

**MASON COUNTY PUBLIC HEALTH & HUMAN SERVICES  
HOUSING AND BEHAVIORAL HEALTH BOARD**

415 N 6<sup>th</sup> STREET, SHELTON, WA 98584

Zoom Meeting held

**Regular Meeting Minutes  
Aug 23<sup>rd</sup>, 2023**

**1. CALL TO ORDER**

Meeting was called to order by Commissioner Shutty

**2. ROLL CALL:**

**Board Members:**

- Kevin Shutty, BOCC
- Beau Bakken, Citizen
- Peggy VanBuskirk, MC Board of Health
- Amanda Gonzales, Citizen
- Eric Onisko, Mayor City of Shelton
- Mark Freedman, BH Administrative Service Organization (ASO)

**Staff Members:**

- Todd Parker, MC Public Health
- Haley Foelsch, MC Public Health
- Cheryl Craig, MC Public Health
- Jamie Ellertsen, MC Public Health
- Christina Mueller-Shinn, MC Public Health

**Guests/Public:**

- **Jonathan Free** Community Lifeline
- **Aaron Meyers** Community Lifeline
- **Christeen Brickert** Community Lifeline
- **Colleen Carmichael** Quixote Communities
- **Kell Rowen** Mason County Building & Planning Department
- **Marissa Watson** Mason County Building & Planning Department

**3. PUBLIC COMMENTS: None**

**4. APPROVAL OF THE AGENDA:**

Approval of the agenda was

**5. APPROVAL OF THE MINUTES:**

Motion was made by Eric Onisko and seconded by Peggy Vanbuskirk to approve the regular minutes from May & July, 2023. Motion carried unanimously.

**6. Meeting Topics:**

a. **Profile on Homelessness** – Haley shared a PowerPoint with the group presenting an update on the Profile on Homelessness which can be viewed [here](#).

b. **RCORP Extension – Update w/ Christina**

Christina presented to the group about the RCORP grant that Public Health, North Mason, OHRS and Mason Health BHR Department had received. This grant helped us increase peer workforce to cover lots of prevention, harm reduction and treatment activities, with the bulk of work staffing by Mason Health, they were able to get a Peer Navigator to help with Behavioral Health. OHRS hired 2.5 FTE to start a jail SUD program, with the very first SUDP working with jail population along with 1.5 peer. The SUDP is April Byrd, and Aaron Whittenberg is a full-time peer working with the jail population.

We have considerable unspent funds. We received this grant when covid hit, and this originally included Peninsula Health. We switched partners about a year in, and that left us with considerable unused funds. We applied for a no-cost extension, and we will be extending our activities until the end of December. Public Health and OHRS will continue, while Mason Health with this grant will end at the end of August and we will be basically extending the jail program and the harm reduction outreach program. We will also have a considerable amount of funds to purchase Narcans. We will use this to supply some partners, and we aren't supposed to supply, for example, law enforcement. We have been giving it to them, but we haven't been able to fulfill it as they are requesting. We are anticipating giving a seed fund, but after this I don't think we will be able to continue to fund MCSO and SPD Naloxone, we can give them a good supply and say start putting it in your budget, we will give them plenty of kits to start, not sure how else we will disperse Naloxone but will figure out the next steps. I have been talking to OHRS leadership about continuation, not sure what will happen with the syringe exchange partnership. So as of December, there is no secured person for me to do outreach with. Aaron does the downtown transit center outreach table, I'm not sure what that looks like for OHRS but hopefully OHRS will not stop and will be able to continue things, whatever that looks like. Public Health applied for the very first WSDOH syndemic grant, a funding opportunity that wants to marry the syndemic emergencies we have in Washington state with overdoses, other challenges with drug user health, STI's, HIV, etc. including congenital syphilis. This is a huge funding opportunity for the state to approach these things together instead of separately.

We were awarded money that we applied for with our syringe service program, OD2A (Overdose Data 2 Action) which funds my FTE and then RCORP funding for an outreach partner, but there is no secured funding for future. So, we were awarded funds for that, and we want to change a bit to reflect the needs of our community, we were also awarded funds for wound care and the like, we were not funded as much as hoping but it's a good thing, we will have to see what we have the ability to do. Beau asked, has our MCO's been hit up at all in Mason County for that kind of funding work? Christina said, no, I don't think so, if you have any ideas we would love to bend your ear about that. Beau said it seems like some work you're doing might be right up their alley, it would be great to see our MCO's kick in where they can. Mark said, for MCO's, if it's not in the contract with state for Medicaid required service, they've been pretty

reluctant to shelling any money, but always open to discussion to see what's possible. That's been my experience as well as all the other ASO's said Mark. Kevin said, with Beau's point, if we had a list of demands to kind of open that conversation with managed care organizations, if we're in a position where we are allowing them to come with ideas we are probably not going to get very far, it might be worth through strategic planning to put heads together for some asks ranging from fairly simple to more complex where Mark and I can leverage more than we have been willing to in the past. We need basically monthly MCO's and providers in community, they have a form where they are able to troubleshoot and when you're out in the community, let them know if they have asks or concerns or are looking for partnership opportunities about that monthly forum. Mark said that would be welcomed on the agenda for any of those meetings.

