



KING COUNTY

1200 King County Courthouse
516 Third Avenue
Seattle, WA 98104

Signature Report

Motion 15639

Proposed No. 2020-0193.1

Sponsors Balducci

1 A MOTION approving a report related to capital project
2 1138678 DES LTLF RENTON RED LION in compliance
3 with the 2019-2020 Biennial Budget Ordinance, Ordinance
4 18835, Section 126, as amended by Ordinance 19103,
5 Section 19, Proviso P4.

6 WHEREAS, the 2019-2020 Biennial Budget Ordinance, Ordinance 18835,
7 Section 126, as amended by Ordinance 19103, Section 19, Proviso P4, requires the
8 executive to transmit a report related to capital project 1138678 DES LTLF RENTON
9 RED LION, contingent on the executive's decision to extend the term of the April 2,
10 2020, License Agreement between King County and Renton Hotel Investor, LLC ("the
11 license agreement") as provided in section 3 of the license agreement or enter into a new
12 agreement to occupy the Renton Red Lion motel located on South Grady Way beyond the
13 current license agreement term, and

14 WHEREAS, the 2019-2020 Biennial Budget Ordinance, Ordinance 18835,
15 Section 126, as amended by Ordinance 19103, Section 19, Proviso P4, requires the
16 executive to file the report and motion required by this proviso at least thirty days before
17 entering into any extension of the license agreement's term or entering into a new
18 agreement to occupy the Renton Red Lion motel located on South Grady Way, and

19 WHEREAS, 2019-2020 Biennial Budget Ordinance, Ordinance 18835, Section

Motion 15639

20 126, as amended by Ordinance 19103, Section 19, Proviso P4, provides that \$1,200,000
21 shall not be expended or encumbered until the executive transmits the report and a
22 motion that approves the report is passed by the council;

23 NOW, THEREFORE, BE IT MOVED by the Council of King County:

24 The report related to capital project 1138678 DES LTLF RENTON RED LION,
25 included as Attachment A to this motion, is hereby approved in accordance with the

Motion 15639

26 2019-2020 Biennial Budget Ordinance, Ordinance 18835, Section 126, as amended by
27 Ordinance 19103, Section 19, Proviso P4.
28

Motion 15639 was introduced on 5/26/2020 and passed by the Metropolitan King County Council on 5/26/2020, by the following vote:

Yes: 9 - Ms. Balducci, Mr. Dembowski, Mr. Dunn, Ms. Kohl-Welles, Ms. Lambert, Mr. McDermott, Mr. Upthegrove, Mr. von Reichbauer and Mr. Zahilay

KING COUNTY COUNCIL
KING COUNTY, WASHINGTON

DocuSigned by:
Claudia Balducci
F6830816F1C4427...

Claudia Balducci, Chair

ATTEST:

DocuSigned by:
Melani Pedroza
8DE1BB375AD3422...

Melani Pedroza, Clerk of the Council

Attachments: A. Report Related to Capital Project 1138678 DES LTLF Renton Red Lion

Proviso Response

May 21, 2020



Contents

I. PROVISIO TEXT	3
II. BACKGROUND	4
Quick, Collective Action to Slow the Spread of COVID-19 in King County.....	4
Three Strategies to Slow the Spread for People without a Home.....	4
<i>Strategy 1: Reinforcing the Existing Shelter System to Help People Avoid Becoming Ill.....</i>	5
<i>Strategy 2: Creating and Operating an Isolation & Quarantine System.....</i>	7
<i>Strategy Three: Creating and Operating Short-Term, Emergency Capacity to Prevent Overwhelming Hospitals during Periods of Peak Illness.....</i>	7
III. REPORT REQUIREMENTS.....	10
Requirement 1: rationale for choosing the Renton hotel as a county COVID-19 shelter deintensification site.....	10
Equity and Social Justice Review.....	11
Assessing the Effectiveness of the Renton Hotel.....	11
Working With and Supporting the City of Renton	12
Requirement two: rationale for extension of the license agreements term or new agreement to occupy the Renton Red Lion motel beyond the current term.....	13
IV. CONCLUSION	14

I. PROVISO TEXT

Ordinance 19103, Section 19, Facilities Management Internal Service, Proviso P4, amending the 2019-20 Biennial Budget Ordinance 18835, Section 126:¹

Contingent on the executive's decision to extend the term of the April 2, 2020 License Agreement between King County and Renton Hotel Investor, LLC ("the license agreement") as provided in section 3 of the license agreement or enter into a new agreement to occupy the Renton Red Lion motel located on South Grady Way beyond the current license agreement term, of this appropriation, \$1,200,000 shall not be expended or encumbered until the executive transmits a report related to capital project 1138678, DES LTLF RENTON RED LION and a motion that approves the report, and a motion approving the report is passed by the council. The motion should reference the subject matter, the proviso's ordinance, ordinance section and proviso number in both the title and body of the motion.

