



DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
 ENVIRONMENTAL COORDINATOR
 450 110th AVENUE NE., P.O. BOX 90012
 BELLEVUE, WA 98009-9012

DETERMINATION OF NON-SIGNIFICANCE

PROPONENT: Church of the Resurrection

LOCATION OF PROPOSAL: 15220 Main Street

DESCRIPTION OF PROPOSAL: To provide temporary housing for members of Tent City 4.

FILE NUMBER: LZ-07-108058

The Environmental Coordinator of the City of Bellevue has determined that this proposal does not have a probable significant adverse impact upon the environment. An Environmental Impact Statement (EIS) is not required under RCW 43.21C.030(2)(C). This decision was made after the Bellevue Environmental Coordinator reviewed the completed environmental checklist and information filed with the Land Use Division of the Department of Planning & Community Development. This information is available to the public on request.

- There is no comment period for this DNS. There is a 14-day appeal period. Only persons who submitted written comments before the DNS was issued may appeal the decision. A written appeal must be filed in the City Clerk's office by 5:00 p.m. on _____.
- This DNS is issued after using the optional DNS process in WAC 197-11-355. There is no further comment period on the DNS. There is a 21-day appeal period to end on **May 17, 2007**. This decision may be appealed to Superior Court by filing a land use petition meeting the requirements set forth in Chapter 36.70C RCW. See LUC 20.35.070.
- This DNS is issued under WAC 197-11-340(2) and is subject to a 14-day comment period from the date below. Comments must be submitted by 5 p.m. on _____. This DNS is also subject to appeal. A written appeal must be filed in the City Clerk's Office by 5 p.m. on _____.

This DNS may be withdrawn at any time if the proposal is modified so that it is likely to have significant adverse environmental impacts; if there is significant new information indicating, or on, a proposals probable significant adverse environmental impacts (unless a non-exempt license has been issued if the proposal is a private project); or if the DNS was procured by misrepresentation or lack of material disclosure.

Carole V. Hurler
 Environmental Coordinator

4/30/07
 Date

OTHERS TO RECEIVE THIS DOCUMENT:
 State Department of Fish and Wildlife
 State Department of Ecology,
 Army Corps of Engineers
 Attorney General
 Muckleshoot Indian Tribe



City of Bellevue
Department of Planning and Community Development
Land Use Division Staff Report

Proposal Name: **Tent City 4 (TC4)**

Proposal Address: 15220 Main Street

Proposal Description: To provide a temporary encampment for members of TC4.

File Number: **LZ-07-108058**

Applicant: The Episcopal Church of the Resurrection

Decisions Included: Temporary Encampment Permit, Process V

Planner: Antoinette Pratt, Senior Planner, (425) 452-5374

State Environmental Policy Act
Threshold Determination: **Determination of Non-Significance (DNS)**

Carol V. Helland

Carol V. Helland, Environmental Coordinator

Director's Decision: **Approval with Conditions**

Matthew A. Terry

Matthew A. Terry, Director
Department of Planning and Community Development

Application Date: March 6, 2007
Public Notice(600 feet): March 22, 2007
Public Meeting: April 2, 2007
Minimum Comment Period: April 5, 2007
Bulletin Publication Date: **May 3, 2007**
Appeal Deadline: **This decision may be appealed to Superior Court by filing a land use petition meeting the requirements set forth in Chapter 36.70C RCW. See LUC 20.35.070.**

I. Request and Project Description

The Episcopal Church of the Resurrection (ECR) requests approval to locate a temporary encampment at 15220 Main Street for 90 days. An invitation to locate the encampment has been extended by the applicant with an installation date of May 19, 2007.

The Bellevue City Council approved Ordinance No. 5615 on July 25, 2005, which established decision criteria for Temporary Encampments within the City of Bellevue. In January, 2006 a Consent Decree was entered in federal court resolving certain challenges raised to the validity of the Ordinance. The Consent Decree commits the City to apply certain interpretations of the ordinance to all future temporary encampment applications, including the proposal by ECR. See Para. 3.2 & 3.3 of Consent Decree.

ECR applied for a permit on March 6, 2007. Because ECR is a religious institution, it is permitted to host Tent City 4 (TC4) as an accommodation of religious exercise pursuant to Land Use Code (LUC) 20.30U.120. Reverend Dr. Peter Kalunian of the ECR has included a theological justification in support of the application. See Attachment A for a review of these religious precepts.

II. History of Tent City

TC4 is a temporary encampment that has been located in Eastside cities and King County since May 17, 2004. It is modeled after Tent City 3 (TC3), which began operation in Seattle on March 31, 2000. TC4 is sponsored and supported by two non-profit organizations, SHARE (Seattle Housing and Resource Effort) and WHEEL (Women's Housing Equality and Enhancement League), which also operate more traditional homeless shelters in Seattle. SHARE is a non-profit 501(c)(3) corporation.

TC4's day-to-day operations are managed by its residents. TC4 provides tents for up to 100 residents, but its average occupancy is approximately 60 to 70 people, including single adults and couples; children are not housed at TC4 except for brief emergency periods. The residents monitor entry into the camp, and they attempt to deny entry to anyone who is discovered to be on the sex offender database or has an outstanding arrest warrant. TC4 has operated in Bothell, unincorporated King County, Woodinville and Kirkland. Currently, TC4 is located at St. Jude Parish in Redmond.

The stated purpose of TC4 is to help homeless individuals stay together in a communal setting that provides safety and shelter rather than being on their own in the elements. The encampment also allows its participants to store their belongings while away from camp at work and appointments.

TC3 and TC4 are both designed to be democratic and self managed. Encampment residents contribute to work necessary shifts for camp maintenance and functioning. The residents hold weekly meetings to elect leaders, who are tasked with camp operations and enforcement of encampment rules and a Code of Conduct, requiring among other things sobriety, non-violence and cooperation. See Attachment B for the Code of Conduct. Encampment rules require that those violating the Code be held accountable.

III. Site Context and Description

The Episcopal Church of the Resurrection is located north of Main Street between 151st Place NE and 156th Avenue NE on one parcel. Total site size is 4.65 acres. There is an existing church on this site that was constructed in 1963. ECR then applied for a Planned Unit Development permit

(PFPUD-92-9674) to construct a 20 unit Planned Unit Development for low-income housing for adults 55 years or older with median income less than 50 percent or less of the King County Median Income. The 20 affordable units were constructed in 1997 within six duplex style units.

The surrounding properties adjacent to the ECR are single-family along all property boundaries with exception of the NW corner of the site. The Bellevue School District operates Bellewood School which is within 600 feet of the ECR. Bellewood is a swing school for the District during redevelopment of a school facility. At this time, the students from Woodridge Elementary school are attending Bellewood until the Woodridge construction is completed in August 2007.

The church facility is composed of two structures. The original building is approximately 7,100 square feet while Building 2 is 4,800 square feet. Total square footage of the church is 11,900 square feet. With the approval of the PUD application, total parking increased from 70 to 89 required stalls. However, the ECR installed 107 parking stalls. The minimum parking stall requirement is 89 per the Land Use Code (LUC)¹ so there is an excess of 18 stalls on site.

Access to the ECR occurs at the southeast and southwest corners of the site. Ingress to the site occurs at the southeast corner where vehicles can either access the upper lot near the residential units or vehicles may continue in a circular movement, one-way, to the southwest corner for egress from the site. This circulation pattern is enforced through pavement striping and signage. Ornamental trees and shrub exists throughout the site, adjacent to the buildings, and at the street frontage.

See Attachments C and D for zoning and site maps.

IV. Proposed Site Layout

TC4 is proposed to be located at the south central portion of the site between the two access driveways. This area is currently grassed with a few evergreen trees at the outer boundaries. The encampment will be screened from the public through a view obscuring fence. There will be one opening provided for ingress and egress, located at the north west corner of the encampment. At this opening, TC4 proposes to place its security tent so there will be direct monitoring of individuals seeking entry to the encampment and to also monitor the activities of current residents. In addition to the security tent, the donations, and clean and dirty blankets tent will be located near this ingress/egress point. An emergency exit is required to fulfill Fire Department safety standards that will be located at the south east corner of the encampment.

The encampment has been designed to contain a common area at the north area of the fence. A large 20 by 40 tent that is designated as the "Hilton" is proposed to be located at the north east corner adjacent to four portable toilets. The "Hilton" is used by men that are new to Tent City until they can be accommodated in a private tent. The library, TV and kitchen tents will be located at the south west corner of the encampment just north of the shower. The single and couples tents will then be located in the center and southern portions of the encampment. There is a 4 foot requirement between tent rows to fulfill Fire Department safety standards. This is noted on the submitted site plan. See Attachment D.

TC4 will provide its own garbage can and will not utilize ERC's trash facilities which are located north of the church. TC4 will locate their garbage can in the landscape area within the upper

¹ LUC 20.20.590.F.1d provides the parking standard for religious institutions. This standard is documented in the City's approval of the addition per PFPUD 92-9674.

parking lot. Electricity will be provided from the electrical room from the church. A temporary connection will occur at this location so that the shower can have heated water.

A hose bib is located along the south side of the office building which will provide potable water for the encampment.

V. Consistency with Land Use Code/Zoning Requirements

A. General provisions of the Land Use Code as interpreted through the Consent Decree

This site is located within an R-5 zoning district. As such, LUC 20.10.440, Services chart (as amended by Ordinance No. 5615) permits Temporary Encampments subject to permit approval. The applicant has filed for the permit necessary to process a request to locate a Temporary Encampment at the Episcopal Church of the Resurrection. The following tables summarize the Land Use Code requirements, as clarified and interpreted by the Consent Decree, applicable to the proposal, and the proposal's compliance with those requirements.

B. Encampment Management Responsibility Plan (LUC 20.30U.121)

(Please note that the table below summarizes the requirements of the LUC/Consent Decree. In the event of any conflict between the summary of the requirements provided below and the text of the LUC/Consent Decree, or in the event the summary below is incomplete, the LUC/Consent Decree prevails).

Category	LUC Requirements	Applicant's Response	Compliance with LUC/Consent Decree
Security Measures LUC 20.30U.121.A.1	1. Description of security measures; 2. Code of conduct; 3. Neighborhood security patrols; 4. Background checks for outstanding warrant or sex offender status; 5. How residents may be ejected	1. Provided 2. Provided 3. Provided 4. Provided 5. Provided	1. Yes 2. Yes 3. Yes 4. Yes 5. Yes
Liability and Management Agreements LUC 20.30U.121.A.2	1. Liability/Insurance documentation 2. Liability agreement between Encampment Host, Encampment Sponsor or Encampment Manager.	1. Provided 2. Liability agreement between ECR and SHARE/WHEEL submitted with application.	1. Yes. Staff has obtained a copy of ECR's current insurance policy which is located in project file. 2. Yes. Copy of liability agreement provided with application submittal.
Transportation Plan LUC 20.30U.121.A.4	Documentation of closest bus stop	Provided	Yes
Site Plan LUC 20.30U.121.A.5	Required for overview of camp layout	Provided—Revision received April 13, 2007	Yes. Attachment D is the site plan on which the Director's decision is based
Street Address LUC 20.30U.121.A.6	Address of host facility	Provided	Yes. Pursuant to Para. 3.2 of the Consent Decree, no hardship exception is necessary. ECR's address is considered the permanent address for purposes of compliance with the LUC.