**c. Joint Planning – 2025 Comprehensive Plan w/ Kell Rowen**

Kell Rowen introduced herself and Marissa Watson, the long-time planner who works on non-permit issues in the planning department. Planning works on development regulations and comprehensive work, Washington state in the 1990's passed to plan under growth management, which means we will plan for the 20-year growth horizon based on population projections. Mason County has one city, the city of Shelton which has Urban Growth boundary and city limits, still within county jurisdiction, and Belfair and Allyn which are unincorporated towns, but there is a boundary where they allow higher population and growth. That's where sewer, water and roads, we do have sewer and all 3 of those, put your growth there. There are several elements required, one, a housing element, in addition to land-use. So, our housing element needs to address where we're going to put the housing, etc. We are required to start this year and complete in June of 2025, we have hired SCJ alliance and are getting a contract underway now. Kell said, Haley you just presented a lot of information I wasn't aware of either so this is really good to see what we have to help our consultants draft this element.

Beau said, just a couple things, one is, when was the population study done that you're talking about, was it pre-covid, during, post? Kell said, so the office of financial management at the state level, they're the ones that produce the numbers, and you can choose which to reference, we're allowed to choose low, medium, or high – we always go with the medium. There's a 10-year census, so like every year our department is responsible for getting OFM numbers updated so we must report on all of our new construction of housing and all of that stuff, so they keep an annual tally of current population numbers and then they project the numbers out. It's the Office of Financial Management that does the population projections and then, as required by state law, we are required to use those numbers. Beau asked, is this an update to the existing plan or is this a new 20-year plan? It is an update said Kell, it's called the Periodic Comprehensive Update so we will now be doing these every 10 years, its changed on whether it used to be 7 or 8 years but now it's going to be every 10 years we will be updating. So, 2025 is next, and then 2035 another Comprehensive Update, and always looking 20 years out. Marissa and I have looked at the 2016-2036 plan and it will likely be more than overhauled than just a quick update, we're really taking advantage of the state monies that allowed us to hire the consultants. We are really

looking at the opportunity to do a more robust public outreach and looking at our 3 Urban Growth Areas for that growth, and honing in on, do we have the right zoning and what do we need to rezone. The state has made a lot of changes to housing laws, so we're no longer going to be allowed to have zones that only allow single family residential, so there's going to be a push for higher densities within all of our Urban Growth Areas. Beau said, so the last thing I've got is on impact fees, I know we've had a brief conversation on the fire service side and EMS service side but maybe there's a conversation to be had around Behavioral Health and Housing as to, you know, these folks come in and there's certainly an impact on services that Public Health provides. You know, maybe there's a way to reduce some of that cost, what that looks like I don't know but I think it's a good placeholder moving forward for discussion. Kell said, I'm glad you brought it up because we can do an impact fee ordinance, Marissa did a lot of research on that and it's very intensive and there's a lot of background work that has to be done, you know like the fire chief, the fire districts would have to do fee studies so that we can't just randomly charge certain amounts. We have to know what it is charged for, and it's very complicated that way, however under the environmental impact statement, we can do mitigation fees so it's very similar to the impact fees. It's what we did for the planned action in Belfair, and we did implement mitigation fees for schools and traffic, but under the Comprehensive Plan Update we are asking our consultants to also do an environmental impact statement in which we can look at mitigation fees not only for schools and traffic but we can look at that for fire as well. I do want to have more detailed discussions around that, so thank you for bringing that up and I look forward to meeting with the consultants down the road about that specifically, Kell said. Colleen asked in the text chat about using the Housing Needs Assessment from FCS group in December of 2022, she thinks it is a good place to start, and she is interested in talking with Kell, about maybe doing some 9% tax credit development deals so we can get some additional housing going in Mason County. Colleen said she has been working with Jill Stanton in the Housing Authority because the need for housing is critical in our area and for the homeless population specifically, and if we don't start adding more units, that population is going to continue to grow. So, if you need some input from any one of the providers, since we are the permanent support housing provider for Mason County, please let me know because that's something I'm very interested in working on and trying to get those units built and accomplished in the fastest way that we can. Kell said, SCJ had partnered with FCS who did the Housing Needs Assessment and so we love that they have that background in information and they can provide an excellent housing element for us. Kevin said that's fantastic, if you read the HNA it can't be any clearer that we need more units, so we have to start somewhere. Along those lines Kell, I was thinking to another part of the HNA we did and it talked a lot about the percentage of our housing inventory that is being utilized as a second home or a short term vacation rental so I'd like to give you an opportunity to talk about what PCB has been thinking about in terms of regulating short term rentals, I think it was something like 25% of our housing stock was either a second home or utilized as a short term rental so that has a pretty big impact on housing availability and affordability when you're utilizing a quarter of your housing stock in that way says Kevin. Kell said yes, we figured there's just over 1000 on housing units that are being utilized as short-term rentals, we don't currently regulate short term rentals in any way, we don't treat them any differently than just a residential structure, and so we are looking into regulating short term rentals, generally and for