The report shall include, but not be limited to the: (1) rationale for choosing the Renton Red Lion motel located on South Grady Way as a county COVID-19 isolation and quarantine, assessment and recovery and shelter deintensification site; and (2) rationale for any extension of the license agreement's term or entering into a new agreement to occupy the Renton Red Lion motel located on South Grady Way to extend beyond the current term to be used as a county COVID-19 isolation and quarantine, assessment and recovery and shelter deintensification site.

The executive must file the report and motion required by this proviso at least thirty days before entering into any extension of the license agreement's term or entering into a new agreement to occupy the Renton Red Lion motel located on South Grady Way, in the form of an electronic copy with the clerk of the council, who shall retain the original and provide an electronic copy to all councilmembers, the council chief of staff and the lead staff for the budget and fiscal management committee and the committee of the whole, or their successors.

¹ [Ordinance 19103](#), Section 18, Facilities Management Internal Service, Proviso P4, amending 2019-2020 Biennial Budget Ordinance 18835, Section 126.

II. BACKGROUND

Quick, Collective Action to Slow the Spread of COVID-19 in King County

At least 90,340 people in the United States have died from COVID-19 as of May 19th, 2020.² The national death toll so far has accrued in less than three months since the first reported death on February 28, 2020. That first death occurred in King County.³ There are few precedents in recent history for such sudden and large-scale lethality. For Example, the Vietnam War took nearly two decades to claim 58,220 American lives.⁴ COVID-19 is on-track to double that figure in the first half of 2020.⁵ Other diseases cause large numbers of death in the United States, but recent analysis in the Journal of the American Medical Association finds that COVID-19 is at least ten times deadlier than the seasonal flu.⁶ Furthermore, the World Health Organization states that there are currently no drugs licensed for the treatment or prevention of COVID-19.⁷

COVID-19 poses a sudden and significant threat to livelihoods in addition to lives. At the time of this report's writing, the national unemployment rate exceeds 14 percent⁸, a rate not seen in the United States since the 1930s.⁹ For comparison, unemployment peaked near 10 percent during the great recession that started in 2008.¹⁰

Without knowing how the novel corona virus would affect local communities or the nation—and acting on public health guidance and observation of other countries' experiences with COVID-19—the King County Executive proclaimed a County Emergency on March 1, 2020. The County Council affirmed the proclamation on March 3, 2020. Since then, the collective action of King County's residents, institutions, businesses, and governments has slowed the spread of COVID-19 in King County and preserved local hospital capacity for those who need it. While all success is fragile and reversible against a novel virus for which there is no vaccine or proven treatment, King County has so far avoided higher rates of death seen in some other communities and regions in the United States. As of May 20, 2020, 530 King County residents' deaths are attributed to COVID-19.¹¹

Three Strategies to Slow the Spread for People without a Home

Early observations of the novel corona virus indicated—and subsequent observations support—that some factors strongly correlate with an individual's risk of contracting and dying from COVID-

² <https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html>

³ Recent research indicates that COVID-19 may have circulated and caused at least two deaths in California earlier than February 28, 2020. <https://www.nytimes.com/2020/04/22/us/coronavirus-first-united-states-death.html>

⁴ <https://www.archives.gov/research/military/vietnam-war/casualty-statistics>

⁵ https://www.cdc.gov/coronavirus/2019-ncov/covid-data/forecasting-us.html#anchor_1587397564229

⁶ Faust JS, del Rio C. Assessment of Deaths From COVID-19 and From Seasonal Influenza. *JAMA Intern Med*. Published online May 14, 2020. doi:10.1001/jamainternmed.2020.2306 [Link to JAMA website here.](#)

⁷ <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters>

⁸ <https://data.bls.gov/timeseries/LNS14000000>

⁹ <https://www.rand.org/blog/2020/05/is-the-unemployment-rate-now-higher-than-it-was-in.html>

¹⁰ https://www.bls.gov/spotlight/2012/recession/pdf/recession_bls_spotlight.pdf

¹¹ Public Health—Seattle & King County maintains COVID-19 Data Dashboards online which can be found [here](#).

19.¹² These factors include age, race and ethnicity¹³, the presence of certain underlying health conditions, and the ability and resources to implement public health guidance about social distancing and hygiene.¹⁴ Data further indicate that persons in whom multiple risk factors intersect are particularly vulnerable.

