

GRAY'S HARBOR COUNTY  
**Public Health**

HEALTHY PLACES

# Cold Weather Shelter Debrief

June 9, 2022



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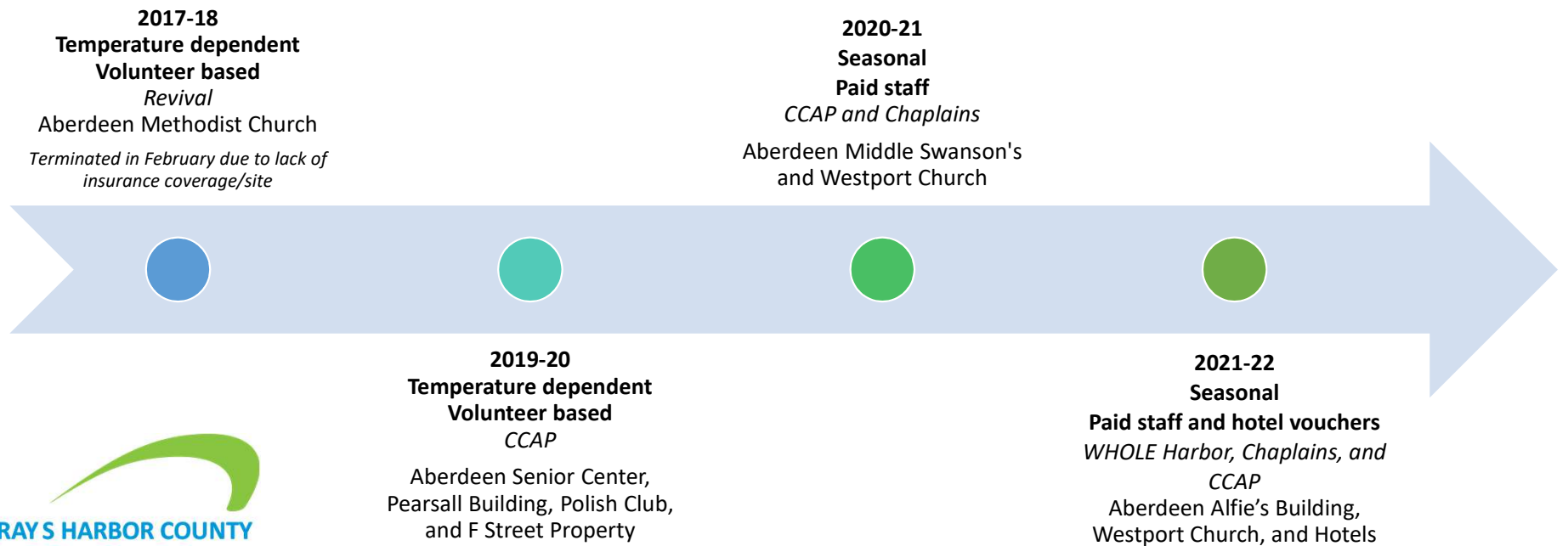
# Goals of today's workshop:

- Timeline of cold weather services in Grays Harbor
- Weather conditions November 2021 – March 2022
- Summary of services provided/supported by Grays Harbor County
- Discuss what went well and what could be improved
  
- Solutions/next steps – June 14<sup>th</sup> workshop



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# Timeline of Cold Weather Shelter services in Grays Harbor County