C. Applicable Procedures (LUC 20.30U.122)

Category	LUC Requirements (LUC 20.30U.122)	Applicant's Response	Compliance with LUC
Public Meeting LUC 20.30U.122.A	Required prior to permit issuance	Meeting held at ECR on April 2, 2007	Yes
Meeting w/Bellevue Police LUC 20.30U.122.A	See Section VI for discussion of meetings and comment and Section VII.7 for Police Comments	Meeting held on March 5, 2007	Yes
Meet with schools and known daycares (1) LUC 20.30U.122.B	See Section VI for discussion of meetings and comments	Required meetings on January 31 st , February 8 th , 12 th , 26 th , and April 19 th .	Yes
Mailed Notice to owners w/in 600 feet LUC 20.30U.122.B	Send public notice of meetings to real property within 600 feet of site	City fulfilled public notice which took place March 22, 2007	Yes
Signs Posted LUC 20.30U.122.C	One required sign per street frontage	City installed required sign with contracted third party	Yes

(1) See Attachment E for map of known schools and daycares within 600 feet of the ECR.

D. Temporary Encampment Use Requirements (LUC 20.30U.125). ECR's application included requests for hardship exceptions to the ordinance. Hardship exceptions and compliance with the LUC and Consent Decree are documented as referenced below with related conditions.

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
Code of Conduct LUC 20.30U.125 2.a through j	1. Prohibited Items or Activities: Illegal Substances Alcohol Weapons(knives 3.5 inches or larger) Violence Open flames Trespassing on private property Loitering in adjacent neighborhood 2. Neighborhood trash patrol every other day	1. Code of Conduct provided to address all required elements and appropriately prohibits all required elements. 2. Will have individuals conducting patrol on required intervals	1. Yes 2. Yes
Number of Residents LUC 20.30U.125.A.3	100 resident maximum allowed	100 resident maximum requested	Yes. Provided condition met to support maximum occupancy. <u>See Section XI for related condition.</u>
Length of Stay LUC 20.30U.125.A.4	60 days maximum	Hardship exception requested: Proposing 90 days	Yes. Hardship exception granted. 90 day stay granted based upon religious tenants provided by

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
			Reverend Dr. Peter Kalunian consistent with Para. 3.3.1 of the Consent Decree. See Section XI for related condition.
Location Frequency LUC 20.30U.125.A.5	Once every 18 months	No previous encampment at this location	Yes. No other camps previously sited at ECR within last 18 months. Any future application to host encampment at this site will be subject to restriction based on last date of encampment occupancy and para.3.4 of the consent Decree.
Transportation Plan LUC 20.30U.125.A.6	1. Within ½ mile radius to bus stop 2. After hours transport	1. There are several bus stops on both 148 th and 156 th Avenues NE within ¼ mile radius. 2. Metro has several buses that operate on these roadways that operate during business and evening hours. Volunteer drivers and taxis also available.	1. Yes 2. Yes See Section VII for further discussion.
Parking LUC 20.30U.125.A.7	Unspecified	Four parking stalls shall be available to TC4 operators which has been designated in the upper loop area along the eastern property line.	Yes
Setbacks LUC 20.30U.125.A.8.a Fence LUC 20.30U.125.A.8.b	1. 50 feet as required for churches for side and rear property lines. 20 feet as required for church for front property line. 2. 6 foot sight obscuring fence required. 3. Single point of access	1. Tents fulfill 50 foot setback from side property lines and 20 feet from the front yard setback. Fence located to maximize screening. 2. Will provide 6 foot cyclone fence with a dark sight obscuring material 3. The secondary ingress/egress required by the Fire Department will be a crash door only for emergencies	1. Yes. Location of tents satisfies applicable side and front yard setbacks. See Section XI for related condition. 2. Yes 3. Yes
Children LUC 20.30U.125.A.9	No children permitted under 18 (2)	Help minors accessing TC4 to find alternate shelter.	Yes
Resident ID Check LUC 20.30U.125.A.10	1. Verifiable ID required 2. Overnight resident log	1. Will conduct ID checks to screen for outstanding warrants and sex offender rosters. 2. Reverend Dr. Peter Kalunian to maintain resident log.	1. Yes. Detailed in Encampment Management Plan. 2. Yes. The Director approves retention of the log by Dr. Peter Kalunian, a representative of the Encampment Host, pursuant to LUC 20.30U.125.A.10 and para. 3.2 of consent decree.

2 Homeless children in distress are permitted one night's stay temporarily until human services are found to specifically meet their needs.

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
Health & Safety Regulations Water Supply Common Container Non-potable water LUC 20.30U.125.A.11.a. i-iii	1. Hot and cold water accessible to food and toilet facilities 2. Use of common container prohibited 3. Non-potable water labeled.	1. Hardship exception requested: Only 4 sinks to be provided with this application. Two will have both hot and cold water. Sinks located near toilets as proposed on Attachment D 2. Hardship exception requested for use of common container for coffee and water 3. No response to this item.	1. Yes. Hardship exception not necessary. Complies with Para. 3.2 of Consent Decree. See Section XI for related condition. 2. Yes. Hardship exception not necessary. Complies with Para. 3.2 of Consent Decree. See Section XI for related condition. 3. <u>Yes. See Section XI for related condition.</u>
Sewage and Wastewater Disposal LUC 20.30U.125.A.11.b. i-ii	1. Meet sewage and wastewater disposal in accordance to code. 2. Portable toilets must comply with KCC Section 8.20	1. Gray water from the shower will be connected to on-site side sewer. 2. Tent City will provide their own portable toilets for their residents that meet KC standard.	1. Yes 2. Yes
Electrical and Lighting LUC 20.30U.125.A.11.c	1. Electrical must meet City standards. 2. Lighting equipment must meet City standards.	1. Tent City will obtain an electrical permit from the City to install a temporary electrical panel per IBC. 2. Lighting to meet req. of LUC 20.20.522.	1. Yes. Compliance with standard demonstrated by securing permit. <u>See Section XI for related condition.</u> 2. Yes
Hand Washing and Bathing Sinks Showerhead Waste containers LUC 20.30U.125.A.11.d. i-vi	1. Sinks: 1:15 people, 2 adjacent to toilet, 1 next to food prep area and cleaned daily. 2. Showerhead: 1:40 people, shower must have floor drains, cleaned daily. 3. Waste containers: cleanable and nonabsorbent.	1. Hardship exception requested: Proposing 4 sinks/100 residents. 2. Hardship exception requested: Proposing 1 showerhead/100 residents. 3. Waste containers are cleanable and nonabsorbent.	1. Yes. Complies with Para. 3.2 of Consent Decree. <u>Refer to Section XI for related condition.</u> 2. Yes. Complies with Para. 3.3.3.1 of Consent Decree. <u>See Section XI for related condition</u> and list of other publicly available showers. See resource guide from Human Services in Attachment H. 3. Yes.
Toilets LUC 20.30U.125.A.11.e. i-ii Toilets (cont.)	1. 1:15 toilets per person 2. Cleaned daily	1. Hardship exception requested to provide 4 portable toilets/100 residents. 2. Proposed cleaning 3 times a week by professional service. Daily surface	1. Yes. Complies with Para 3.3.4 of Consent Decree. <u>See Section XI for related condition.</u> 2. Yes. Complies with Para 3.3.4 of Consent Decree. See Section

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
Cooking and Food Handling LUC 20.30U.125.A.11.f. i-v	1. Common areas: enclosed and separate from sleeping areas. 2. Sink with hot and cold potable water 3. Nonabsorbent food prep area 4. Mechanical refrigeration	cleaning on days when not professionally cleaned. 1. Kitchen to be located in separate tent adjacent to shower and hot water sink. 2. Hardship exception requested to allow compliance with 4 sinks and hand sanitizer 3. TC4 has nonabsorbent food prep area 4. Hardship exception requested to allow use of ice chests rather than mechanical refrigeration	XI for related condition. 1. Yes. Kitchen is separate from sleeping areas, and enclosed . 2. Yes. Complies with Para. 3.2 of Consent Decree. <u>See Section XI for related condition.</u> 3. Yes 4. Yes. As conditioned in Section XI, complies with Para. 3.3.5 of Consent Decree. <u>See Section XI for related condition.</u>
Maintenance of Bedding LUC 20.30U.125.A.11.g	Bedding must be maintained in a clean and sanitary condition.	Blankets are cleaned weekly by a professional service hired by SHARE/WHEEL.	Yes
Refuse LUC 20.30U.125.A.11.h. i-vi	1. Comply with sanitation code 2. Prevent rodent harborage 3. Storage in secure, impervious and cleanable containers 4. Provide stand 5. Locate 100 feet from tent areas 6. Empty regularly	1. Will provide required number of trash cans. 2. Trash taken to dumpster everyday. 3. 6 yard dumpster emptied twice a week. 4. Not providing a stand for trash cans. 5. Locating 100' 6. Emptied regularly	1. Yes 2. Yes 3. Yes 4. Yes. Complies with Para. 3.2 of Consent Decree. <u>See Section XI for related condition.</u> 5. Yes 6. Yes
Insect and Rodent Control LUC 20.30U.125.A.11.i	Take measures to control insects and rodents.	TC4 will manage refuse as described above	Yes. No specific measures are anticipated, absent a rodent or insect condition during term of encampment
Disease Prevention and Control LUC 20.30U.125.A.11.j. i-iii Disease Prevention and Control (cont)	1. Report to Seattle & King County Health certain known or suspected communicable diseases 2. Report following immediately to Seattle & King County Health: <ul style="list-style-type: none"> ▪ Suspected food poisoning ▪ Unusual prevalence of fever, diarrhea, sore throat, vomiting or jaundice ▪ Productive cough or 	1. TC4 proposes to follow requirements applicable to schools and daycares, as outlined in WAC 246-101-415 and 246-101-420. 2. TC4 proposes to follow requirements applicable to schools and daycares, as outlined in WAC 246-101-415 and 246-101-420. See Attachment F for State requirements. TC4 also proposes to follow the Recommended Shelter Standards. See Attachment G for State regulations.	1. Yes. Complies with Section 3.2 of Consent Decree. 2. Yes. <u>As conditioned in Section XI</u> , complies with para. 3.2 of Consent Decree. See Attachments F and G for guidelines. 3. Yes

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
	weight loss is prominent among residents 3. Individual with communicable disease cannot prepare or serve food.	3. No individual will serve food in compliance with standards above.	
Exterior Lighting LUC 20.30U.125.A.12	1. Directed on site 2. No blinking, high intensity 3. Appropriate scale.	1. Use of existing lighting at ECR's site. 2. Use of household lighting standard for security tent near entry of encampment for night time use. 3. Existing parking lot lighting and additional night lighting as required by the Fire Department.	1. Yes 2. Yes 3. Yes, See Section XI for related condition.

VI. Public Comment Information

Public Correspondence: To date, staff has not received written correspondence regarding this proposal.