nuisance issues, neighborly nuisance issues but also, properly sized septic systems, parking, etc. But, I don't know that we're considering limiting the number of short term rentals as an impact to housing stock or not, that's something I think the commission will have to consider whether or not they want to put a limit on it or how that'd work, but I think addressing it and the awareness of it is something to just be aware of so that the community can be thinking about that and how they want to handle short term rentals in the future. One of the things that Marissa and I just recently talked about was once our consultants come up, we get the contract and they start working that will free up her time a little bit to go and she has been doing research on other jurisdictions that have already adopted short term rental regulations and then not only the ordinance and adoption of that but then the enforcement side on really how are we going to handle keeping up on the new regulations we have around that, so that is outside of the comp plan scope but everything is certainly intertwined. Kevin said we look forward to getting this kicked off and having another opportunity to check in when the process gets started.

**d. Community Lifeline – Update**

I'm just going to give a brief overview of the current operations for CLL, I know that Jonathan and Aaron are on the zoom meeting as well so any questions later may also be directed towards them, right now currently the leadership and staff, we are without an EV, we will be reviewing that position in September and be looking at some further funding that we may have available. The staff is – Jonathan is our shelter manager, Aaron is our case manager, Alicia is our program manager for the Recovery Café, and we have shelter aides on staff as well along with two overnight shelter aides for the overnight beds. There are changes in services right now, I know there's a lot of things going around the community, as far as that, some of them are very temporary and some of them are currently related to work that is being done right now with city, county, and law enforcement and other agencies like Crossroads, Turning Pointe, Youth Connection and Quixote Veterans Village. Through a couple of meetings with all of those groups, there was a task force created, and myself and Tonya and Susan and Colleen who chairs the taskforce and Mark Ziegler, we meet to determine the conditions in Brewer Park because there had been a pretty large encampment growing in the park for a while. We were up to 18 to 20 tents on any given day and we knew that we needed to take action on behalf of the community, our neighbors and our merchant's downtown. So, there's a very cooperative effort going on, each day, or most days of the week I will say, Aaron or Jonathan, with law enforcement, go into the park to approach the individuals to see if they will accept a bed and case management with CLL and technically, if they don't, they can be asked to move on and if they don't move on they can be cited or arrested. Those aren't things that we really want to have happen, we have had a few come in, we have had a lot that wouldn't accept the services, we do however see pretty good results in all of this action, we are down to about 3 tents when I checked in yesterday and we continue to keep these efforts going pretty much on a daily basis. On most Thursday mornings, there's a team of us that at 6:30 in the morning that meet in the park with the city parks for clean-up and to approach the individuals again regarding their needs and what we might be able to provide for them in the building and whether they would accept those or not. So with all that said, we've had beds available every night, but currently we have cases of covid