Older adults living in nursing homes and other long-term care facilities were the earliest group to demonstrate particular vulnerability.¹⁵ Analysis also indicated that other persons living in congregate settings such as shelters were likely vulnerable to rapid spread of the disease. This is not only because congregate living conditions enable disease transmission, but also because persons living in shelters are disproportionately persons of color, older than average, experience higher rates of underlying health conditions, and are by definition without a safe place in which to observe social distancing and best practices of hygiene.¹⁶

King County is focusing on three strategies to slow the spread of COVID-19 amongst the entire community. These strategies are driven by the public health principle that all persons' health is interdependent and the recognition that persons experiencing homelessness and others who cannot not safely isolate or quarantine in a home of their own would be among the most affected by COVID-19, while having the least power to prevent or control the disease's effects.¹⁷ The strategies are:

Strategy 1: Reinforcing the Existing Shelter System to Help People Avoid Becoming Ill

This essential strategy, recommended by the Center for Disease Control (CDC), emphasizes informing and equipping service providers in congregate settings to enforce public health guidance on social distancing, hygiene, and isolation within existing facilities, to help prevent illness rather than solely mitigating it.^{18 19}

This strategy's early efforts included increasing space between shelter beds to at least six feet; issuing individual hotel vouchers for exceptionally vulnerable shelter residents; and otherwise "deintensifying" congregate shelters by opening new and temporary congregate spaces. At the outset, King County and the City of Seattle undertook action in coordination to provide immediate reinforcement for the shelter system. More recently, this strategy has also included moving entire congregate shelters into leased

¹² <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/assessing-risk-factors.html>

¹³ <https://publichealthinsider.com/2020/05/01/new-analysis-shows-pronounced-racial-inequities-among-covid-19-cases-hospitalizations-and-deaths/>

¹⁴ <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/homelessness.html>

¹⁵ <https://publichealthinsider.com/2020/05/13/protecting-residents-in-long-term-care-facilities-progress-and-challenges/>

¹⁶ Demographics of persons experiencing homelessness in King County are available at <http://allhomekc.org/data-overview/>.

¹⁷ Additional information, pictures, and videos describing COVID-19 emergency response activities is available at <https://www.kingcounty.gov/depts/community-human-services/COVID/shelter-response.aspx>.

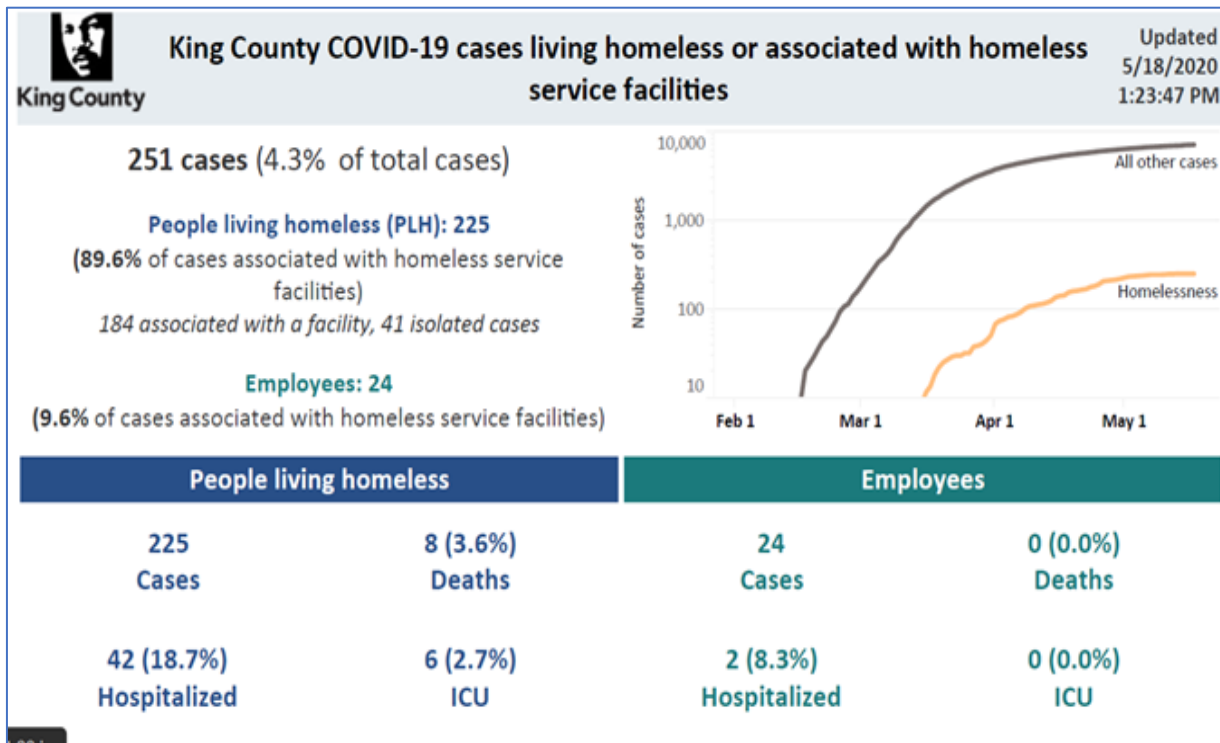
¹⁸ <https://www.cdc.gov/mmwr/volumes/69/wr/mm6917e2.htm>