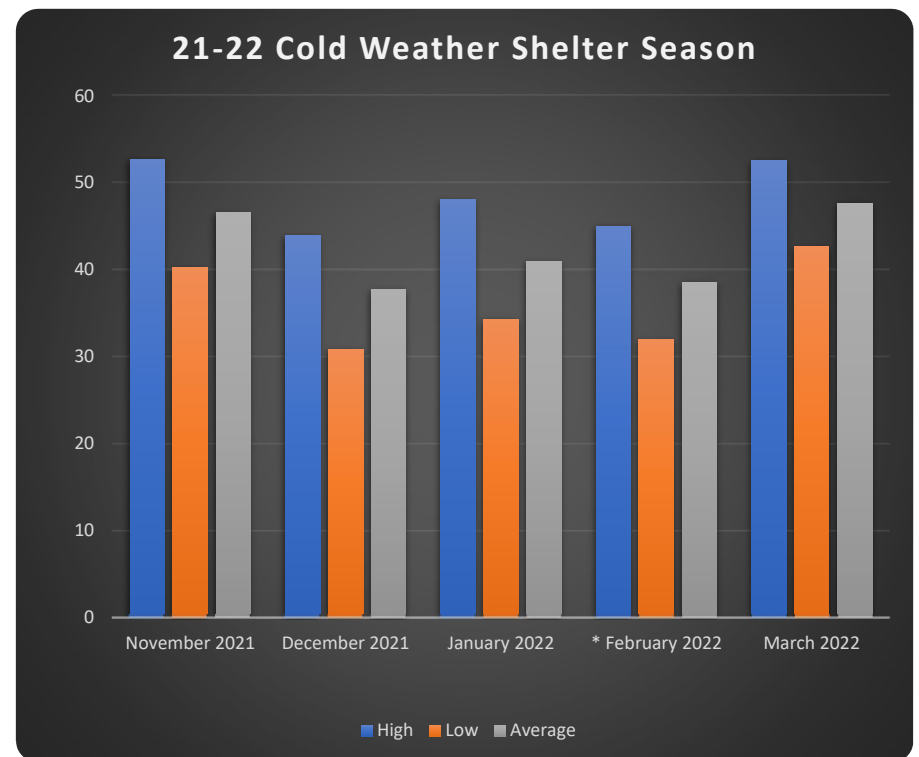
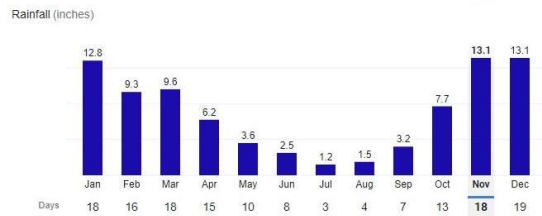
# Weather Conditions winter 2021-22

**Days below 35 degrees November – March:  
28**

- Nov = 2
- Dec = 9
- Jan = 8
- Feb = 7
- Mar = 2

**Extreme weather:**

- Snowstorm in late December 2021
  - Dec 25 – January 2 below 40
- Flooding January 2022