in the building so we have had to quarantine a few individuals to keep that contained from other residents and staff, right now night by night as we report, we won't have beds available until the quarantine is over and testing has been done on individuals for just a few more days and then we think we will probably be okay again, so that's just a very brief overview of what is going on right now, and if you have any questions I can answer them or possible Aaron or Jonathan. Christina said, so I had heard that dinners and showers for non-residents has stopped, is that the case or is that a short-term thing or a long term thing? Jonathan replied, from my understanding that is a temporary thing just to kind of assist with the city cleanup, I don't see it being a long term thing because to be honest I didn't want to do it in the first place but we did do that with advice from our board, that's what they said we needed to do to help the city and county so that's what we did, I think now that the park is pretty cleared out I think we can kind of go back to starting our shower programs and our meal programs, letting them come inside and eat in our dining hall, with showers I think we are going to just go right back to doing 5 days a week for the showers and then we will go from there. Right now I haven't got the OK if people in the park are willing to engage in case management, they can utilize the meal program and the shower program because technically they are participants in CLL services, so if they are willing to do that at the moment they can utilize those things, just some are not willing to do that. Christina said okay because I just had a lot of concerns when I heard that because first, hygiene is such an essential way to keep infections down I know that even with shower access people have significant soft tissue infections which again then clogs our emergency departments and also puts people at risk for sepsis and other really intense infectious diseases, and then also with the nutrition that's a significant factor, for example psychosis, if people don't have proper nutrition or hydration they're much more likely to go into psychosis which is a huge challenge for all of our entities and for the community so I was just wondering if the board had done any research as to what the effects these could have longer term on the communities, but if it's just a short term thing then perhaps it's not as significant, but I had a lot of concerns when I heard that those two programs were stopping for the health and wellbeing of our community. Jonathan said yes, thank you, and Crossroads is offering showers as well. Jonathan asked if there were any more questions, and Kevin said, I think just wanting to have more engagement between us and CLL making sure that we are trying to get aligned and work in a partnership is really important for the commission and I know commissioner Trask has been on the sort of adhoc work group that has been meeting with the city, but we want CLL to be successful and ultimately what that means is improved outcomes for clients and the community, so just keep the conversation going and we want to work together with you on whatever we can to improve conditions for folks in town. Colleen said the most recent meeting was all of us coming together for a grant application for 30 pallet shelters, to hope that we can use that in place of encampments, as they are much safer, they are heated, you can try the option of getting a mobile unit that has showers, toilet facilities and all of that but thankfully CLL has been such a huge help in that respect, and we're hoping to continue to take advantage of that resource, but that's one of the things that we worked together to get that grant and hopefully get it submitted within the next day or 2, and that's a big deal, and the city has been partnering with us on that request too so that's just one of the things that this task force has come up with, and we are also working in conjunction with trying out more housing which is where Quixote communities comes into place as

we are the permanent supportive housing provider and we are lacking on those in the county with the exception of Veterans, so that's our plan of action is to try and add more of those units, but the team has been fantastic and we have been working really well together as a group because we each have our own lane and it's been nice. It's frustrating with the lack of funding, and sometimes critical support is needed outside of the agencies and we don't always have the access but we are opening up those lines of communication and it's really great to be in this group because I can see a lot more support that we have in the community that we may not have been aware of, so those partnerships are going to be really essential to making this work, especially when we set up the navigation center which is essentially what this will be come, so that's good news for the future of Mason. Kevin said yeah 100% I know, I'll say it here, I've said it in other groups as well, we need to do everything we can to especially focus on partnered supportive housing, and I think we are willing to do whatever it takes to support the provider who wants to come in and do a project, Todd and I have been talking about this for as long as I've been in office and it's just something that we need to prioritize more in the county and I think that the city would be interested in seeing that and I mean obviously the veterans village is a great example of that, even though it's specific to one demographic, there's a model, there's a blueprint, there's a path to getting that kind of project built in Mason County so, we want to be a partner on those projects we want to see those things happen here. Colleen said, I think we all agree on that.

Christina: Public Health, North Mason, OHRA and Mason Health BHR Department, this grant helped us increase peer workforce to cover lots of prevention, harm reduction and treatment activities, with the bulk of work staffing by Mason Health, they were able to get a Peer Navigator to help with Behavioral Health, OHRS hired 2.5 FTE to start a jail SUD program, the very first SUDP working with jail population along with 1.5 peer, the SUDP is April Byrd, and Aaron Whittenberg is a full time peer working with the jail population. We have considerable unspent funds, we received this grant when covid hit, and this originally included Peninsula Health, we switched partners about a year in and that left us with considerable unused funds. We applied for a no-cost extension, and we will be extending our activities until the end of December. Public Health and OHRS will continue, while Mason Health with this grant will end at the end of August and we will be extending basically the jail program and the harm reduction outreach program. We will also have a considerable amount of funds to purchase Narcans, we will use this to supply some partners, and we aren't supposed to supply, for example, law enforcement. We have been giving it to them, but we haven't been able to fulfill it as they are requesting, we are anticipating giving a seed fund, but after this I don't think we will be able to continue to fund MCSO and SPD Naloxone, we can give them a good supply and say start putting it in your budget, we will give them plenty of kits to start, not sure how else we will disperse Naloxone but will figure out the next steps. I have been talking to OHRS leadership about continuation, not sure what will happen with syringe exchange partnership so as of December, there is no secured person for me to do outreach. Aaron does the downtown transit center outreach table, I'm not sure what that looks like for OHRS but hopefully OHRS will not stop and will be able to continue things, whatever that looks like. Public Health applied for the very first WSDOH syndemic grant, a funding opportunity that wants to marry the syndemic emergencies we have in Washington state with overdoses, other challenges with drug user health, STI's, HIV, etc. including congenital syphilis. This is a huge funding opportunity for the state to approach these things together instead of separately. We