¹⁹ <https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html>

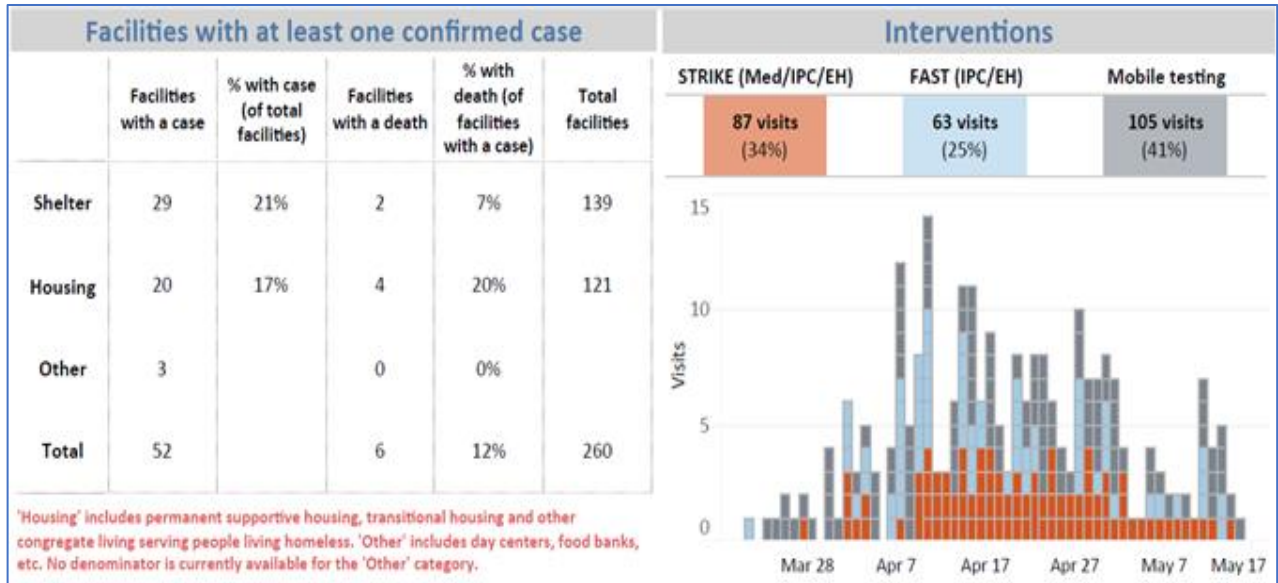
hotels in Bellevue, Renton, SeaTac, and Seattle to decrease the risk of disease transmission and prevent as many vulnerable persons as possible from becoming ill in the first place.²⁰

Early data, outlined below, indicate that efforts to prevent wide-spread illness within the unhoused population are beginning to work. Every individual death is a tragedy, and efforts to-date appear to have made fragile progress in slowing the spread of COVID-19 and limiting more severe losses of life.

The data in the following graphs and tables summarize the effects of COVID-19 on King County’s overall unhoused population. While the focus of this report is on interventions to promote the health of unhoused persons living in congregate shelters, the overview in the graphs below include data on persons experiencing homelessness who live unsheltered, in congregate shelters, or who live in certain supportive housing settings.²¹



²⁰ The use of one such leased hotel in Renton to deintensify a shelter and prevent illness in its residents is the focus of this report.



Strike Team: The Strike Team provides support to Public Health’s Communicable Disease and Epidemiology team in case investigation of a person living homeless with a lab confirmed COVID-19 positive case. The team, which includes medical personnel, partners with homeless service agencies and programs where a person with a confirmed case of COVID-19 had visited or utilized services during their infectious period.

Homeless Health Field Assessment, Support and Technical (FAST) Teams: FAST teams provide onsite assessment, support and technical assistance to homeless and supportive housing programs responding to COVID-19, including meeting sanitation and infection control guidelines, supply needs, and procedures for handling suspected cases. Teams may include a nurse, behavioral health specialist, environmental health specialist and/or an outreach worker. The team is providing proactive preventative supports to providers.

