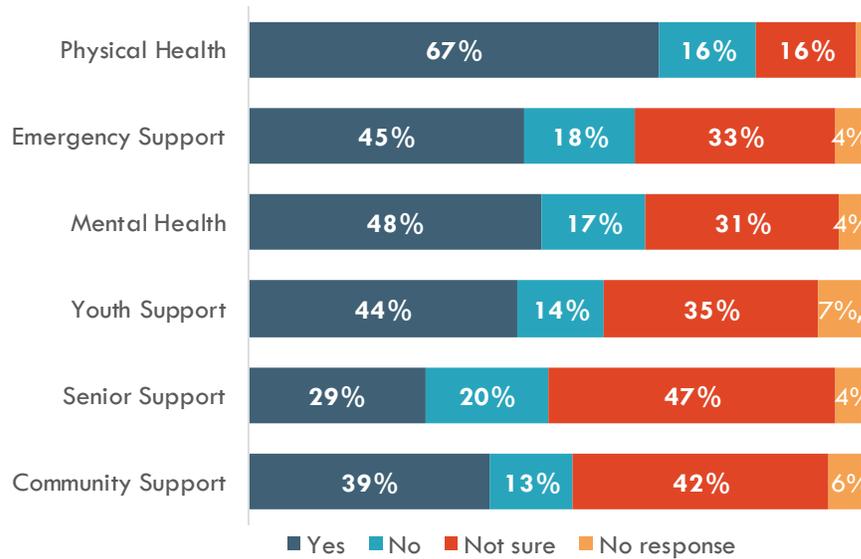


Number of respondents: 182

- Among these areas, respondents showed the greatest interest in programs for seniors and youth.
- Specific suggestions for youth programs included drug prevention programs, suicide prevention, and self-defense for women. Suggestions for senior programs included luncheons, trips, and transportation assistance.
- Beyond these four areas, respondents indicated interest in community support and counseling for

children with attention-deficit hyperactivity disorder (ADHD), single parents, and those with disabilities.

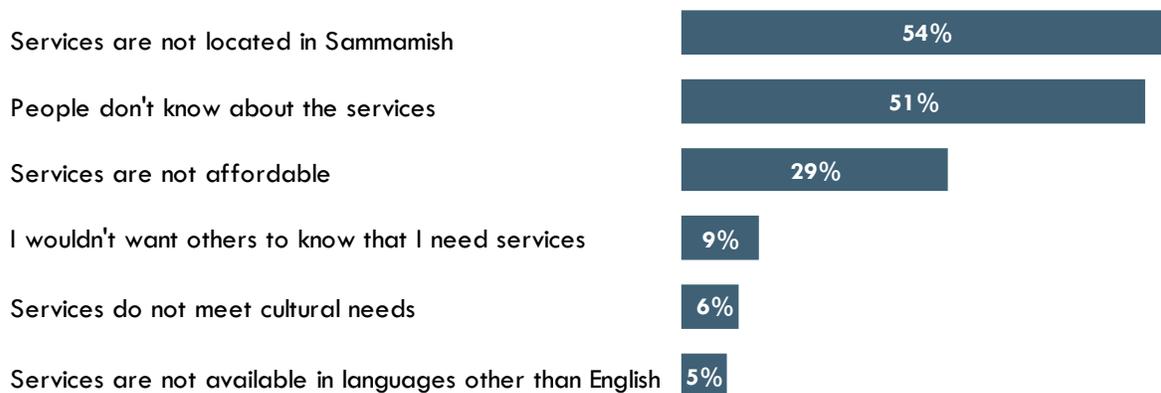
*Is support available to meet you or your family's health and human services needs?*



Number of respondents: 178

- 67% of respondents felt that physical health services met their needs; 48% felt the same for mental health, 45% for emergency support, 44% for youth support, 39% for community support, and 29% for senior support.
- Specific areas of concern were affordable housing, affordable healthcare as well as healthcare that accepts people's insurance, mental health services, and support for families with disabilities.