ECR's Outreach Meetings

The ECR has held five outreach meetings on the TC4 proposal as summarized below:

1. January 11th: ECR held a meeting with the on-site residents at Cambridge Court. There were approximately six residents that attended this meeting. Bellevue Police also attended this meeting as well to help respond to general comments regarding TC4. General comments ranged from general support to concerns regarding the viability of tent cities in solving homelessness. There were a few residents who had safety concerns which the BPD addressed.
2. January 31st: ECR held a public meeting with adjacent neighbors within 600 feet. ECR also invited parents from St. Louise Parish along with two other religious entities who utilize ECR's property for Sunday services. City representatives from PCD and BPD also attended this meeting. There were 35 individuals who signed the sign-in sheet from this meeting. Meeting minutes have also been provided which are available in the project file.
3. February 8th and 26th: Two meetings were held with the two on-site preschools within 600 feet of this site: Bellevue Overlake Cooperative Preschools (BOCP) 3 and 4. ECR's representative attended BOCP 3 and 4's parent meetings to discuss the TC4 installation. From review of the meeting minutes, there were no negative responses from the teachers or parents in response to the encampment. ECR's representative interacts regularly with the teachers and parents and has had no further comments or questions.
4. February 12th: ECR met with the principal and PTSA board of Woodridge Elementary school which is located at Bellewood Elementary school during construction of their new facility at 2619 SE 20th Place. The ECR representative addressed questions raised about the number of gates within the fence, security, number of residents and tents, and reactions of adjacent property owners. All of these issues were addressed by the ECR representative. It should be mentioned that the PTSA mentioned that there will be a large carnival on May 18th from 5 to 10 p.m. Security for the carnival was a concern. However, additional security for this event will not be necessary since TC4 will not move to the ECR until May 19th. No further action is necessary from ECR.
5. St. Louise School: ECR contacted the administrator for this school. The administrator declined to meet with the ECR representatives but provided general comments on the TC4 application via

email. Of primary concern are the boundaries of St. Louise Parish. The administrator desires that TC4 members be made aware of the school's boundaries and that their campus is closed to the outside public. The administrator wanted to provide clarification regarding the Parish and school and that they were to be viewed as separate entities. The school itself would not be getting involved as an organization this spring with TC4.

6. City Public Meeting: In addition to the above outreach meetings, the LUC requires the City to hold a public meeting on this proposal. This meeting was held April 2, 2007, with public notice occurring within 600 feet of this site. There were approximately 13 individuals who signed the sign in list for this meeting. Staff estimates that there were approximately 10 more individuals who attended this meeting but did not put their names on the sign up sheet. See project file of those who signed the sign-in sheet. Representatives from PCD and BPD conducted the meeting.
7. Home Daycare-- ECR contacted the administrator for this daycare. The administrator declined to meet with the ECR representative but elected to obtain information regarding TC4 via the phone. An ECR representative explained the Church's intention to host TC4 and the proximity to her daycare to their site. Explanation was also provided about TC4 operations. The operator told the ECR representative that she only has one child in the daycare at the present time who is part-time. The operator stated that she did not have any concerns about Tent City or any questions; however, the ECR representative told the operator that she is welcome to contact the Church if she has further questions or concerns.

VII. City Department Analysis

1. Transportation Department

LUC 20.30U.121.A.4 requires an encampment sponsor to submit a transportation plan demonstrating compliance with LUC 20.30U.125.A.6, which includes the following two issues:

- "A Temporary Encampment shall be within one half mile of a public transportation stop...." The proposed location is within one quarter mile of northbound and southbound Metro bus stops on 148th and 156th Avenues NE so this condition is satisfied.
- "During hours when public transportation is not available, the encampment host, encampment sponsor, or encampment manager shall also make transportation available to anyone who is rejected from or ordered to leave the Temporary Encampment." Transportation will be provided via volunteer drivers or taxis to the downtown Bellevue Transit Center at 108th Avenue NE and NE 6th Street when people are rejected from the encampment when Metro buses are not available on 148th and 156th Avenues NE. Bus schedules and phone numbers for volunteer drivers and taxis will be posted in the encampment's security tent.

See Section XI for related condition.

2. Human Services Division

The Human Services Division has created a Resource Information Booklet which will be given to all TC4 residents upon arrival to the ECR. The booklet contains listings of food banks and local stores in the North Bellevue subarea. This booklet also contains information regarding alternate locations where residents may shower in addition to the one on-site shower that TC4 proposes. See Attachment H for draft copy of the resource guide. See Section XI for related condition.

3. **Fire Department**

1. Fire extinguishers are required. Individual locations of each extinguisher within the encampment will be verified during field inspection by fire inspector.
2. Provide adequate egress illumination.

See Section XI for related conditions.

4. **Building Department**

The Building Department has reviewed this proposal and determined that a plumbing permit is not required for this project as potable water is available on this site. However, an electrical permit is required to power the water heater for TC4's shower unit. See Section XI for related condition.

5. **Utilities Department**

The Utilities Department has approved this proposal. No Utilities permit is required. However, sewer maintenance staff must witness connection to the existing side sewer for disposal of grey water from the shower. You may contact Mike Burbridge at (425) 452-7840 to set up a time for him to look at the sewer connection.

6. **Clearing and Grading Division**

The clearing and grading division has reviewed this proposal and requires soil restoration after removal of this encampment. Covering the grass with the camp structures will likely result in killing the vegetating which is included under the definition of Clearing. A clearing & grading permit is required for all projects that result in more than 1,000 square feet of clearing. Exception to this requirement has been granted. The exception is limited to the efforts necessary to remove the camp and restore the site to its pre-encampment condition. See Section XI for related conditions.

6. **Bellevue Police Department**

On March 5, 2007, the Bellevue Police Department held a required meet and confer meeting with the ECR representative and TC4 staff to review the Encampment Management Responsibility Plan. This meeting was an opportunity for the BPD to review the required security plan of this document. BPD noted TC4's normal protocol to turn away residents rejected from the encampment. BPD requested that BPD shall be promptly notified when a crime is occurring; a physical or verbal disturbance is occurring; an unwanted person is refusing to leave; a subject is present who has an outstanding warrant for their arrest; a subject is present who is required to register as a sex offender; and/or a subject is present who is a respondent to an Order for Protection, Anti-Harassment Order, or No Contact Order. TC4 has verbally agreed to these requirements. As a condition of approval, the above requirements of BPD shall be followed by TC4. See Section XI for related condition.

TC4 will also continue to conduct their background checks with King County Sheriff's Department for their required screening. BPD accepts this protocol and has established a liaison relationship with King County so that the City will also have connection with them as well. This fulfills the requirement of the ordinance.

VIII. State Environmental Policy Act (SEPA)

The environmental review indicates no probability of significant adverse environmental impacts occurring as a result of the proposal. The Environmental Checklist and supplemental documentation submitted with the application adequately discloses expected environmental impacts associated with the project. The City codes and requirements, including the Clear and Grade Code, Utility Code, Land Use Code, Noise Ordinance, Building Code and other construction codes adequately mitigate expected environmental impacts. Therefore, issuance of a Determination of Non-Significance (DNS) is the appropriate threshold determination under the State Environmental Policy Act (SEPA) requirements. The Environmental Checklist is available for review in the project file.

IX. Applicable Decision Criteria

Temporary Encampment: The Director may approve or approve with modifications an application for a Temporary Encampment Permit if it complies with the decision criteria of Land Use Code Section 20.30U.130. After conducting the various administrative reviews of this project, including Comprehensive plan goals and policies and the Land Use Code provisions, the following conclusions are made with regard to the Temporary Encampment decision criteria:

1. The Temporary Encampment complies with the Use Requirements set out in LUC 20.30U.125, and other applicable requirements of this Code; and

The Director incorporates the discussion and information in Sections V here as demonstration of the proposal's compliance with the requirements of the Code. As conditioned in Section XI, the Director finds that the requirements of the LUC and interpreted through the consent decree are satisfied.

2. The Temporary Encampment will not be materially detrimental to the public health, safety or welfare of the Temporary Encampment residents or the surrounding community; and

The Episcopal Church of the Resurrection has communicated with its adjacent neighbors, conducted a meet and confer conference with the Bellevue Police Department and met with the preschool administrations for the on-site day cares, BOCP3 and 4, the Woodridge Elementary staff and PTSA, email correspondence from the administrator from St. Louise, and a telephone conversation with the administrator of the home daycare located at 117 155th Avenue NE, to comply with the meeting requirements for schools and daycares within 600 feet of their site. See Section VI for concerns identified by the neighborhood and area schools.

Additionally, the City has found that ECR and SHARE/WHEEL have responsibility to assure the health and safety of Temporary Encampment residents, as well as the surrounding community. To fulfill this requirement, the applicants have proposed to conduct the following to meet safety and health standards for both encampment residents and the adjacent neighborhood:

- Installing a 6 foot sight obscuring fence on all sides of the encampment.
- Conducting security or ID checks with King County Sheriff's Department for its residents.
- Reporting disturbances to BPD for action along with residents found to have outstanding warrants or who are on a sex offender list.
- Maintaining quiet hours as stated within the SEPA checklist.
- Following proper cleaning standards for potable water containers and toilet facilities on site.
- Obtaining an electrical permit for the necessary panel installation for the shower facility.

The conditions imposed by the City in Section XI will avoid material detriment to both the encampment residents and the adjacent neighborhood. See Section XI for related conditions.

- 3. The imposition of a condition under which the City reserves the right to impose additional conditions or to reconsider the Temporary Encampment Permit within a certain timeframe from approval date, based upon complaints filed with the City.**

The City reserves the right to add additional conditions of approval on this Temporary Encampment based upon any future complaints that are received after issuance of this permit. The applicants should be aware that the approval of this encampment permit may at any time be revoked if the proposed use or its impact are at any time substantially modified or changed from the stated application. See Section XI for related conditions.

X. Decision of the Director

After conducting the various administrative reviews associated with this proposal, including applicable Land Use consistency, SEPA, City Code, Standard and Consent Decree compliance reviews, the Director of Planning and Community Development does hereby **APPROVE THE APPLICATION WITH CONDITIONS:**

XI. Conditions of Approval for Encampment Permit:

- 1. Security Protocol with BPD:** BPD shall be promptly notified when a crime is occurring; a physical or verbal disturbance is occurring; an unwanted person is refusing to leave; a subject is present who has an outstanding warrant for their arrest; a subject is present who is required to register as a sex offender; and / or a subject is present who is a respondent to an Order for Protection, Anti-Harassment Order, or No Contact Order.

Authority: LUC 20.30U.121.A.1 and 20.30U.125.A.2
Reviewer: Captain William Bryant, (425) 452-4356

- 2. Transportation Plan:** The encampment security tent shall have posted the appropriate bus schedules, the phone numbers for emergency drivers and taxis, and the location of the nearest twenty-four hour transit center to which rejected persons will be transported when Metro buses are not available on 148th and 156th Avenues NE.

Authority: LUC 20.30u.121.A.4; LUC 20.30U.125.A.6.
Reviewer: Carl Wilson, (425) 452-4228

- 3. Maximum Number of Encampment Residents:** The maximum number of encampment residents shall be 100, based on the application materials contained in the record as of the date of this decision. See Conditions 11 and 12 below for requirements related to provision of shower facilities and additional toilets based on encampment occupancy

Authority: LUC 20.30U.125.A.3
Reviewer: Antoinette Pratt, (425) 452-5374

- 4. Length of Stay:** The Director has granted TC4 a 90-day encampment stay on the grounds of the Episcopal Church of the Resurrection. The duration of the encampment is permitted to extend from May 19, 2007 to August 16, 2007.

Authority: LUC 20.30U.125.A.4; Consent Decree Para. 3.3.1
Reviewer: Antoinette Pratt, (425) 452-5374

5. **Fence Location:** The fence shall incorporate dark, sight obscuring material to screen the entire encampment from public view. A secondary egress to fulfill the Fire Department secondary fire exit requirement shall be constructed as shown on the submitted site plan at the south east corner of the encampment.

Authority: LUC 20.30U.125A.8.b
Reviewer: Antoinette Pratt, (425) 452-5374

6. **Maintenance of Overnight Resident Log:** ECR's management shall maintain an overnight resident log of individuals in the encampment.