Strategy 2: Creating and Operating an Isolation & Quarantine System

This strategy centers on quickly identifying persons who are or who may be ill and providing them with a safe and supported place in which to isolate if they have a COVID-19 diagnosis or quarantine if they suspect they have COVID-19. King County operates isolation and quarantine (I/Q) facilities in Seattle, Issaquah, and Kent. King County enabled Harborview Medical Center to create a temporary I/Q facility in the county-operated Harborview Hall Shelter by temporarily moving the entire shelter community from Harborview Hall to a temporary shelter in a Seattle Housing Authority-owned records warehouse in Seattle. An additional I/Q facility is ready in White Center, but conditions have not yet warranted that facility’s use. As of May 20, 2020, 360 King County residents have stayed in King County I/Q facilities, protecting the county’s collective health by providing a safe alternative so that persons are not living and sleeping while contagious or possibly contagious in shelters or homes with other vulnerable persons.

Strategy Three: Creating and Operating Short-Term, Emergency Capacity to Prevent Overwhelming Hospitals during Periods of Peak Illness

This strategy creates and operates large-scale emergency capacity to test and provide care in facilities known as assessment and recovery centers (AC/RC). Three first of their kind AC/RC facilities were

constructed by King County in Shoreline, Bellevue (“Eastgate”), and Seattle (“SoDo”).²² The County developed this strategy given the documented experiences of other countries such as Italy²³, since repeated within the United States in other regions like New York City²⁴, in which a surge in COVID-19 illness overwhelms hospital capacity. To date, only the Shoreline AC/RC has seen patients, although the Eastgate AC/RC is now fully constructed, and the SoDo AC/RC is nearly complete.

Cumulatively, the strategies described in this report have to date produced twenty-three new (by construction or use) facilities deployed across King County as outlined in the following table and map.

Regional Distribution of 23 COVID-19 Emergency Response Facilities			
City	Reinforce/Deintensify Existing Shelter System	Isolation and Quarantine	Assessment & Recovery
Seattle	<ul style="list-style-type: none"> • KC Airport Expansion Shelter • Interbay Shelter (originally a recovery center) • Lower Queen Anne Hotel • South Lake Union Hotel • Fir Street Expansion Shelter • Eagle Village mini-expansion • Harbor Island (not in use) • City of Seattle-Operated Shelter Expansions: <ul style="list-style-type: none"> ○ Garfield ○ Miller ○ Exhibition ○ Fisher ○ Lake Union ○ Bitter Lake 	<ul style="list-style-type: none"> • Aurora I/Q • Harborview Hall I/Q 	SoDo AC/RC (not currently in use)
Bellevue	Bellevue Women’s Hotel		Eastgate AC/RC (not currently in use)
Shoreline			Shoreline AC/RC
Issaquah		Issaquah I/Q	
Kent		Kent I/Q	
Renton	Renton Hotel		
SeaTac	SeaTac Hotel		
White Center (unincorporated)		Top Hat I/Q (not currently in use)	
Individual hotel vouchers are also deployed in significant numbers in Redmond and Seattle as private hotel room rentals, although not parts of formal sites.			

²² This strategy also included the creation of an additional Recovery Center in the Interbay neighborhood of Seattle. That facility, now complete, has since been converted to use as a deintensification facility.

²³ <https://www.nytimes.com/2020/03/12/world/europe/12italy-coronavirus-health-care.html>

²⁴ <https://www.nytimes.com/2020/03/25/nyregion/nyc-coronavirus-hospitals.html>



III. REPORT REQUIREMENTS

Requirement 1: rationale for choosing the Renton hotel as a County COVID-19 shelter deintensification site

At this time, given the lack of a vaccine, the most effective strategy to slow the spread of COVID-19 is to keep people from contracting it in the first place. As described above, the earliest tactics to keep people from becoming ill involved seeking larger congregate spaces in which shelter residents could establish at least six feet of distance between beds.

One such effort was the use of the King County Airport Arrivals Hall to deintensify the St. Martin de Porres shelter for men over age 55. Early operations of the KC Airport shelter demonstrated that rapid spread of the virus remains possible even in congregate settings with six feet of distance between beds. Although detailed and conclusive epidemiological study of the KC Airport shelter is not available, King County Public Health staff and shelter provider staff concluded after observing initial operations that the combination of vulnerable residents and a congregate setting—even though spread further apart—still left residents at risk of rapid transmission among a particularly vulnerable population.