*What prevents you or your family from getting the health and human services you need? (please select all that apply)*



Number of respondents: 139

- By far, the two main factors that respondents felt prevented them from getting the health and human services they need was location and information. Affordability of services was also an important concern. More information about the location of services and programs can be found in Appendix 1.B.

*In your opinion, what are the three most pressing health and human service needs in Sammamish?*

93 people responded to this open-ended question, and several key themes emerged as the strongest community needs:

- **Access to transportation.** Transportation services are a pressing need for Sammamish community members. Residents need to be able to get around if they do not own a car. There is minimal bus service in certain areas, and buses do not provide direct access to regional services and medical centers.
  - “Need at a minimum a small business service to get residents who don't drive transportation to Issaquah Highlands or Redmond Bear Creek mid-day so they can get necessary medical services for health.”
  - “A circulator bus providing access to the retail centers, parks, community center and better transit connections would be helpful for my family. Including access to the schools on a circulator bus might also help our students with classes and sports.”
- **Affordable housing.** As housing costs rise across the region, residents are increasingly concerned about affordable housing. There is a sense that Sammamish considers itself to be an affluent community but that lower income families who live in the area are struggling. Low income housing and transitional housing were mentioned as specific concerns.
  - “I can't even find an apartment that is affordable; they are just as much as renting a home. The low-income apartments have a four-year waiting list.”
  - “Poor people are being pushed out of the city by excessive taxation and young professionals pushing us out.”
- **Mental health services.** There is a felt need for mental health services, particularly for youth and teens who are struggling with stress, depression, and suicide. Respondents suggested coaching and counseling for children with ADHD, stress management services for teens, and suicide prevention services for youth and teens.
  - “We are very stressed and tired throughout the school year.”
- **Teen activities.** Community members are interested in more teen activities that would keep teens safe in the community. Respondents expressed concerns facing teens related to drugs, alcohol, and cyber bullying. It seems there are activities available for middle schoolers, but not as many activities for high schoolers. One respondent suggested developing another teen center in South Sammamish.
  - “What do teenagers do on the plateau for good social fun?”
  - “We greatly lack older teen activities and young adult activities. Everything is geared around

young families.”

- **Support for people with disabilities.** Many respondents expressed a need for community support for people living with disabilities, as well as those on the autistic spectrum. Residents would benefit from community programs that support families with disabilities. There is a desire for more acceptance of diversity in all forms, as well as a suggestion for more inclusive schools that educate students with disabilities alongside non-disabled peers.
  - “Very important to our family to have support for our adult disabled family member. The lack of bus service midday has been a huge inconvenience for us, since he is unable to work eight-hour shifts, but Access won’t cover him since he is able to ride a bus independently.”
  - “Community programs that help support families raising children/young adults with disabilities.”

There is some tension between needs expressed by community members with different income levels. Lower-income families are looking to meet basic needs, such as financial support, food, transportation, and health care. Higher-income families tended to express interest in more activities and programs. Affordable housing and mental health were shared concerns across income groups.

A small number of respondents (less than 5%) expressed resistance toward the City taking any role in health and human services. These respondents do not see health and human services as a priority for the city and expressed a desire for the City to focus on other priorities.