# County-funded services 2021-22

## Westport Congregate Shelter

**Provider:** Chaplains on the Harbor

**Number served:** 83 people

**Average length of stay:** 21 nights

**County paid:** \$86,007 (local homeless housing funds)

## Aberdeen Congregate Shelter

**Provider:** WHOLE Harbor

**Number served:** 96 people

**Average length of stay:** 31 nights

**County paid:** \$210,627 (ESG CV)

## Hotel/Motel Vouchers

**Provider:** CCAP

**Number served:** 36 people

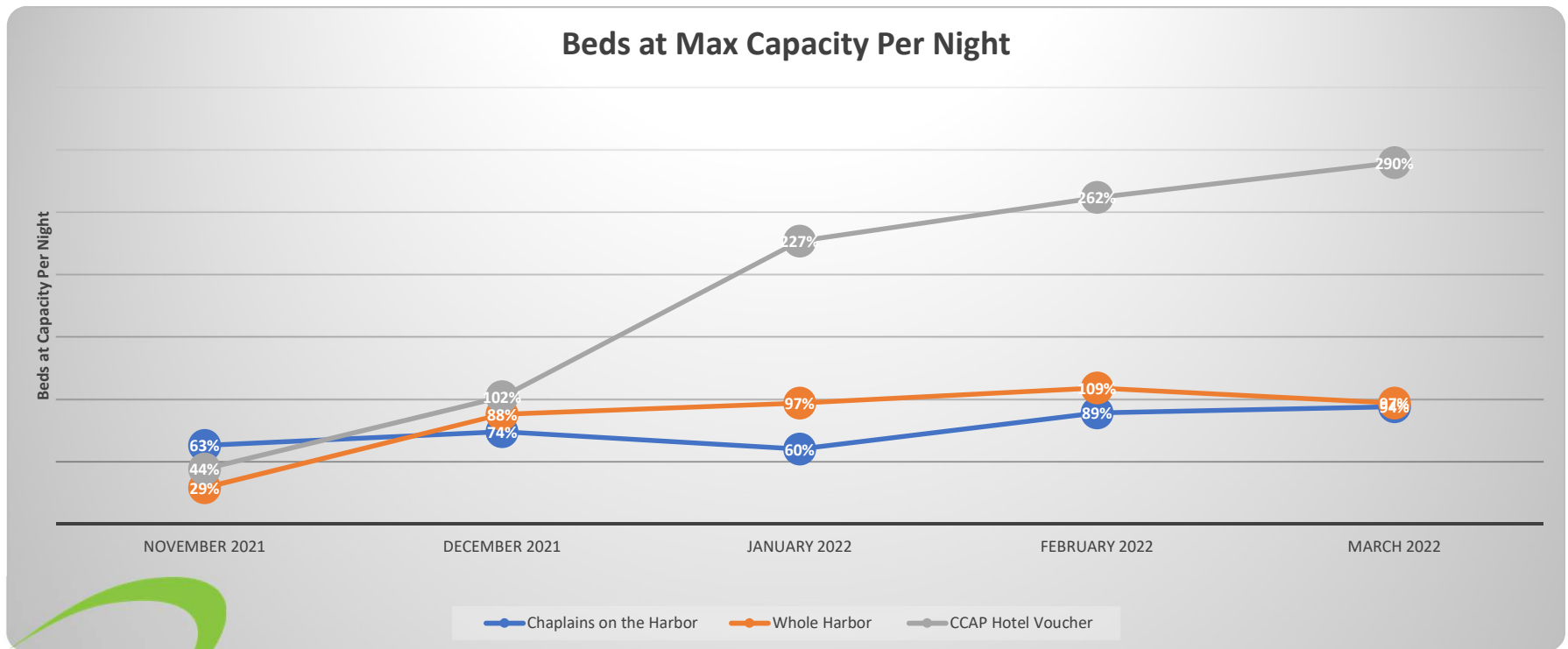
**Average length of stay:** 53 nights

**County paid:** \$191,650 (Department of Commerce)



# Shelter Capacity by Month

Available beds per night: Chaplains: 15 beds (can flex to 25) WHOLE Harbor: 24 beds CCAP: 10 vouchers



# Client Stories – Westport

*One story we will tell you is far too common, and similar for the folks that we serve. This human began by low access to food, coupled shortly after with no access to housing. As is the way with certain diagnoses they are highly unpredictable, and the long term effects are often not immediately known. Sadly, his story becomes more complicated as his symptoms, and long term effects become more evident. His ability to be an active participant in his own life became more and more challenged. Daily tasks are more complicated, and in a short amount of time this human went from promising to struggling daily with life skills to meet his most basic daily needs. As often happens, access to medical care, and continuity of care is hard to come by, and includes misdiagnosis, loss of benefits, due to systemic obstacles. Our experience with this human has been to walk beside him, and to assist in navigation of a system that presented as the mountain he could never climb. He had fallen into barely surviving, often sleeping exposed outside, addiction, and marginalized health issues that include those one would expect from someone who lives outside in inclement conditions.*



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## Client stories – Aberdeen shelter