In addition to learning from the operations of the KC Airport shelter, King County staff and shelter operators continued to identify shelters where the risk of rapid disease spread was elevated because of typical client characteristics, the shelter’s physical conditions, or the provider’s access to sufficient staffing. Building off of initial successes of individual hotel vouchers for extremely vulnerable shelter residents²⁵, staff from Public Health-Seattle and King County (PHSKC), the Department of Community and Human Services (DCHS), and the Facilities Management Division (FMD) collaborated to identify high-risk congregate shelters and available hotels into which the existing shelter operators could transition shelter residents. Other regions have adopted similar approaches to use high-vacancy hotels to provide safer, single room settings as alternatives to less safe congregate shelters.²⁶ The purpose of providing single-room settings like hotels with a bathroom in each room²⁷ is to approximate for vulnerable shelter residents the type of individual housing settings that have begun to prove effective (i.e. “flatten the curve”) throughout King County for people with the resources to observe state and local *Stay Home-Stay Healthy* orders in a home of their own.

There are now five hotels across the county being used to provide single-room settings to residents of high-risk shelters. The initial round of acquiring deintensification hotel space focused on increasing the safety and health for three high-risk shelter resident groups by identifying hotels that were willing to enter in lease agreements with King County to house shelter residents for sufficient duration and at acceptable cost. The three initial high-risk shelter groupings were DESC’s Main and Queen Anne congregate shelters, Catholic Community Services’ church-based congregate shelters in Renton, Kent and Federal Way, and The Sophia Way women’s shelter based in Bellevue.

The Sophia Way negotiated its own lease with a hotel of sufficient size in Bellevue. King County FMD staff explored possible hotel leases for DESC and CCS, ultimately identifying willing and appropriate hotels in SeaTac and Renton. At the time, FMD was unable to identify other cost and size-appropriate

²⁵ Described in Background section under Strategy 1.

²⁶ <https://www.citylab.com/equity/2020/04/homeless-shelter-coronavirus-testing-hotel-rooms-healthcare/610000/>

²⁷ <https://files.hudexchange.info/resources/documents/Non-Congregate-Approaches-to-Sheltering-for-COVID-19-Homeless-Response.pdf>

hotels in other locations, although there was a second option in SeaTac. After considering shelter population size against the size of the available hotels, King County staff established leases and service provider agreements for a 200-room hotel in Renton to increase safety and health for residents from DESC's Main and Queen Anne congregate shelters and for a 100-room hotel in SeaTac to increase safety and health for residents of Catholic Community Service's church-based congregate shelters in Renton, Kent, and Federal Way. In a subsequent round of hotel leases to increase safety and health for residents of high-risk congregate shelters, King County staff secured lease agreements for hotels in Seattle's Lower Queen Anne and South Lake Union neighborhoods for use in deintensifying the remainder of Catholic Community Service's St. Martin de Porres Shelter and the Salvation Army's congregate shelters in King County's Administration Building and King County's overnight shelter at 4th and Jefferson in Seattle. The lease of the hotel in Renton is the focus of this report.

Equity and Social Justice Review

King County's Office of Equity and Social Justice partnered with [Headwater People](#) to create an [Equity Impact Awareness Tool](#) to guide and support King County Facilities and Maintenance Division in reviewing and recommending potential sites for COVID-19 quarantine and recovery.

The Equity Impact Awareness Tool aims to identify communities that are, due to historical inequities and underinvestment, extremely vulnerable to prolonged hardship with less resources to recover in an economic crisis. These are not the only considerations in reviewing sites, however these questions highlight structural risks in the county by race, economics, and age. The intention of this tool is to ensure King County decision makers are aware of the potential for further negative impact to the county's most vulnerable low income communities and/or communities of color. It is important to note that this Equity Impact Awareness Tool was developed to assist King County during the COVID-19 crisis, where rapid responses are required. This tool does not replace Equity Impact assessment tools that include robust, inclusive community engagement processes.

As shown in the Equity Impact Awareness Tool, the highest possible total for each area throughout the county is 8 points, indicating areas with the highest risk for prolonged impact with the least amount of resources to recover. The city of Renton scores on the lower end of compound risk score for prolonged impact at 2 of 8, with the least amount of resources to recover score of 3 of 8.

The equity review, using the Equity Tool, supports the use of the Renton hotel as one of 23 COVID-19 emergency response facilities across King County to serve county residents experiencing homelessness, with subject matter experts recognizing homeless individuals as among the most severely and persistently marginalized members of the King County community.

Assessing the Effectiveness of the Renton Hotel

Within the context of an unprecedented public health emergency in which the nation and world have seen hundreds of thousands of persons perish and millions of persons become ill, the movement of county residents from high-risk congregate shelters to the hotel in Renton has succeeded so far in the community-wide goal to slow the spread of COVID-19. There have been approximately 200 COVID-19 tests administered at the hotel in Renton; to date there has not been a single positive test among the hotel residents, while there have been upward of 184 COVID cases associated with homeless service facilities.