Authority: LUC 20.30U.125.A.10
Reviewer: Antoinette Pratt, (425) 452-5374

7. **Water Supply and Adjacency:** The applicant shall implement the following protocol related to water supply and adjacency for at least one hot water hand wash sink to be located adjacent to food preparation facilities so long as the following is complied with:

- a. The hot water sink is located as near to the food preparation areas as the site will reasonably allow; or
- b. If the hot water sink is located farther than 100 feet from the kitchen tent, then a cold water sink shall be located within 100 feet of the kitchen tent.

Authority: LUC 20.30U.121.A.5; 20.30U.125.A.11.a.i; 20.30U.125A.11.f.i; Consent Decree Para. 3.3.6
Reviewer: Antoinette Pratt, (425) 452-5374

8. **Prohibition of Community Containers and Potable Water Sources:** Water and coffee containers and carafes shall be washed once weekly with bleach and hot water and only potable water sources shall be used to fill such containers. Any containers used for non-potable water shall be labeled as such.

Authority: LUC 20.30U.125A.11.a.ii; Consent Decree Para. 3.2
Reviewer: Antoinette Pratt, (425) 452-5374

9. **Electrical Permit:** An electrical permit shall be secured to install an external 220 volt outlet at the northwest corner for the shower unit located at the southwest corner of the encampment. This work shall be reviewed and approved by the Building Department prior to use.

Authority: BCC 23.30.030; LUC 20.30U.125.A.11.c
Reviewer: Bob Lloyd, (425) 452-7911

10. **Number of Sinks:** In addition to the four proposed sinks, the following conditions shall be met: (1) at least one hand washing sink with hot water is located adjacent to the food preparation area; and (2) hand sanitizer is provided at each sink location in the Temporary Encampment, in the kitchen area, and at the security tent.

Authority: LUC 20.30U.125.A.11.d.i; Consent Decree Para. 3.2
Reviewer: Antoinette Pratt, (425) 452-5374

11. **Number of Toilets:** The provision of toilets in the encampment shall comply with the requirements of LUC 20.30U.125A.11.e.i (A), provided that 1) the City of Bellevue shall identify and secure a funding source for the professional cleaning at least three times per week of each toilet required over four toilets; 2) more than five toilets shall only be required where space is available at the Encampment site without compromising the ability to house the allowed maximum number of encampment residents. Pursuant to Section 3.3.4 of the Consent Decree, additional toilets shall be required whenever the occupancy of TC4 exceeds certain thresholds for two successive City of Bellevue inspections:

- 61 to 75 – 5 toilets required
- 76 to 90 – 6 toilets required
- 91 to 100(max) – 7 toilets required

Authority: LUC 20.30U.125A.11.e.ii (A); Consent Decree Para. 3.3.4
Reviewer: Antoinette Pratt, (425) 452-5374

12. **Number of Showers:** In addition to the one on-site shower, whenever TC4 occupancy at the site exceeds 40 residents, the Encampment Host or Encampment Manager shall provide bus tickets to encampment residents, which may be used to access other shower facilities. Other shower facilities include the Bellevue Aquatic Center.

Authority: LUC 20.30U.125A.11.d.ii; Consent Decree Para.3.3.3.2
Reviewer: Antoinette Pratt, (425) 452-5374

13. **Refrigeration:** The applicant shall implement the following protocol related to perishable food storage:

- a. Ice chests are maintained at a temperature of 45 degrees or less and thermometers are placed in all ice chests and read below 45 degrees
- b. Ice for ice chests is replenished daily (when necessary to maintain temperature)
- c. Ice chests are in working order and fitted with tightly fitting lids
- d. Ice chests are cleaned at least weekly with a bleach solution and thoroughly rinsed prior to re-use;
- e. shared meals for the majority of residents are not prepared on-site
- f. The Encampment Manager, Encampment Host and/or Encampment Sponsor shall promptly comply with any suggestions, correction notice or other direction provided by the Department of Public Health – Seattle and King County regarding food preparation and storage on-site

Authority: LUC 20.30U.125A.11.f.v; Consent Decree Para 3.3.5
Reviewer: Antoinette Pratt, (425) 452-5374

14. **Trash Can Stands:** Rubbermaid trash cans with liners shall be used throughout the encampment, each equipped with snap tight lids. All trash shall be bagged, removed from the encampment, and taken to the dumpster at least once a day to prevent rodents, insects and other animals accessing cans. Trash containers shall be located adjacent to the food area, and within 100 feet of any sleeping tent.

Authority: LUC 20.30U.125.A.11.h; Consent Decree Para 3.2
Reviewer: Antoinette Pratt, (425) 452-5374

15. **Disease Prevention and Control:** Incidents of suspected food poisoning; unusual prevalence of fever, diarrhea, sore throat, vomiting, or jaundice; or productive cough or weight loss among

residents shall be reported immediately to Seattle & King County Public Health. Additionally, TC4 shall follow requirements applicable to schools and daycares, as outlined in WAC 246-101-415 and 246-101-420 in Attachments F and G.

Authority: LUC 20.30U.125.A.11.j.ii; Consent Decree Para. 3.2
Reviewer: Antoinette Pratt, (425) 452-5374

16. **Fire Extinguishers:** Fire extinguishers are required. Individual locations of each extinguisher within the encampment will be verified during field inspection by fire inspector.

Authority: International Fire Code (IFC 906)
Reviewer: Adrian Jones, (425) 452-6032

17. **Egress Illumination:** Provide adequate egress illumination.

Authority: IFC 1006.2
Reviewer: Adrian Jones, (425) 452-6032

18. **Minimum Aisle Width Between Tents:** Maintain a minimum aisle width of 44 inches between tents for aisles.

Authority: IBC/IFC Section 1023
Reviewer: Adrian Jones, (425) 452-6032

20. **Revocation of Temporary Encampment Permit:** The City reserves the right to impose additional conditions or to reconsider the Temporary Encampment Permit within a certain timeframe from approval date, based upon complaints filed at the City. Approval of a Temporary Encampment Permit may at any time be revoked if the use is substantially changed from the stated application for this proposal.

Authority: LUC 20.30U.130.C and 20.30U.135
Reviewer: Antoinette Pratt, (425) 452-5374

21. **Erosion Control:** Upon removal of the camp, all areas where exposed soils exist must be protected from erosion. During the rainy season (Nov. 1 through April 30) this can be accomplished by covering the site with an erosion control fabric, straw mulch, or plastic sheet.

Authority: BCC Title 23.76.090.A.1.b
Reviewer: Savina Uzunow, (425) 452-7860

22. **Revegetation of Site:** At the conclusion of the rainy season, the site must be re-vegetated. Re-vegetation must occur within 180 days of removal of the Temporary Encampment.

Authority: BCC 23.76.090.A.1.g; BCC 23.76.23.76.035.2.a
Reviewer: Savina Uzunow, (425) 452-7860

23. **Future Revisions to Site Plan:** No revisions shall be made to the approved site plan during operation prior to approval by the City.

Authority: LUC 20.30U.121.A.5
Reviewer: Antoinette Pratt, (425) 452-5374

Attachments

- A. Statement of Faith—Reverend Dr. Peter Kalunian, Episcopal Church of the Resurrection
- B. Code of Conduct—TC4
- C. Zoning Map
- D. Plans and Drawings
- E. Map of Schools and Daycares within 600 feet.
- F. Communicable Health Standards for Schools and Daycares, Notifiable Conditions
Definitions & Standards
- G. Recommended Shelter Health and Safety Best Practice Guidelines—Seattle/King County
- H. TC4 resource Guide—Human Services Division

ATTACHMENT A
(Statement of Faith—Reverend Dr. Peter Kalunian)



EPISCOPAL

Church of the Resurrection

15220 MAIN STREET BELLEVUE, WASHINGTON 98007 (425)746-0322

ATTACHMENT A

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Statement of Support for Tent City IV from a Christian Perspective

I serve as the Rector of the Episcopal Church of the Resurrection, 15220 Main Street, Bellevue. Based on our religious convictions and beliefs, we are submitting an application for a permit to the City of Bellevue to host Tent City 4, mid-May to mid-August, 2007.

Our Mission statement is: "**We are a Welcoming Community for the Lord**" and we are living out that conviction.

1. Ten years ago we built Cambridge Court on our church property. It serves as a one or two bedroom apartment complex for low income seniors.

2. Our church is the original sponsor for "Hearts and Hammer". We repair houses in Bellevue for low income and/or disabled residents. Four more faith based communities have joined the "Hearts and Hammer" ministry.

3. Church members will be going to New Orleans in April to help repair homes.

4. Members of the church travel yearly to Belize to repair local schools and homes.

As revealed in scripture below, God moves within us, through us and for us in caring for all the people of the world particularly those in our community.

"You shall love the Lord your God with all your heart and with all your soul, and with all your mind. This is the greatest and first commandment. And the second is like it: 'you shall love your neighbor as yourself.' On these two commandments hang all the law and prophet." Matthew 22:37-40

And:

"And if your brother becomes poor and his means fail him with you, then you shall strengthen him, be he a stranger or a settler, he shall live with you."

Leviticus 25:35

And:

"Then the king will say to those at his right hand, 'Come, you that are blessed by my Father, inherit the kingdom prepared for you from the foundation of the world; for I was hungry and you gave me food, I was thirsty and you gave me something

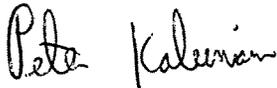
to drink, I was a stranger and you welcomed me, I was naked and you gave me clothing, I was sick and you took care of me, I was in prison and you visited me." Then the righteous will answer him, "Lord, when was it that we saw you hungry and gave you food, or thirsty and gave you something to drink? And when was it that we saw you a stranger and welcomed you, or naked and gave you clothing? And when was it that we saw you sick or in prison and visited you?" And the king will answer them, "Truly I tell you, just as you did it to one of the least of these who are members of my family, you did it to me." Then he will say to those at his left hand, "You that are accursed, depart from me into the eternal fire prepared for the devil and his angels; for I was hungry and you gave me no food, I was thirsty and you gave me nothing to drink, I was a stranger and you did not welcome me, naked and you did not give me clothing, sick and in prison and you did not visit me." Then they also will answer, "Lord, when was it that we saw you hungry or thirsty or a stranger or naked or sick or in prison, and did not take care of you?" Then he will answer them, "Truly I tell you, just as you did not do it to one of the least of these, you did not do it to me."

Matthew 24-25

And many other passages too numerous to list.

Given our calling in the Scriptures and our calling as a community, there should be no limit to the number of days we would be willing to host Tent City IV. Share/Wheel has only asked us to host for 90 days. We gladly welcome this small opportunity to live out the Good News of the Gospel.

Yours in Christ,

A handwritten signature in cursive script that reads "Peter Kalunian".