*Many of these people would have died ... either from ODing or from freezing to death. I've watched at least 4 people die this year, like actually die...I've died twice this year. I have small support group here and (client name) has brought me back twice through CPR and Narcan. It took them a long time to bring me back. They had to Narcan me twice and call the paramedics. This shelter is the reason I am alive. They are more progressive, they are more accepting, they are more cooperative. Other places don't accept girls who are pregnant, families. This place meets people where they are at. There are people here that I literally wouldn't be alive without.*



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# Client stories – Hotel Vouchers

- Many elderly clients (ages 55-70 +)
- Through the cold weather shelter referrals to Hotel we were able to establish connection to many existing clients that have historically been hard to reach.
- Living outside creates many communication barriers. Just keeping a phone charged and turned on can be difficult. When adding in that most can only use their phone when there is Wi-Fi, it compounds the issue.
- Establishing communication helped us to connect people to Medicaid insurance and set up primary care doctors. We believe this is important when trying to reduce the amount of people that tax the costly emergency response system. Some of the individuals served and connected to Primary care physicians had never been seen by their own doctor. They had been using Emergency and urgent care their entire life.

- Cache McCallum, Housing Program Manager Coastal Community Action Program



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# Client stories – Hotel Vouchers

*One family comprised of three generations in one household accessed a hotel through a cold-weather shelter referral. The household was affected by the flood that rocked east county. The family home and all their possessions were deep underwater and badly damaged. The eldest in the household needed access to electricity due to a need for life-sustaining equipment. Two members of the house were in a wheelchair.*

*I received a call from the cold weather shelter at about 9 p.m. and was able to respond and get the family in a hotel temporarily. The red cross had not set up its post at the fairgrounds yet. We used Travelodge in Aberdeen. The next day we were able to communicate with the whole family and discovered that they preferred east county for several reasons. The family needed to be close to Tumwater where they went regularly for Kidney dialysis. The family's support and faith-based community were in Elma. We were able to assist the family in getting to the fairgrounds to access the flood shelter set up when it opened. As that was being wrapped up we were able to place the family in a hotel in Montesano at the Guest house. This was a struggle. During the flood, there were limited vacancies everywhere.*

*Using the hotel we were able to keep the family unit together and stable until they could access and recover their property, and eventually return to it. We were able to connect with Faith-based partners in East county to assist with clothing and food as well as other items to help the family get back on their feet.*

*One instance was an aged man with a history of homelessness who had recently been through surgery on his brain. He had no familial or social resources and was wheelchair-bound. He was also a veteran who had served in the US Marines. We were able to verify his veteran status and obtain a housing voucher through SSVF (veterans services). This individual stayed in a hotel and was able to be connected to services to get to his appointments for follow up care until he was housed through SSVF.*



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# Thoughts/Reflections?



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# Complaints/concerns received

In the five months the Aberdeen cold weather shelter was open, 14 complaints/concerns were received by Public Health— two in November, three in December, three in January, five in February, and one in March.

A formal grievance procedure was developed in early February which was publicized to the City, surrounding businesses and previous complainants. No formal grievances were received by WHOLE Harbor.

Complaints were received by Public Health via email and phone. Common themes included people loitering around surrounding sidewalks/business doorways, garbage, drug use and disruptive behavior.

Public Health forwarded all complaints to WHOLE Harbor and reviewed grievances (formal and informal) during regular quality assurance check-ins.