In addition to success in slowing the spread of COVID-19, protecting the health of the shelter's residents as well as the broader King County community, DESC staff report significant transformations in shelter residents. DESC, a licensed provider of Medicaid-funded behavioral health services, reports that the need for behavioral health interventions are decreased by nearly half as compared to the Morrison facility. Similarly, emergency services calls are decreased by more than half as compared to the Morrison facility. Shelter staff report that client access to bathrooms, beds, private space, and the dignity attendant to those basic resources, has in several cases led to physical transformations of some clients, to the extent where DESC staff have not physically recognized their clients despite long-standing service relationships. While these initial reports are anecdotal over what has been only weeks of initial operations, the reports are promising indicators of success for a group of shelter clients that have for years been difficult to serve well in the DESC Main Shelter on 3rd Avenue, across from the King County Courthouse.

Working With and Supporting the City of Renton

Renton is an essential partner, not only in the regional fight to slow the spread of COVID-19, but also in the regional effort to combat homelessness. As evidence of this strong partnership, a Renton City Councilmember occupies one of the Governing Committee seats for the newly formed King County Regional Homelessness Authority (KCRHA). The KCRHA's success in combatting an, until now, intractable regional problem will depend upon the strong partnerships and shared efforts that the COVID-19 emergency response to allows King County and Renton to reinforce.

While the hotel in Renton has to date succeeded in meeting its goal of promoting public health by reducing the risk to vulnerable shelter residents who do not otherwise have a home in which to follow public health guidance, the County recognizes that the hotel has also had impacts for the City of Renton. Among the actions taken by the County to support Renton include:

- Granting the city's request for additional support for the Renton Ecumenical Association of Churches (REACH), a local homelessness services provider, with DCHS providing up to \$47,000 in additional funding for REACH operations, staff, and programming.
- Engaging in ongoing work sessions with DESC and leaders from Renton's City Manager's office, Fire and Police services, and Human Services office to collaboratively address operational matters. Among the operational improvement topics that this work group has taken on are a goal to reduce unnecessary calls to Renton's emergency response system, to supplement onsite security if additional security is necessary, to refine protocols for emergency response to the facility to ensure safety for responders, shelter guests, and staff, and to routinize communications protocols between shelter staff, local emergency responders, and other local stakeholders.
- Negotiating a Memorandum of Understanding to memorialize agreements about the current and future use of the Renton hotel.

In addition, King County authorized \$500,000 in mitigation funds for cities to recover documented costs related to the County's isolation and quarantine sites, assessment and recovery sites and shelter deintensification sites.

Requirement two: rationale for extension of the license agreements term or new agreement to occupy the Renton Red Lion motel beyond the current term

As King County, DESC, and the City of Renton continue to improve operations at the hotel, identify and mitigate impacts to the community, and strengthen collaboration and partnership around both the COVID-19 emergency response and the longer-term homelessness emergency response, the underlying context and conditions of the COVID-19 public health Emergency remain unchanged. Federal, State, and County declarations and proclamations of emergency remain in effect. Numbers of persons who are ill and who die from COVID-19 continue to increase, although the slower pace at which local numbers are growing is due to the collective “stay home, stay healthy” efforts of King County residents, institutions, businesses, and governments to flatten the curve.

The underlying medical facts are also unchanged: 1) persons experiencing homelessness, who disproportionately exhibit multiple risk factors for COVID-19 illness, remain particularly vulnerable to becoming ill with the virus; 2) there is not yet a vaccine to prevent transmission; and, 3) widespread natural immunity nor a cure for the disease have been identified. Some other regions of the world and the nation where communities have relaxed public health restrictions have experienced resurgences of disease spread, although it is not within the scope or competence of this analysis to attempt to characterize or evaluate whether, when, or under what conditions a community should alter public health guidance or conditions. The risk factors of the congregate shelters that previously sheltered the hotel in Renton’s residents also remain unchanged.

While the set of conditions of disease lethality, lack of effective vaccination or cure, and high risk of transmission in congregate settings remains intact, the promising signs of supporting shelter residents and staff are growing. DESC staff report that shelter residents who have struggled for years with even basic hygiene at the former DESC Main shelter on Seattle’s Third Avenue across the King County Courthouse are able to regularly bathe and sleep. Two shelter residents have gained employment since stabilizing at the Hotel. DESC reports that several residents have begun jogging, a positive indicator of wellness and self-support.

Although use of emergency services in Renton has increased since before the use of the hotel in Renton as a shelter, the overall use of emergency services to serve the very same shelter population has reduced significantly since the move. DCHS, FMD, and PHSKC remain committed to collaborating with DESC and the City of Renton to drive down impacts to Renton and to mitigating those impacts as possible where they do occur.