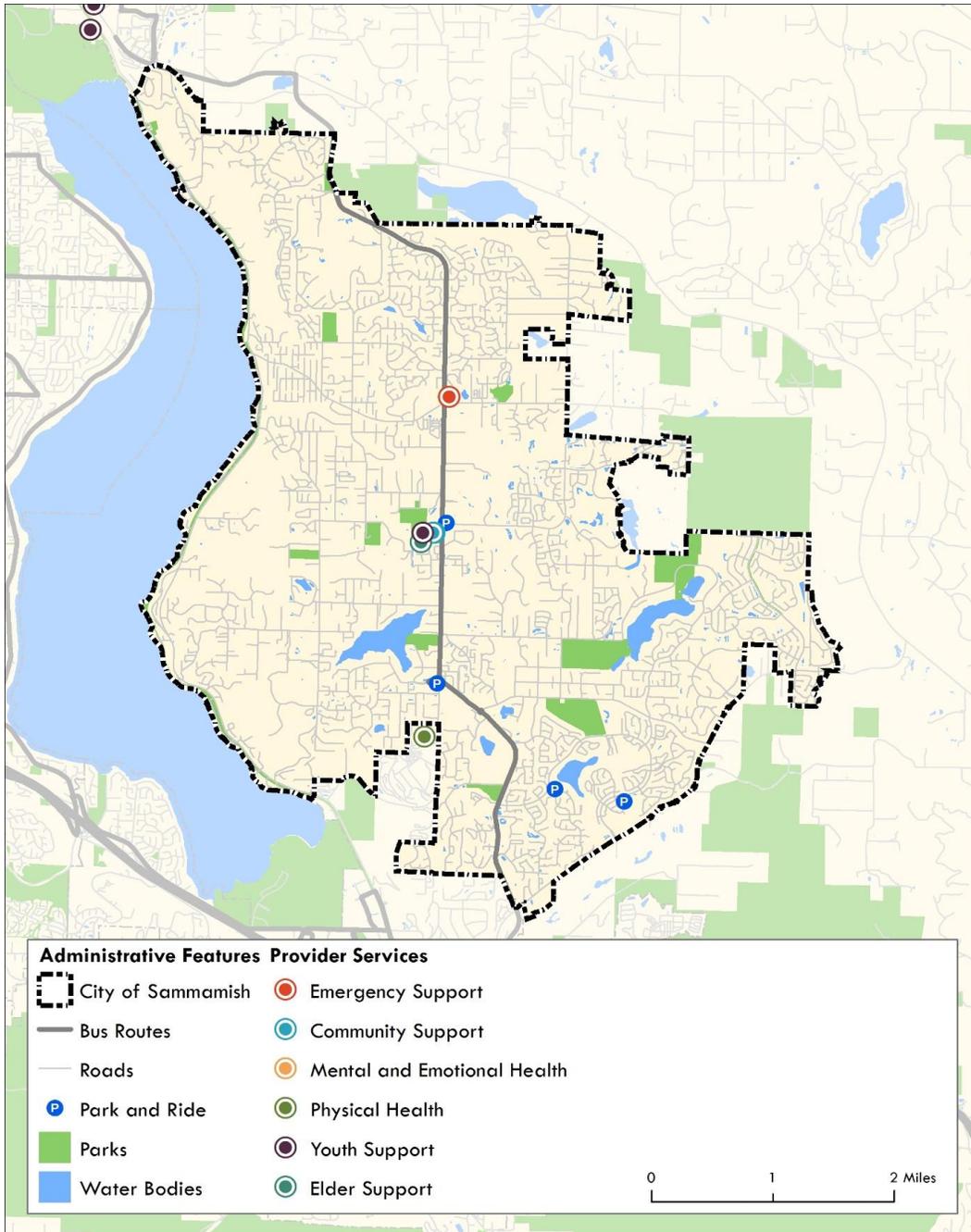
## Appendix 1.B - Inventory of Services and Programs

Questions for the Virtual Town Hall survey asked respondents about the usefulness of programs and services in six areas:

- **Physical Health** included services and programs to support physical health such as: staying physically active, accessing healthy food, getting adequate rest, accessing birth control, treatment for drug or alcohol use, or access to affordable healthcare.
- **Mental and Emotional Health** included services and programs in areas such as: managing stress, coping with depression or anxiety, supporting gender or sexual identity, access to mental health services, and parenting support.
- **Emergency Support** included help with urgent issues such as: short term housing, domestic violence, food assistance, or temporary financial assistance.
- **Youth Support** included programs and services for children under age 18 such as: academic support, affordable childcare, or teen activities.
- **Senior Support** included programs and services for the elderly including: transportation assistance, household help, memory care, or senior activities.
- **Community Support** included a variety of programs and services to help with issues such as: job training, legal aid, support for people with disability, English language learning, finding culturally appropriate health care, or affordable housing.