## General action steps following referrals included:

Loitering/public urination – law enforcement

Disruptive behavior/safety concerns – shelter staff and law enforcement

Garbage – WHOLE Harbor request for additional funds

Drug use/other behavior concerns – WHOLE Harbor request for additional funds



# Informational Interviews completed

- Elected officials:
  - Commissioner Warne – District 1
  - Commissioner Pine – District 2
  - Commissioner Raines – District 3
  - Mayor Pete Schave - Aberdeen
  - Councilmember Dee Anne Shaw –Aberdeen
  - Councilmember Debi Pieraccini - Aberdeen
- First Responders
  - Chief Steve Shumate – Aberdeen PD
  - Behavioral Health Navigator Laina Moore – APD/HPD/CPD
  - Assistant Chief Dave Golding - AFD
  - Chief Saunders – Westport PD
- Service Providers
  - Cache McCallum and Greg Claycamp – Coastal Community Action Program
  - Miki Cabell – Chaplains on the Harbor
  - Lauren Garrett – WHOLE Harbor
  - Laurel Wiitala and Gary Rowell – Union Gospel Mission
- Businesses
  - Grays Harbor Inn & Suites
  - Michael Burgess – Dairy Queen
  - Mike and Vickie Burgess – Dairy Queen and actively present the cold weather shelter 2021-2022
  - Bill Brown – Grays Harbor Piano Academy
  - Grays Harbor Guns – Illan and Michelle Kariv
  - Christina To – Ocean Palace Restaurant
  - Douglas Orr – Art Gallery to be interviewed on 6/9





# Informational Interviews completed

- Faith Community

- Pastor Larry Dublanko - Cornerstone Church
- Pastor Kent Gravley - Immanuel Baptist Church
- Pastor Ged West - Calvary Chapel of Montesano
- Pastor Jeff Johnson – United Christian Church
- Pastor Bill Brown – Immanuel Baptist Church
- Pastor Kaj Martin – Foursquare Church
- Pastor Doug and Pastor Lois Cotton – Harbor City Church
- Pastor Sean Hollen – reached out (out of town)

- Healthcare Providers

- Tori Bernier – Chief Nursing Officer, Christina Mitchell – Urgent Care and BH Manager, Anna Taylor – Director of Ambulatory Services, Blake Rose – Chief Administrative Officer, Liz Hindbaugh – RN for MAT Clinic
  - Summit Pacific Medical Center
- Dori Unterseher – Chief Nursing Officer
  - Harbor Regional Health

- People with lived experience

- Chaplains on the Harbor staff
- Shelter clients

# Interview topics/questions

- Positives of cold weather shelter
- Negatives of cold weather shelter/What could be improved
- What data would you want if available?
- Would you like to be involved in the planning process? How so?
- Is it the community's responsibility to provide shelter during the winter? Under what conditions?
- What is your interest in having a shelter this winter i.e. what do you stand to lose if one is not available?



# Stakeholder interview summary

## Positives

- First responders, healthcare, faith community, and service providers had consensus it provides a place for people to go that reduces death and suffering.
- First responders and faith community noted less people sleep in parks or other illegal spaces.
- First responders and healthcare providers noted decreased demand on EMS and ER visits.
- Service providers and faith community noted positive effect of connecting with current clients and platform to connect them to additional services – particularly responding to flood and other emergencies .
- Elected officials were split -some expressed uncertainty if exposure/health issues were as severe as feared or if might serve as motivator to get into services. Some believed strongly these services were the right thing to do and necessary.



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# Stakeholder interview summary

## Negatives

- Consensus from most stakeholders that location was challenging
- Consensus from first responders, faith community, elected officials, and business community:
  - loitering
  - visible trash
  - disruptive behavior
  - Services should be “sleep focused” – less in and out traffic
  - Lack of security presence
- Faith community and some businesses highlighted a lack of community involvement/volunteers creates lack of engagement/understanding
- First responders noted protocols for police/EMS response could be improved
- Consensus from elected officials, faith community, first responders and business community wanting clarity on rules and consistent enforcement that reduced neighbor impact
- Consensus from first responders, healthcare, and other service providers that online or real-time resource guide would be helpful for referrals
- Consensus from service providers seasonal model is challenging to plan, staff, train, and market
- Service providers and some first responders noted need for more accessible/flexible behavioral health services for shelter clients
- Stakeholders in other geographic areas noted challenges in access due to transportation and distance.
- Most stakeholders highlighted challenges of no day center or place for people to go when shelter was closed and impact that had on systems/businesses/first responders
- Most stakeholders expressed interest in being part of the planning process early and often