The Rev Dr. Peter Kalunian
Rector

ATTACHMENT B
(Code of Conduct)

**SHARE/WHEEL
TENT CITY4**

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CODE OF CONDUCT

PERMIT PROCESSING

**WE, THE PEOPLE OF SHARE/WHEEL,
IN ORDER TO KEEP A MORE HARMONIOUS COMMUNITY,
ASK THAT YOU OBSERVE THE FOLLOWING CODE OF CONDUCT:**

**' SHARE/WHEEL'S TENT CITY4 IS A DRUG AND ALCOHOL FREE ZONE.
THOSE CAUGHT DRINKING OR USING DRUGS
WILL BE ASKED TO LEAVE. SOBRIETY IS REQUIRED.**

**NO WEAPONS ARE ALLOWED.
KNIVES OVER 3-1/2 INCHES MUST BE CHECKED IN.**

**VIOLENCE WILL NOT BE TOLERATED.
PLEASE ATTEMPT TO RESOLVE ANY CONFLICT
IN A CREATIVE AND NONVIOLENT MANNER.**

**DEGRADING ETHNIC, RACIST, SEXIST OR HOMOPHOBIC REMARKS ARE
NOT ACCEPTABLE. NO PHYSICAL PUNISHMENT, VERBAL ABUSE OR
INTIMIDATION WILL BE TOLERATED.**

**WE ARE A COMMUNITY.
PLEASE RESPECT THE RIGHTS AND PRIVACY
OF YOUR FELLOW CITIZENS.**

**NO MEN IN THE WOMEN'S TENTS.
NO WOMEN IN THE MEN'S TENTS.
NO OPEN FLAMES.
NO LOITERING OR DISTURBING NEIGHBORS,
NO TRESPASSING.**

**ATTENDANCE OF AT LEAST ONE OF THE SEVERAL 'COMMUNITY
MEETINGS HELD THROUGH THE WEEK IS REQUIRED.
DAYS AND TIMES WILL BE POSTED SO THAT YOU MAY WORK IT INTO
YOUR SCHEDULE.**

**IF THESE RULES ARE NOT RESPECTED AND ENFORCED,
TENT CITY4 MAY BE PERMANENTLY 'CLOSED.**

ATTACHMENT B

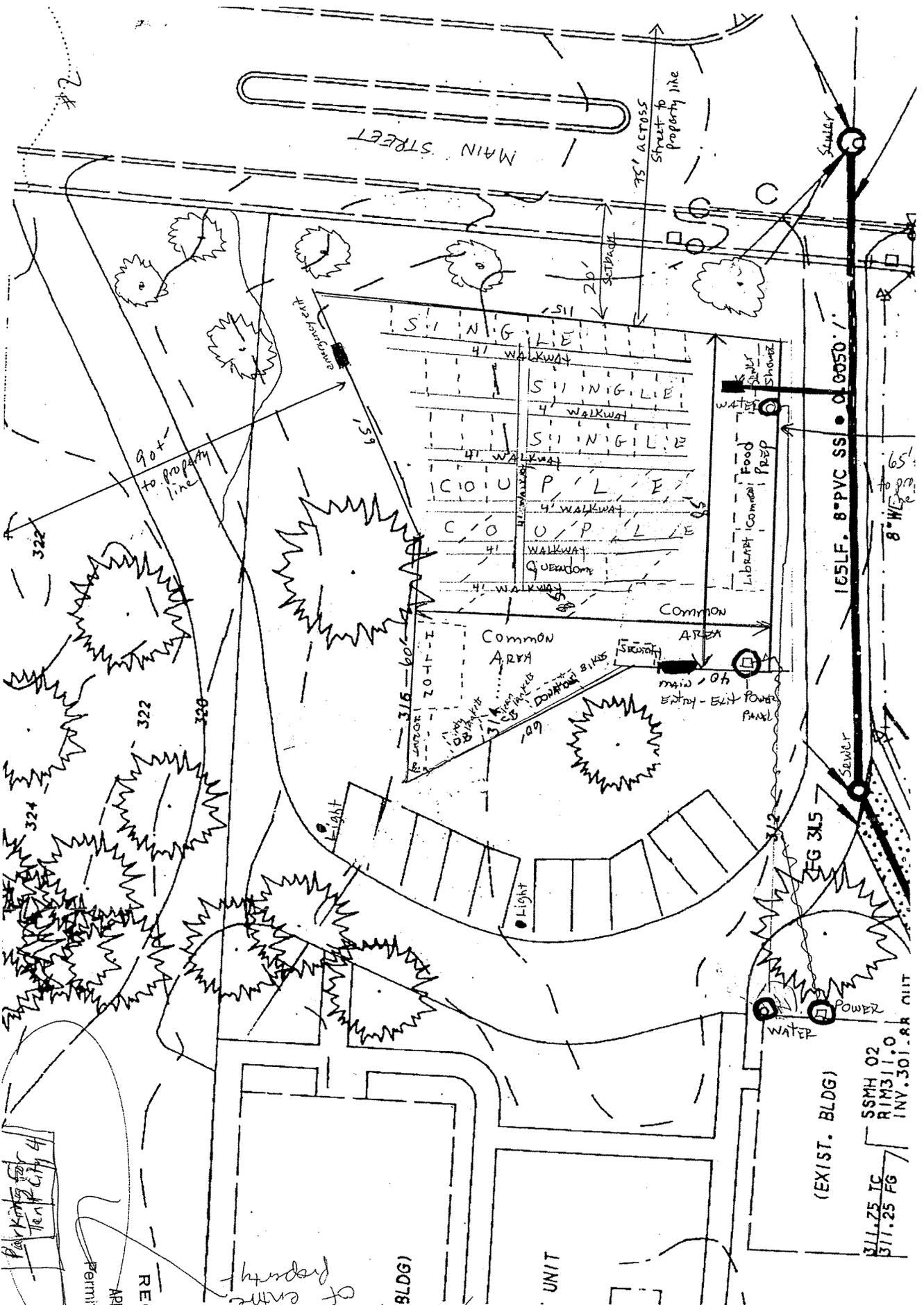
ATTACHMENT C
(Zoning Map)

ATTACHMENT D
(Plans and Drawings)

Church of the Resurrection

Tent City 4 Site Plan

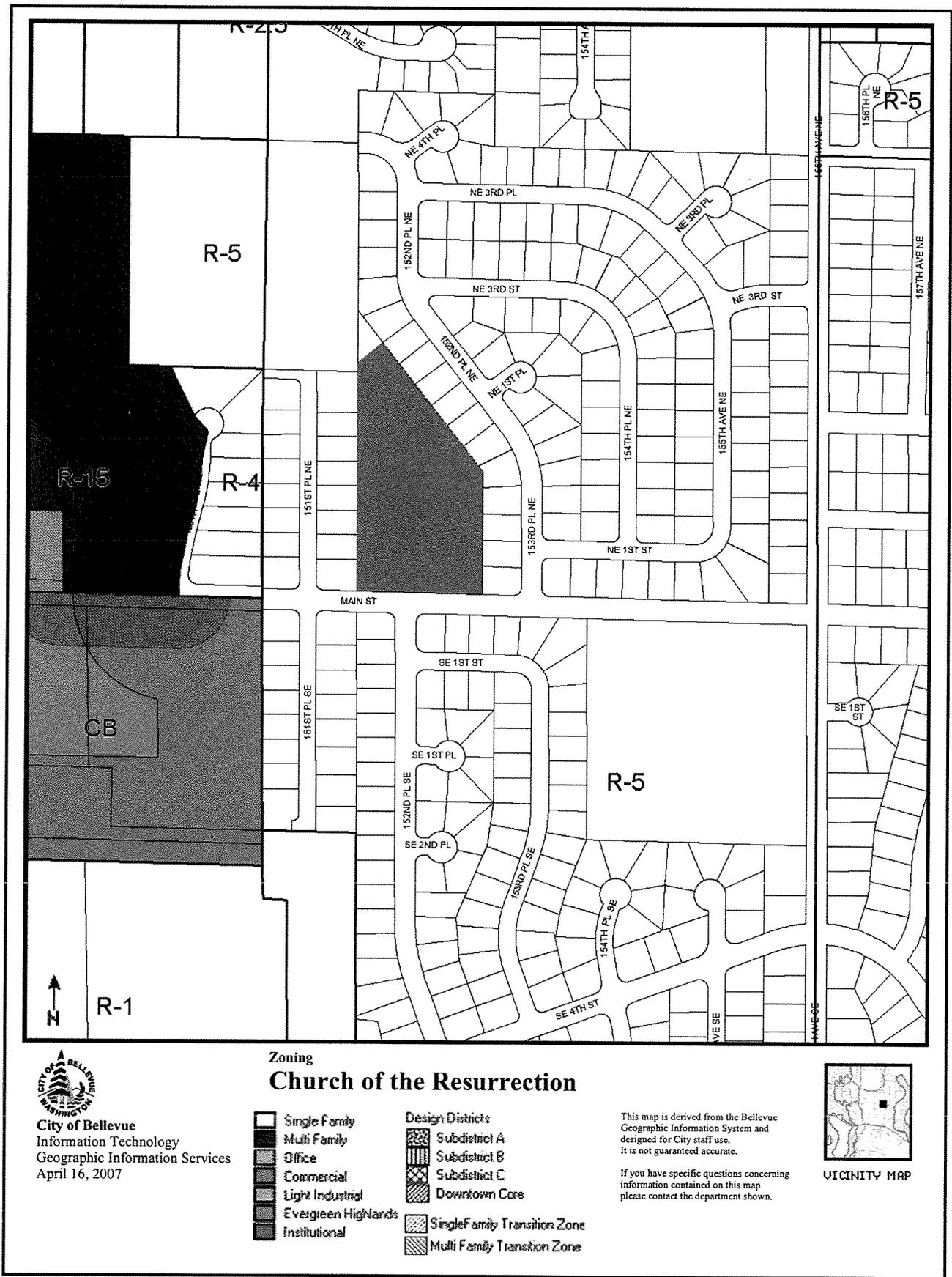
Scale drawing on opposite side of property



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Permit

(EXIST. BLDG)
311.25 IC
311.25 FG
SSMH 02
RIM311.0
INV.301.88 OIT

Planning Dept
Tent City 4



ATTACHMENT E
(Daycare and Schools within 600 feet)

ATTACHMENT F
(State Requirements for Daycares and Schools)

WAC 246-101-415 Responsibilities of child day care facilities. Child day care facilities shall:

- (1) Notify the local health department of cases or suspected cases, or outbreaks and suspected outbreaks of notifiable conditions that may be associated with the child day care facility.
- (2) Consult with a health care provider or the local health department for information about the control and prevention of infectious or communicable disease, as necessary.
- (3) Cooperate with public health authorities in the investigation of cases and suspected cases, or outbreaks and suspected outbreaks of disease that may be associated with the child day care facility.
- (4) Child day care facilities shall establish and implement policies and procedures to maintain confidentiality related to medical information in their possession.

WAC 246-101-420 Responsibilities of schools. Schools shall:

- (1) Notify the local health department of cases or suspected cases, or outbreaks and suspected outbreaks of disease that may be associated with the school.
- (2) Cooperate with the local health department in monitoring influenza.
- (3) Consult with a health care provider or the local health department for information about the control and prevention of infectious or communicable disease, as necessary.
- (4) Cooperate with public health authorities in the investigation of cases and suspected cases, or outbreaks and suspected outbreaks of disease that may be associated with the school.
- (5) Personnel in schools who know of a person with a notifiable condition shall release identifying information only to other individuals responsible for protecting the health and well-being of the public through control of disease.
- (6) Schools shall establish and implement policies and procedures to maintain confidentiality related to medical information in their possession.

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ATTACHMENT 

ATTACHMENT G
(Recommended Shelter Health and Safety Best Practice Guidelines--
Seattle/King County)

Recommended Shelter Health and Safety Best Practice Guidelines

Public Health – Seattle & King County

Health Care for the Homeless Network
999 Third Avenue, Suite 1200
Seattle, Washington 98104
<http://www.metrokc.gov/health/hchn/>

July 2005



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Revised:

April 1996 With input from the Communicable Disease Control and Environmental Health Divisions of the Seattle-King County Public Health Department.
 December 1996 With input from shelter provider advisory group. TB info updated.
 February 1999
 May 2005

Please direct questions or suggestions about these standards to:

Heather Barr, RN, Public Health Nurse, Ph (206) 296-5091
 Health Care for the Homeless Network, a program of Public Health – Seattle & King County

Permission to reproduce and distribute this document is granted.