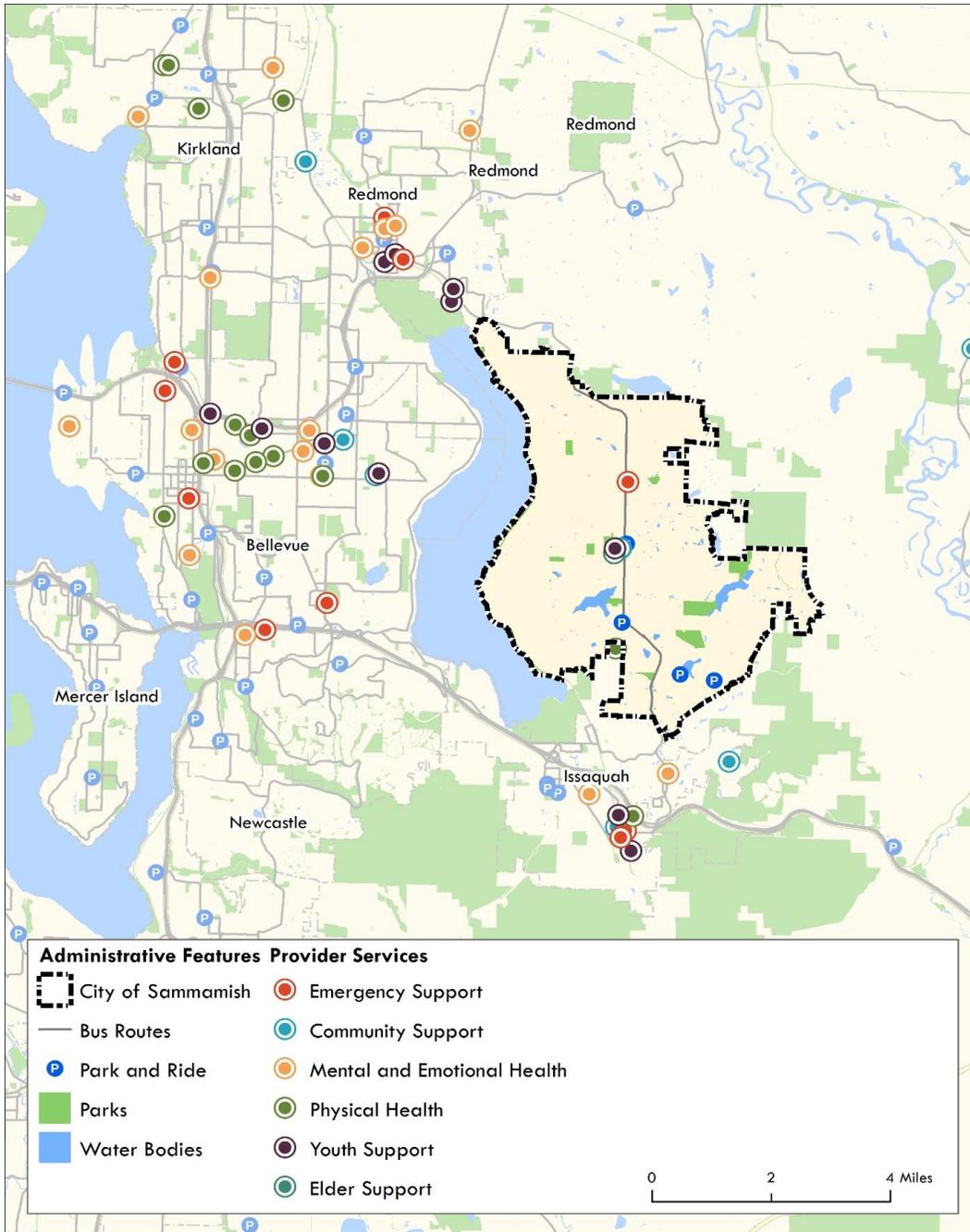
Services and programs in these six areas are shown on the maps that follow. **Exhibit 72** shows locations within Sammamish and **Exhibit 73** shows locations throughout the Eastside. There are few services and programs located in Sammamish proper. There are more service and program offerings elsewhere on the Eastside, but options for Senior Support or Community Support are the most limited. During our outreach process stakeholders, survey respondents, and interviewees mentioned repeatedly that access is a barrier to obtaining services that are needed or desired in Sammamish. This is particularly true for people who may not have access to automotive transportation, such as youth, seniors, or people with low incomes.