were awarded money that we applied for with our syringe service program, OD2A (Overdose Data 2 Action) which funds my FTE and then RCORP funding for an outreach partner, but there is no secured funding for the future. So, we were awarded funds for that, and we want to change a bit to reflect the needs of our community, we were also awarded funds for wound care and the like, we were not funded as much as hoping but it's a good thing, we will have to see what we have the abilities to do. Beau asked, have our MCO's been hit up at all in Mason county for that kind of funding work? Christina said, no, I don't think so, if you have any ideas we would love to bend your ear about that. Beau said it seems like some work you're doing might be right up their alley, it would be great to see our MCO's kick in where they can. Mark said, for MCO's, if it's not in the contract with state for Medicaid required service, they've been pretty reluctant to shelling any money, but always open to discussion to see what's possible. That's been my experience as well as all the other ASO's said Mark. Kevin said, with Beau's point, if we had a list of demands to kind of open that conversation with managed care organizations, if we're in a position where we are allowing them to come with ideas we are probably not going to get very far. It might be worth, through strategic planning, to put heads together for some asks ranging from fairly simple to more complex where Mark and I can leverage more than we have been willing to in the past. We basically need monthly MCO's and providers in the community, they have a form where they are able to troubleshoot and when you're out in the community, you let them know if they have asks or concerns or are looking for partnership opportunities about that monthly forum. Mark said that would be welcomed on the agenda for any of those meetings.

#### **7. GOOD OF THE ORDER:**

For good of the order, Eric said he was concerned after Monday on briefing when we heard Mason County Housing Authority was going to sell 2 properties after the county gave them close to \$1 million in the last couple of years to repair said properties. I'm very concerned they're going to get bought and turned into market rate housing, that's already happened here in Shelton, I don't know if we have any authority or any muscle to make sure those units do not switch to market rate housing, just my comment, I just don't know. Kevin responded and updated that MCHA is a separate entity from the county, the county commissioners appoint members to their board, but we don't have any oversight of the operations of the authority. They're separate from us in sort of their operations and governance, I was surprised, and I think maybe everyone on the call was surprised to hear that they have sold or are in the process of selling 2 of their 4 complexes. Dan Armstrong, who is sort of the acting executive director there right now, said that as part of the sale agreements that they are to remain affordable, still bound to some of the HUD requirements attached to the property. But we don't have a functioning housing authority in Mason, and it's a huge issue and has been for a long time. We don't have enough information right now, having just learned this on Monday we don't have all details associated with those sales, so our staff is working on that. Commissioner Neatherlin serves as ex-officio member of the Housing Authority board, as Eric mentioned, we've granted them a lot of money in the past couple of years and that was one of the stipulations was that one of the county commissioners would serve as an ex-officio capacity on their board just to be involved in hearing some of those discussions, and unfortunately it sounds like Commissioner Neatherlin wasn't aware of the sales or at least one of the sales that had occurred. They may have met without



him being present there, and so we have a lot of concerns right now about, sort of the state of the Housing Authority, and we are currently trying to figure out what's what and what action we might be able to take. The tough part is that they do operate independently and they have the ability to make decisions like this, but it's really concerning and ultimately really disappointing that after the funding the county provided over the past couple of years with the intent of getting the Housing Authority functional that it doesn't seem like they've been able to do that, so, a lot of red flags but really not a lot of information beyond what I just shared that I have right now. We will keep digging in and see what I can find out, and if there's an update, we can try to provide an update into the next September meeting.

For good of the order, Jamie shared about the upcoming 7th annual Overdose Awareness event, on Thursday August 31st in Belfair. The resource event starts around 3 pm, and then Shelton event will be on Friday, September 1st at about the same time. As of this AM we have 60 confirmed resource booths, that is a lot of resources, we hope everyone can attend and we think this will be biggest event we have had so far. Kevin said that is fantastic, these are impactful events, and I really appreciate your leadership on this Jamie. The group had nothing more for good of the order.

8. **CLOSURE-** Meeting adjourned at 10:01 AM.
9. **NEXT MEETING—** September 27<sup>th</sup>, 2023