All information is general in nature and is not intended to be used as a substitute for appropriate professional advice.

COMMUNICABLE DISEASE CONTROL HAND WASHING

General Information:

- Hand washing is the single most effective and least costly way to reduce the spread of infections, including the common cold, hepatitis A, food borne illnesses, and many other viral and bacterial diseases.
- Alcohol-based hand rub is also effective in limiting the spread of such diseases.
- Shelter and other environments should encourage and support good hand hygiene.

Facility Recommendations & Environmental Modifications:

Ensure that your shelter or facility has:

- Posters encouraging *frequent* hand washing posted in common areas.
- Posters showing proper hand washing *technique* posted by all sinks.
- Sinks and hand washing facilities that are easily accessible to staff and clients.
- Sinks that are kept in good repair, drain properly, and have both hot and cold water.
- Soap dispensers that contain soap and are in good working order. Non-refillable soap dispensers are recommended.
- Disposable towels available.
- Facial tissues such as Kleenex available for staff and clients. Tissues help contain sneezes and coughs and provide a barrier for hands. Trash cans should be available for proper disposal of tissues.
- Alcohol-based hand rub dispensers installed at entry areas.

Staff Recommendations:

Staff should:

- Model and encourage good hand hygiene.
- Wash their hands immediately after using the toilet.
- Wash their hands before serving, preparing or eating food.
- Wash their hands before and after providing any “hands on” assistance to clients (such as assisting with mobility, balance, health or hygiene needs).
- Wash their hands after handling clients’ unwashed clothing or bedding.
- Wear aprons/coveralls and gloves when handling soiled laundry to reduce risk of infection.
- Wear gloves when handling client belongings to reduce risk of infection from bacteria, viruses, lice or mites, and to reduce risk of infection by needle stick.

Procedural Recommendations:

- Encourage staff and clients to wash or sanitize hands upon entering the shelter. This will effectively reduce the number of germs entering the shelter. Alcohol-based hand rub dispensers installed at entry areas encourage this practice.
- Do NOT use cloth towels or re-use paper towels.
- Instruct clients and volunteers who serves or prepare food to wash their hands ahead of time.
- Ensure that your shelter has a policy regarding blood borne pathogens control (“Standard Precautions in the Shelter Setting”).

COMMUNICABLE DISEASE CONTROL FOOD HANDLING

Improper food handling can spread infection to large groups of people at one time. Food borne illnesses nearly always result in vomiting, diarrhea and malaise, all of which are particularly difficult for homeless people to endure. Therefore conscientious adherence to food handling standards is strongly encouraged.

For further information please see the Public Health – Seattle & King County Food Handling Guidelines at <http://www.metrokc.gov/health/foodsfty/>. To arrange for further education about food safety issues at your site contact Environmental Health at (206) 296-4632.

Facility Recommendations & Environmental Modifications:

- The kitchen area is clean. A cleaning schedule is posted and adhered to.
- Kitchen counter tops are intact and are sanitized before food preparation begins.
- Surfaces where people eat are smooth, intact, and easily washable. Sanitize all surfaces before food is served.
- Dish washing is accomplished safely and appropriately:
 - 1) Hand dish washing uses a three compartment sink (wash, rinse, sanitize)
 - 2) Dishwashers have a high temperature sanitizing rinse (170 F) or a chemical sanitizer.
 - 3) Cutting boards are washed, rinsed, and sanitized between each use.
- Thermometers are placed and kept in all refrigerators and read below 41 F.

Procedural Recommendations:

- Staff who handle food have current food handlers' permits.
- Staff, client volunteers, and outside volunteers wash hands before preparing or serving food.
- Staff wash their hands after handling uncooked meat, before handling other food or utensils.
- Ill people are not permitted to prepare or serve food to others.
- Foods are cooked to temperatures as required by code.
- Foods delivered from outside sources are held at 140F or hotter (or 41F or lower for cold foods) and the temperatures are checked when the food arrives. A log is kept of temperature checks on all meals.
- Foods that have been donated should comply with the current WA Food Code guidelines for donated food (see <http://www.doh.wa.gov/ehp/sf/Pubs/FoodRule/food-donations-guidelines-1204.doc> or the code at <http://www.leg.wa.gov/WAC/index.cfm?section=246-215-151&fuseaction=section>)
- Foods to be warmed are reheated to at least 165 F and checked with a long-stem thermometer prior to being served.

To view the Washington State Food Code & the May 2005 Code revisions visit:
<http://www.doh.wa.gov/ehp/sf/food/FoodRuleMain.htm> or call Environmental Health for more information (206) 296-4632.

ENVIRONMENTAL SAFETY INJURY PREVENTION

Facility Recommendations & Environmental Modifications:

- Stairs are in good repair, equipped with a handrail, and are not slippery.
- A First Aid Kit is kept in an accessible location, appropriately stocked, and checked monthly.
- A telephone is accessible for calls to 911.
- The shelter has an approved sharps bio-hazard container to collect used needles and syringes and has a policy for the proper disposal of these items.
- Emergency preparedness supplies are fully stocked and are replaced as necessary.
- In facilities serving children, appropriate childproofing measures and modifications have been made including: childproof electrical outlets, locked screens or other barriers to prevent children from falling out of upper floor windows, stairwell gates, doors that open from inside without a key, and precautions to protect children from burns and other injuries.
- All playground equipment, toys, and diapering areas are safe and adhere to safety standards.

Procedural Recommendations:

- No weapons are permitted on the shelter premises.
- The possession and use of illegal substances is prohibited on the shelter premises.
- There is a policy for proper disposal of needles and syringes.
- The shelter has begun preparing for earthquakes and other potential disasters. There is a plan to be prepared by _____ (date), including both supplies and written plans/protocols.

ENVIRONMENTAL SAFETY BURN PREVENTION

Facility Recommendations:

- The shelter adheres to the Uniform Fire Code applicable to transient accommodations.
- Smoke detectors are placed in appropriate areas and are functional. Batteries are changed on a regular schedule.
- Exits are clearly marked. Illuminated exit signs are functional.
- Evacuation routes are posted and visible.
- Staff are trained in evacuation procedures.
- Fire drills are conducted regularly.
- There are ____ (#) fire extinguishers. They are in working order and are checked monthly.
- Staff are trained in the use of fire extinguishers.
- The water heater is set at 120 F to prevent scalding burns.

ENVIRONMENTAL SAFETY – SANITATION AND HYGIENE

Environmental Quality:

- The water is safe to drink and free of contamination.
- The air quality is good:
 - No fumes or noxious odors are present (i.e. paint fumes, cleaning solutions).
 - Smoking is restricted to designated areas.
 - A source of fresh air is available (i.e. there are windows and doors that open).
 - The ventilation system is functional.
 - If there is no automatic H-VAC system, windows and/or doors are left open for 10-15 minutes several times per day to provide air exchange.

Maintenance:

- Indoor and outdoor environments are clean and free of debris.
- Floors are washed daily and carpeted areas vacuumed daily.
- Floors are cleaned immediately after any spills.
- There are enough trashcans available for clients and staff so that trash is easily disposed of and cans are not overflowing. Garbage cans are lined with a plastic bag and have covers.
- Garbage (biodegradable matter such as food) & trash (paper/plastic/refuse) are removed daily.
- Janitorial equipment and supplies are in good repair and have a designated storage space. Cleaning supplies and chemicals are kept out of children's reach and separate from food.
- Pest control is done on a regular basis. The premises are pest-free, to the extent possible.

Kitchens and Bathrooms:

- Plumbing is in working order in the showers, sinks, and toilets.
- Kitchen, bathrooms, and common areas have posted cleaning schedules that are adhered to. Kitchen and bathrooms are cleaned at least twice daily, preferably after high-use periods.
- Sanitary napkins, tampons, disposable diapers are disposed of in specially provided containers that are lined with plastic bags and emptied daily.
- Signs are posted in the bathrooms/showers that discourage clients from sharing personal items. (Signs can be obtained from Public Health Nurse at 296-4656)

Bedding:

- Laundry facilities have adequate capacity. Dryers can attain 165F.
- Bedding is stored in such a way that used bedding does not contact other used bedding or other clean bedding.
- New clients are issued fresh bedding upon arrival at the shelter. Bedding is changed weekly.
- Bedding is laundered weekly if used by the same client for a week.
- Soiled bedding is washed immediately.
- Mats are washable and covers are intact or adequately repaired. Mats are wiped down with a 1:10 bleach solution or other sanitizing solution if not used by the same client.

Client Belongings:

- Client belongings are stored in such a way that one client's possessions are not in contact with another client's possessions. Items hung on hooks have enough space between them so they don't touch. This helps control the spread of scabies and lice.
- Shelters encourage clients to not share personal items such as toothbrushes, combs, brushes, razors, or any tattoo, piercing, self-mutilation ("cutting"), or injection implements in order to reduce the risk of infection or infestation.

CLIENT HEALTH

It is important to have some basic health information about clients in shelter settings in order to:

- a) **Better plan for their care**
- b) **Ease or prevent discomfort and suffering**
- c) **Help prevent the spread of disease from sick to healthy clients**

Procedural Recommendations:

- Ensure that the shelter has a mechanism for referring clients with no health care provider.
- Make sure that any client who appears to be ill or injured is questioned and referred to a health care provider. (see “Communicable Disease Symptom Identification and Referral”)
- Briefly screen clients who seek help or who appear ill or injured for emergent medical and psychiatric needs they may have including detox, emergency care, and referral to a health care provider.
- For shelters where a stay of greater than one week is anticipated or documented, a more detailed health intake should be conducted. Collect basic health information from clients including: current symptoms, medications, allergies, usual health care provider, emergency contact name and phone number, next of kin.
- Register all shelter clients daily. This is important in case of fire or other disaster, or in the event of an out break of TB or other infectious illness to help determine who was exposed.

The following sample policies, protocols, and guidelines are available from Seattle-King County Health Care for the Homeless Network. They have been developed by the HCHN Public Health Nurse and are included in this document as appendices. Call (206) 296-5091 for further information on these topics.

Sample Policy – Topics:

- Basic Health & Safety Standards/Communicable Disease Control
- Standard Precautions in the Shelter Setting
- Blood/Bodily Fluid Exposure
- Blood/Bodily Fluid Clean-up Protocol
- Laundry Hygiene in the Shelter Setting
- Scabies Policies and Procedures
- Lice Policies and Procedures
- Staff Health
- General Cleaning
- Kitchen Hygiene

**CLIENT HEALTH
COMMUNICABLE DISEASE SYMPTOM IDENTIFICATION AND REFERRAL**

Early identification of clients who present with signs or symptoms which may indicate the presence of a communicable disease can help reduce the risk of disease outbreaks.