Exhibit 72. Sammamish Inventory Map



Source: City of Sammamish; Policy Map; BERK, 2017.

**Exhibit 73. Eastside Inventory Map**



Source: City of Sammamish; Policy Map; BERK, 2017.

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## HUMAN SERVICE COMMISSION LONG TERM AGENDA CALENDAR

*Current as of: 3/9/2018*

Date	Time	Type	Staff	Topics
<b>Weds, Feb 28</b>	6:30 pm	Regular Meeting	Jessi Bon Rita Badh Mike Sugg	<ul style="list-style-type: none"> <li>▪ Welcome &amp; Introductions</li> <li>▪ Election of Chair &amp; Vice Chair</li> <li>▪ Introduction to Advisory Boards</li> <li>▪ Introduction to Commission Bylaws</li> </ul>
<b>Weds, Mar 14</b>	6:30 pm	Regular Meeting	Jessi Bon Rita Badh Kellye Hilde Doug McIntyre Mike Sugg	<ul style="list-style-type: none"> <li>▪ Introduction of Housing Strategy</li> <li>▪ Adopt Commission Bylaws</li> <li>▪ Overview of Human Services Needs Assessment</li> <li>▪ Human Services Strategic Plan</li> </ul>
<b>Weds, Apr 11</b>	6:30 pm	Regular Meeting	Jessi Bon Rita Badh Kellye Hilde Doug McIntyre Mike Sugg	<ul style="list-style-type: none"> <li>▪ Housing Strategy Update</li> <li>▪ Overview of Human Services Grant Program</li> <li>▪ Grant Criteria Discussion</li> <li>▪ Grant Review Commission Assignments</li> </ul>
<b>Weds, May 9</b>	6:30 pm	Regular Meeting	Jessi Bon Rita Badh Kellye Hilde Doug McIntyre Mike Sugg	<ul style="list-style-type: none"> <li>▪ Housing Strategy Update</li> <li>▪ Application Reviews: Mental Wellness</li> <li>▪ Application Reviews: Domestic Violence</li> </ul>
<b>Thurs May 24</b>	6:30 pm	Joint Meeting with Planning Commission	Rita Badh Mike Sugg Kellye Hilde Doug McIntyre	<ul style="list-style-type: none"> <li>▪ Work Session: Housing Strategy Update</li> </ul>
<b>Weds, June 13</b>	6:30 pm	Regular Meeting	Jessi Bon Rita Badh Mike Sugg	<ul style="list-style-type: none"> <li>▪ Application Reviews: Basic Needs</li> <li>▪ Application Reviews: Cultural Inclusion</li> <li>▪ Application Reviews: Seniors</li> <li>▪ Application Reviews: Other</li> </ul>
<b>Weds, July 11</b>	6:30 pm	Regular Meeting	Rita Badh Mike Sugg	<ul style="list-style-type: none"> <li>▪ Human Services Strategic Plan</li> <li>▪ Confirm recommendation to City Council on 2019-20 Human Services Grant Funds</li> </ul>
<b>Weds, Aug 8</b>	N/A	N/A	N/A	*NO AUGUST MEETING*
<b>Weds, Sept 12</b>	6:30 pm	Regular Meeting	Rita Badh Mike Sugg	<ul style="list-style-type: none"> <li>▪ Human Services Strategic Plan</li> </ul>

3/9/2018 4:24 PM

<b>Weds, Oct 10</b>	6:30 pm	Regular Meeting	Rita Badh Mike Sugg	<ul style="list-style-type: none"><li>▪ Human Services Strategic Plan</li></ul>
<b>Weds, Nov 14</b>	6:30 pm	Regular Meeting	Rita Badh Mike Sugg	<ul style="list-style-type: none"><li>▪ Finalize recommendation to City Council on Human Services Strategic Plan</li><li>▪ Third Quarter Reports</li></ul>
<b>Weds, Dec 12</b>	6:30 pm	Regular Meeting	Rita Badh Mike Sugg	<ul style="list-style-type: none"><li>▪ Year in Review</li><li>▪ 2019 Work Plan</li></ul>