In summary, the rationale for continuing use of the hotel in Renton is as follows:

- **The unprecedented public health emergency remains in effect**, posing a continued and immediate threat to the health and life of persons who are particularly vulnerable to the virus;
- **Congregate shelters remain higher risk settings** than those settings with individual rooms that afford persons the ability to implement public health guidance of “stay home, slow the spread”;²⁸
- **The County does not currently have access to an equally safe or better alternative location** in which to serve the current shelter residents during this public health emergency period;

²⁸ <https://www.kingcounty.gov/depts/health/covid-19.aspx>

- **The hotel is to date succeeding beyond initial expectations at not only slowing the spread of COVID-19** but at preventing its detectable introduction into the resident population at the hotel;
- **King County will continue to actively support and partner with DESC and the City of Renton to identify, reduce, and mitigate effects** of the shelter upon the surrounding community while preserving the health of shelter residents who will otherwise be at increased risk of illness or death; and
- **The entire region’s individual, social, and public health—and the region’s ability to restore economic and social activity—depends upon the region’s collective capacity to keep slowing the spread of COVID-19**, to prevent wherever possible the loss of human life and health, and to strengthen partnerships and shared purpose until the underlying medical realities of the disease change such that the threat to individual and collective health and our shared economy is substantially reduced.

IV. CONCLUSION

COVID-19 continues to present a public health emergency whose sudden appearance, swift impact, and severe lethality are without recent precedent. Unless fatality trends change quickly, COVID-19 will not only soon double the more than 58,000 American deaths from the Vietnam War, but will soon approach the more than 128,000 American deaths from the Korean War. In the severity of its economic impact, the most recent comparison for current levels of unemployment is the Great Depression nearly a century ago. COVID-19’s impacts to health, life, and enterprise have accrued in less than three months since the first identified American death in late February 2020. In the face of COVID-19’s swift toll, King County’s residents, institutions, businesses and governments have taken bold action to “flatten the curve,” but success to date is fragile and reversible.

King County has undertaken an intensive effort to identify and mitigate the risks to county residents living in congregate settings, including shelter. This effort reflects an equity-based analysis, finding that few communities in King County exhibit a more pronounced intersection of racial-ethnic disproportionality, lack of access to basic resources, inability to implement public health guidance, stigmatization of their existence, and vulnerability to COVID-19 than the county residents who are unhoused. Because the County’s unhoused residents are among the most affected by policy decisions about whether, where, and how to support them in slowing the spread of COVID-19, DCHS has focused on identifying solutions for persons experiencing homelessness—particularly those living in congregate shelters—during the emergency response to the COVID-19 pandemic.

It is also true that each of the County’s 23 COVID-19 emergency response facilities impacts the communities in which they are situated. In Renton, DCHS and FMD are committed to partnering with DESC, the City of Renton, and the surrounding community to identify impacts and to support solutions to prevent, reduce, and mitigate those impacts. These ongoing efforts will supplement and build upon initial steps that DCHS has already undertaken to increase fiscal support for Renton’s REACH organization and initial efforts to reduce effects upon Renton’s emergency response system. Renton is an essential partner in the region’s effective response to COVID-19 and in the region’s response to the longer-standing challenge of reducing homelessness.

While the emergency conditions and equity analysis supporting the initial decision to locate one of the County’s twenty-three COVID-19 emergency response facilities at the hotel in Renton remain intact, King County is eager to identify longer-term solutions that better meet the needs of all

County residents. Working in partnership with DESC, the City of Renton, the local community and the broader region, PHSKC, DCHS, and FMD will continue to seek and assess opportunities to provide safe housing in sustainable, long-term locations that provide for residents' safety during and after the current COVID-19 emergency. King County also recognizes that while the COVID-19 emergency proclamation provides a temporary regime for siting emergency facilities, any long-term solution that will be durable beyond a period of emergency must respect and work within all local regulatory, zoning, and permitting systems.

Additionally, King County commits to continuing consistent engagement with the City of Renton to finalize and execute a Memorandum of Understanding and to collaborate on long-term planning to address future potential use of the hotel in Renton, as well as the broader issue of homelessness services in Renton. These activities will include:

- Regular meetings regarding emergent business/emergency response concerns to ensure continued improvement of hotel operations and reductions of community impacts,
- Ongoing consideration of appropriate funding for REACH based on monitoring data to understand changes in Renton's unhoused population, and
- Ongoing consideration and refinement of equity-based decision making to ensure King County and Renton are identifying and centering the impacts, concerns, and solutions for the persons most impacted by future action, inaction, and changes in operations for the deintensification hotel in Renton.