Symptom	Response
Persistent cough	<p>Screen client for tuberculosis*:</p> <ul style="list-style-type: none"> Has cough lasted three weeks or longer? Has the client lost weight recently or notices clothing fits more loosely? Is the client extremely fatigued? Does the client have a fever? Does the client sweat heavily at night? <p>Clients who respond affirmatively to three weeks of coughing and who also have one or more of the other symptoms listed above will be referred to a health care provider for evaluation as soon as possible.</p> <p>To the best of their ability shelter staff will then:</p> <ul style="list-style-type: none"> • Separate persistently coughing clients from the general population. • Instruct persistently coughing clients to cover their cough with their inner elbow or shirt, jacket, or Kleenex tissue. • Provide masks for clients to assist with covering their cough. • Refer coughing clients to on-site health care providers or nursing staff. <p>These measures may also help limit the spread of colds, flu, pertussis and other airborne illnesses/diseases. In addition they may assist the client in getting help for other chronic respiratory problems such as asthma, emphysema, or allergies which may share similar symptoms (such as persistent coughing).</p>
Diarrhea or Vomiting (> 2-3 days)	<p>Encouraged client to see a health care provider as soon as possible. Instruct client to observe stringent hand washing and/or frequent use of alcohol-based hand rub.</p>
Itchiness, Persistent scratching, Unusual rash	<p>Refer client to a healthcare provider as soon as possible.</p>
Untreated lice or scabies	<p>Allow client to stay the night, but send them to a health care provider for treatment as soon as possible.</p>

* Please see the Seattle-King County TB Control Guidelines for Homeless Service Agencies for more information about procedures related to TB control.

STAFF HEALTH

Procedural Recommendations:

- Shelters should maintain a *daily census* listing all staff, volunteers, and clients who are at the facility. This practice serves both security and infection control purposes. For example, if a person with a case of active TB is found to have stayed at the shelter, a daily census allows health department officials to know who was at the site when and to determine who may have been exposed. In the event of an evacuation or other emergency, roll call can be taken to avoid losing anyone.
- A TB counseling, screening, and prevention program for homeless agency staff—including volunteers who expect to work for cumulative hours of more than 10 hours—should be established to protect both staff and clients. Screening requirements should be included in the agency TB policy, in job descriptions, and in personnel policies. All homeless shelters should have a written and enforced policy that staff will be required to show proof of TB screening.
- Agencies should appoint one person responsible for documenting TB status and skin-test results of all staff and volunteers. The tuberculosis and immune status of staff members is confidential health information and individual privacy needs to be protected by law.
- If a client at the shelter is found to have active tuberculosis, the shelter manager and staff will cooperate with the Health Department's investigation of the case.

Immunizations:

- Staff are strongly encouraged to bring their immunization status up to date including tetanus, measles, and rubella.
- Staff are encouraged to obtain flu vaccines each flu season, and to be vaccinated against Hepatitis B.

TB Screening & Testing*:

- Public Health—Seattle & King County recommends different TB screening practices for homeless agency staff than it does for their clients. These recommendations are based on well-researched models of TB control and efficient use of resources.
- All homeless agency staff should be screened for TB every 6-12 months, depending on the incidence of active TB cases at your facility.
- Staff that have not had documented TB screening with a skin test within the last 12 months will be required to undergo two step baseline TB skin testing (1-3 weeks apart).
- The first TB skin testing should be done prior to or on the first day of employment.
- Homeless agency staff who have positive PPD test results should be identified and evaluated to rule out a diagnosis of active TB.
- Staff who are symptomatic (show signs of disease) or suspected of having active TB should be immediately excluded from the workplace until confirmed non-infectious. They should also be required to have an immediate medical evaluation through the TB Clinic at Harborview Medical Center, a Public Health Clinic site, or their private medical provider. The medical evaluation will include a PPD and/or chest x-ray within 48 hours.
- Immunocompromised staff/volunteers need TB screening by symptom review and chest x-ray since TB skin testing may be falsely negative for these people. They also need informed counseling of potential risk of acquiring TB on the job due to their medical condition.

* Please see the Seattle-King County TB Control Guidelines for Homeless Service Agencies for more information about procedures related to TB control.

STAFF TRAINING

Adequate staff training is an important line of defense against illness and injury in shelter settings. Therefore shelters should have a training plan that includes the following topics:

- Basic shelter-oriented First Aid
- CPR
- Working with difficult clients
- Communicable disease control – Including tuberculosis and blood-borne pathogens (Hepatitis B, C, and HIV/AIDS)
- Safe Food Handling
- Fire safety
- Disaster preparedness

Resources

General Resources

Health Care for the Homeless Information Resource Center
<http://www.bphc.hrsa.gov/hchirc/>

National Health Care for the Homeless Council & Clinician's Network <http://www.nhchc.org/>
Health Care for the Homeless "Mobilizer": A free email publication to help you can stay current on national policy developments affecting homelessness and health care.
Subscribe or view back issues at <http://www.nhchc.org/mobilizer.html>

Public Health – Seattle & King County: Health Care for the Homeless Network
<http://www.metrokc.gov/health/hchn/index.htm>

Communicable Disease Control: Hand Washing

Center for Disease Control: Hand Washing Information
<http://www.cdc.gov/ncidod/op/handwashing.htm>

Public Health – Seattle & King County: Hand washing & cover your cough posters
<http://www.metrokc.gov/health/stopgerms/>

Communicable Disease Control: Food Handling

Public Health - Seattle & King County Food Protection Program
<http://www.metrokc.gov/health/foodsfty/>

WA Department of Health Food Safety Program
<http://www.doh.wa.gov/ehp/sf/food/food.htm>
<http://www.doh.wa.gov/ehp/sf/food/FoodRuleMain.htm> (Food Code & May 2005 changes)
WA Food Code for donated foods:
<http://www.leg.wa.gov/WAC/index.cfm?section=246-215-151&fuseaction=section> or
<http://www.doh.wa.gov/ehp/sf/Pubs/FoodRule/food-donations-guidelines-1204.doc>

Environmental Safety: Injury Prevention

American Red Cross: Anatomy of a First Aid Kit
<http://www.redcross.org/services/hss/lifeline/fakit.html>

Emergency Preparedness: A Manual for Homeless Service Providers
UMASS John W McCormack Graduate School of Policy Studies - The Center for Social Policy
<http://www.mccormack.umb.edu/csp/publications/EmergencyPreparedness.pdf>

Public Health - Seattle & King County:
AIDS/HIV Program: Safe, Legal, and Free Disposal of Sharps
<http://www.metrokc.gov/health/apu/resources/disposal.htm>

Recommended Shelter Health and Safety Best Practice Guidelines – July 2005
Developed by Health Care for the Homeless, Public Health – Seattle & King County

Disaster Preparedness: Key topics, tips and fact sheets

<http://www.metrokc.gov/health/disaster/>

Smart Kids! Safe Kids! Injury Prevention Program

<http://www.metrokc.gov/health/ems/smartkids.htm>

Violence & Injury Prevention Unit: Fall Prevention for the Elderly

<http://www.metrokc.gov/health/ems/fallprevention.htm>

US Consumer Product Safety Commission: Childproofing Your Home

<http://www.cpsc.gov/cpscpub/pubs/grand/12steps/12steps.html>

Environmental Safety: Burn Prevention

Seattle Fire Department:

Fire Drill Planning FAQ <http://www.seattle.gov/fire/pubEd/business/evacuationFAQ.htm>

Fire Extinguishers Fact Sheet <http://www.seattle.gov/fire/pubEd/brochures/extinguishers.pdf>

Fire Fact Sheets <http://www.seattle.gov/fire/pubEd/brochures/brochures.htm>

Seattle Fire Code <http://www.seattle.gov/fire/FMO/firecode/firecode.htm>

Smoke Alarms <http://www.seattle.gov/fire/pubEd/smokealarms/smokeAlarms.htm>

Environmental Safety: Sanitation and Hygiene

Public Health - Seattle & King County:

Drinking Water Program <http://www.metrokc.gov/health/water/index.htm>

Public Health Webpage Directory – Pest control links

<http://www.metrokc.gov/HEALTH/portal/pests.htm>

Toxic Hazards – Indoor air quality <http://www.metrokc.gov/health/hazard/indoorair.htm>

WA Department of Health Division of Environmental Health - Office of Drinking Water

<http://www.doh.wa.gov/ehp/dw/>

Client Health: Communicable Disease Symptom Identification and Referral

Boston Health Care for the Homeless Program & National Health Care for the Homeless Council: O'Connell, J. (Ed). The Health Care of Homeless Persons: A Manual of Communicable Diseases & Common Problems in Shelters & on the Streets. June 2004. Available for \$15 at <http://www.nhchc.org/publications.html>

Health Care for the Homeless Clinicians Network - Healing Hands February 2005 Issue "Bugs that Bite: Helping Homeless Patients and Shelter Staff Cope". Deals with lice, scabies, bedbugs, and more. <http://www.nhchc.org/Network/HealingHands/2005/Feb2005HealingHands.pdf>

National Tuberculosis Center: Shelters and TB: What Staff Need to Know (18-minute training video about how to prevent the spread of TB in homeless shelters). Order or view online at: http://www.nationaltbcenter.edu/products/product_details.cfm?productID=EDP-11

Public Health - Seattle & King County:

Alcohol and Other Drug Prevention (AODP) – Inpatient and outpatient treatment and communities <http://www.metrokc.gov/HEALTH/atodp/treatment.htm>

Health Care for the Homeless Network – About homelessness and health <http://www.metrokc.gov/HEALTH/hchn/homelessness.htm>

Health Care for the Homeless Network – Health care resources for people experiencing homelessness <http://www.metrokc.gov/HEALTH/hchn/healthcare.htm>

Health Care for the Homeless Network - Training & technical assistance for homeless programs <http://www.metrokc.gov/HEALTH/hchn/training.htm>

Tuberculosis Prevention and Control Guidelines for Homeless Service Agencies in Seattle-King County, Washington <http://www.metrokc.gov/health/tb/tbguidelines.pdf>

Staff Health

Public Health - Seattle & King County:

Communicable Diseases and Epidemiology – Hepatitis B Fact Sheet <http://www.metrokc.gov/HEALTH/prevcont/hepbfactsheet.htm>

Communicable Diseases and Epidemiology - Measles (Rubeola) in adults <http://www.metrokc.gov/HEALTH/prevcont/measlesadults.htm>

Communicable Diseases and Epidemiology – Tetanus fact sheet <http://www.metrokc.gov/HEALTH/prevcont/tetanus.htm>

Immunization Program – Fact sheets and where to get immunizations <http://www.metrokc.gov/HEALTH/immunization/>

Immunization Program – Flu Season <http://www.metrokc.gov/HEALTH/immunization/fluseason.htm>

Immunization Program – Occupational immunizations <http://www.metrokc.gov/HEALTH/immunization/occupation.htm>

Staff Training

American Red Cross – King & Kitsap Counties:

Class Calendar <http://www.seattleredcross.org/health/classes/calendar.asp>

Class Descriptions <http://www.seattleredcross.org/health/GetTrained/descriptions.htm>

National Health Care for the Homeless Council: Training and Education

<http://www.nhchc.org/training.html>

Public Health - Seattle & King County:

Food Protection Program: How to get your Food Worker Permit <http://www.metrokc.gov/health/foodsfty/foodhandlerscard.htm>

Health Care for the Homeless Network: Training & technical assistance for homeless programs <http://www.metrokc.gov/health/hchn/training.htm>

Seattle Fire Department:

Medic II Program: Free CPR Classes

<http://www.cityofseattle.net/fire/medics/medicTwo.htm>

Workplace Fire Safety Training Videos Fact Sheet

<http://www.ci.seattle.wa.us/fire/pubEd/brochures/training%20videos.pdf>

Sample Policy: Standard Precautions in the Shelter Setting

TITLE: Standard Precautions as it Relates to Infection Control

SCOPE: Homeless shelter staff and volunteers who may possibly face contact with bodily fluids or other potentially infectious materials as a result of performing their job duties.

PURPOSE: To provide guidelines to agency management, staff, and volunteers regarding the use of Standard Precautions to minimize the risk of employees and volunteers coming in contact with bodily fluids which may contain blood-borne pathogens as well as other infectious agents.