# Stakeholder interview summary

## Is It the community's responsibility to provide shelter when it's cold? Under what conditions?

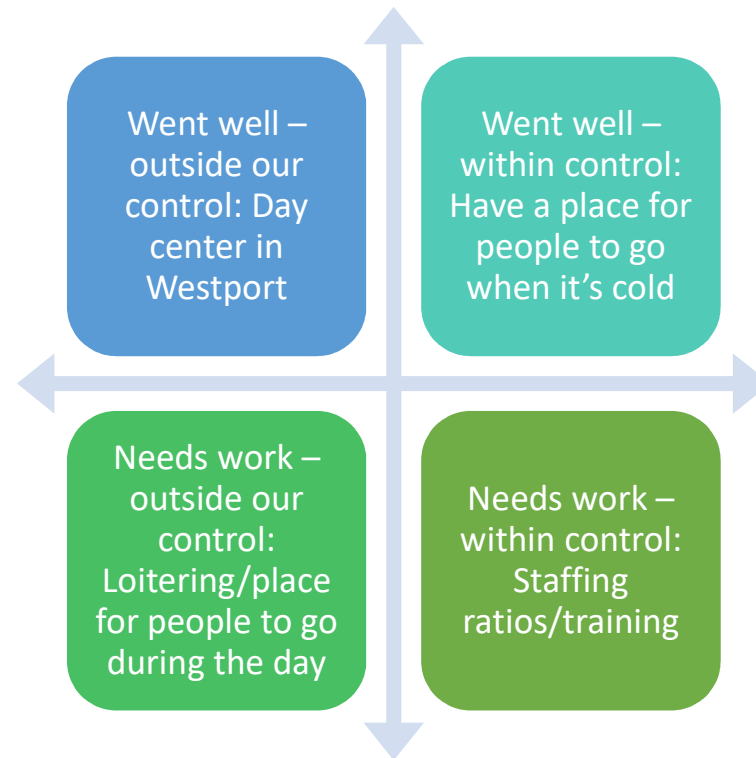
- Elected officials were split -some expressed uncertainty if exposure/health issues were as severe as feared or if might serve as motivator to get into services. Some believed strongly these services were the right thing to do and necessary.
- First responders, most service providers, healthcare providers, faith community, and businesses had consensus it is our community's responsibility and is the right thing to do. Most further noted that "fair but firm" rules to keep guests and neighbors safe are reasonable and necessary.
- Many in faith community articulated struggle between wanting to serve those less fortunate but feeling strongly the client needs to work towards improving their own lives.
- Faith community requested a local "Think Tank" for partners to come together around this issue.

## What do we stand to lose if there is not cold weather shelter?

- First responders, healthcare, service providers had consensus no shelter would increase demand on police, EMS, Crisis services, and ER.
- First responders would be concerned about increase in crime during winter months to access indoor spaces
- First responders, healthcare, service providers, and faith community had consensus people's lives and health would be at risk. Elected officials were split on this point.
- Many stakeholders from across the board noted we could stand to lose progress/work to mitigate the issue of homelessness if no cold weather shelter was available.



# Scope of Control



# Commissioner input

- Consensus:
  - Clients expressed appreciation for services
  - Aberdeen shelter location was not ideal
  - Lack of clarity on rules and seemed insufficient to mitigate neighbor impacts
  - Minimal negative impact from hotel vouchers/Westport shelter
- Differing views:
  - What is true impact/risk of winter weather on individuals experiencing homelessness?
  - Whether winter weather is motivator or additional hardship
  - Who is target client/who should we be serving or not serving?
  - County's role in facilitating these services

# Thoughts/Reflections?

Commissioner  
Warne



Commissioner  
Pine



Commissioner  
Raines



# Next Steps

- Workshop June 14<sup>th</sup> will review:
  - Themes of feedback
  - Available funding and allowable uses
  - Potential models for consideration
  - Policy guidance on cold weather shelter (if any) in Grays Harbor



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