RESPONSIBILITIES

Agencies shall:

1. Provide opportunity for the staff to be trained in the control of infectious diseases (including blood borne pathogens) as it pertains to the shelter setting. Agencies may contact Health Care for the Homeless at (206) 296-5091 to arrange training free of charge.
2. Make every attempt to achieve levels of practice as outlined in the Basic Shelter Health and Safety Standards, Staff Health Policy, and other applicable Health and Safety Policies recommended by Public Health - Seattle & King County.
3. Provide all equipment needed to achieve appropriate hand washing (*hot and cold running water, soap, paper towels*). This equipment should be accessible to employees at all times.
4. Provide employees with reasonable access to *personal protective apparel* such as *latex gloves (nitrile gloves must be made available in all situations for employees with sensitivity to latex), goggles, protective gowns, and CPR shields*.
5. Have a plan in place for post-exposure to potentially infectious materials and employees will be trained in its use.
6. Outline basic procedures for all employee duties that may involve contact with bodily fluids or other potentially infectious materials. Such duties include but are not limited to: providing assistance with personal hygiene, handling soiled laundry, providing assistance to a sick client, providing first aid, providing CPR, and cleaning up after spillage of bodily fluids. In all such cases the agency will mandate a Standard Precautions approach, which is simply an infection control approach that treats all body fluids as potentially infectious. The agency may consult with a Health Care for the Homeless Public Health Nurse for assistance with outlining these duties (206) 296-5091.

Employees Shall:

1. Agree to follow the procedures regarding duties which may involve contact with bodily fluids and other potentially infectious materials.
2. Immediately report any significant exposure incident to the supervisor. Contact of the employee's non-intact skin (chapped, cracked, scratched or otherwise open), eye, or mucous membrane with blood or other potentially infectious material is a significant exposure.

Duties Which May Expose Employees in the Shelter Setting to Potentially Infectious Materials

First Aid and CPR:

Employees who are trained in First Aid and CPR may elect to assist clients needing these interventions. The agency should provide equipment to reduce the risk of infection while rendering such aid. Equipment that should be available and accessible to the employees includes:

- *Latex gloves*
- *CPR masks*
- *disposable or cotton gowns that tie in the back*
- *safety goggles*
- *clean-up materials**

Assessment of wounds, skin conditions, scalp or hair problems:

Clients may ask staff to examine wounds, cuts, burns, injuries, skin conditions, or to check for the presence of lice or scabies. Staff should don *latex gloves* when asked to do any type of examination beyond visual. The agency should make *latex gloves* available for such occasions.

Assisting with personal hygiene or toileting:

Clients may request assistance by staff with hygiene (dental care, care of dentures or oral prostheses, assistance with bathing or cleaning up after a bowel movement or urination, changing diapers, cleaning up spill of menstrual fluid, assistance with removal of head lice or lice eggs, etc.) The agency should supply *latex gloves* for such purposes, and staff should be able to use *gowns* if they feel they need greater protection. *Diaper changing areas* should be equipped with *a lined trash can, spray bottle of bleach solution, protective covering (such as old computer paper), paper towels, and gloves.*

Assisting a sick client:

Clients who are vomiting, drooling, sweating profusely, or being incontinent of stool or urine may request assistance with cleaning up or changing clothes. The agency should provide *latex gloves, reusable or disposable gowns* and appropriate *supplies for cleaning the environment* as needed (mop, bleach, bucket, paper towels, etc.)

Assisting Clients Who Have Soiled Bedding or Laundry:

Refer to the sample policy on "Laundry" for details. As much as possible, have the client handle their own clothing and bedding. Wear *gloves* and a *gown* when handling soiled laundry. Encourage the client to discard any heavily soiled laundry. Heavily soiled linens should also be discarded or laundered separately and bleached.

** For information on supplies for cleaning the environment after contamination with bodily fluids (including vomit, excrement, urine, blood, saliva, mucous) please refer to the sample policy on "Blood/Bodily Fluids Clean-up Protocol"*

**Sample Policy:
Blood/Bodily Fluid Exposure**

The following information should be provided to the employee's health care provider or the Emergency Room MD immediately after any incidence of significant body fluid exposure by needle stick or contact with mucous membrane or non-intact skin.

Date and time of exposure:

What job duty was the employee performing at the time of exposure?

What sort of bodily fluid was the employee exposed to?

How much of the fluid did the employee come in contact with?

What part of the employee's body was exposed to the fluid?

How long did the employee remain in contact with the bodily fluid?

Did the employee have any breaks in the portion of their skin that contacted the bodily fluid?

In the case of a needle stick or other sharp object injury, how deeply did the needle or object penetrate, and was fluid injected into the employee?

Was the source material known to contain HIV or hepatitis B or C? (the source can be asked to voluntarily provide this information, and to volunteer to be tested for these conditions)

Sample Policy: Blood/Bodily Fluids Clean-Up Protocol

When you provide First Aid or when you clean an area or handle any items soiled with blood or bodily fluids (urine, vomit, blood, feces, semen) please take precautions to protect yourself and others from infection. Always follow these simple steps when you clean up after blood/body fluids spills:

Equipment:

- Paper towels
- Plastic garbage bags
- Kitty litter (for big spills)
- Disinfectant (bleach 1:10 dilution)
- Mop & mop bucket
- Spray bottle

Protective apparel:

- Latex gloves
- Eye/face protection (plastic goggles)
- Protective gowns or aprons

Policy/Procedures:

Spill clean-up materials are located _____ along with a copy of this document.

- 1) Put on **protective gear**. If it is possible that blood or bodily fluids may spray or splatter, wear **protective eye covering (plastic goggles)**. Put on **latex gloves**. If there is a possibility that your clothing may become soiled, put on a **protective gown** (as when handling laundry or soiled clothing). Keep the scene clear of people.
- 2) Get a **bucket or spray bottle, bleach, and paper towels or a mop** to clean the floor and other areas. If the area is large, put $\frac{1}{4}$ cup **bleach** in a gallon of **cool water** (hot water destroys the bleach). Spray the area with this solution. If the area to be cleaned is small, you can make a solution of bleach and cool water in a **quart spray bottle**. Use 1 teaspoon of bleach per quart. This bleach solution must be discarded after 24 hours. It is recommended that a fresh solution be mixed up every time it is needed.
- 3) Blot up as much of the spill and the bleach solution as possible with **paper towels**. If there is a large volume spills or vomit, use **kitty litter** to absorb. Dispose of these materials in a **plastic garbage bag**.
- 4) If you used a **mop**, rinse the mop in **bleach solution** and allow to dry. Dump the leftover solution down the drain or toilet. **DO NOT** use a sink that is normally used for food preparation.
- 5) Pick up any soiled debris (clothing, bedding, towels, or bandages) and place in a **garbage bag**. If you are finished cleaning, remove your protective gear and gloves and put them in the garbage bag. Tie off the garbage bag and place it in the regular trash. Only very large spills need to be placed in special biohazard bags and disposed of by an approved facility.
- 6) Wash your hands thoroughly. Re-stock the **clean-up kit**. If you have had significant exposure to bodily fluid (needle stick or contact with mucous membrane or non-intact skin) contact a supervisor **immediately** and follow the sample policy for "**blood/bodily fluid exposure**".

Sample Policy Laundry Hygiene in the Shelter Setting

TITLE: Laundry Procedures as it Relates to Infection Control.

SCOPE: Shelter staff, volunteers, and clients.

PURPOSE: To provide guidelines to staff, volunteers and residents who handle linens and laundry in a safe and effective manner to reduce the risk of spread of infectious diseases.

BACKGROUND INFORMATION:

For the purpose of this policy, all linens and personal laundry of clients should be considered contaminated and should be treated carefully to avoid spread of infectious disease. Scabies, lice, and other bacterial pathogens (staphylococcal and streptococcal bacteria) are difficult or impossible to see. Laundry should be handled as little as possible. If possible, clients should handle their own laundry.

POLICY/PROCEDURE:

I. General Practices

- Staff should wear *gloves* when in contact with any used or worn laundry items, whether obvious contamination is visible or not.
- *Gowns or aprons* should be worn whenever it is likely that a staff person's clothing could come in contact with laundry.

II. Laundry Washed by Shelter Staff on Premises

- Use a hot wash cycle (at least 105-110 F for 10 minutes) followed by thorough drying in a hot dryer (160 F). This process is sufficient to decontaminate laundry. No other additives such as bleach are necessary to sanitize laundry, unless stain removal is desired.
- Any kitchen laundry or other items used by staff (towels, aprons, etc) should be washed and dried in the above manner.
- Staff/agency laundry should be washed in batches separate from client bedding and clothing.
- If linens are heavily soiled with feces, large amounts of solid material should be disposed of in a toilet. Handling of feces should be avoided whenever possible. If rinsing is required, staff should take care to minimize handling and avoid splashing.
- If possible clients should be asked to rinse their own linens when they are soiled.
- Wet linens should be stored in a *plastic bag* while awaiting final wash to avoid any leaking and reduce odor.
- Dispose of linens if soiling is severe.

III. Laundry Supplied by a Laundry Service

- Linen awaiting pick up by a laundry service should be stored in a *contained bin or bag* so that laundry cannot come in contact with clients, staff, the floor, or other clean items.
- Wet bedding should be placed in a *plastic bag* inside the bin so that leaking cannot occur.
- Only large amounts of feces that can be easily removed should be disposed of in the toilet. No further rinsing or handling should be done by shelter staff.

IV. Bedding Stored for Returning Clients

- Used linen may not be transferred to a different client.
- Used bedding should be stored such that the bedding of different clients is not touching it. This will prevent cross contamination.

V. Supplies and Equipment

- Shelters should maintain *washers and dryers* in good working order or should contract with a Laundry Service for routine delivery and pick-up.
- If laundry is done on site, the water temperatures should be at least 105-110 F.
- Shelters should supply *gloves, gowns or aprons, laundry detergent, plastic bags, and plastic laundry baskets or laundry bins*.

Sample Policy: Scabies Policies & Procedures

TITLE:

Prevention and Management of Scabies Infestation at Homeless Shelters and Drop-in Centers.

SCOPE: Shelter and center staff, volunteers, and clients.

PURPOSE: To provide guidance to shelter and center staff in the prevention, identification, and management of scabies infestations in shelter clients, staff, and/or volunteers.

BACKGROUND INFORMATION:

Scabies is a skin infestation caused by a tiny insect called the “itch mite.” The scabies mites are about the size of the period at the end of this sentence. They live most of their life cycle burrowed under the skin of human beings.

The most common signs and symptoms of scabies include **severe itching and a rash**. The rash may look like red and/or crusted sores, and there may be a lot of scratch marks from itching. On some people, scaly linear “burrows” are visible where the scabies mite has actually burrowed under the skin. Symptoms usually take 2-4 weeks to develop after a contact with an infected person. Itching begins gradually over the course of several days and is often worse at night.

The rash in adults usually appears in the following places:

- between the fingers and toes
- around the belt line or naval
- in skin folds such as under the breasts, armpits, buttocks or in the groin area
- backs of knees, inner elbows, ankles, and wrists

In young children and persons with certain chronic illnesses, the rash may appear on the face or scalp and on the palms of the hands and soles of the feet.

There is a severe form of infestation known as Crusted or Norwegian scabies. It is rare, but is occasionally seen in persons with suppressed immune systems, such as persons with AIDS or other chronic illnesses. Crusted scabies appears as a scaly or flaky rash which is often white to yellowish in appearance. In many cases the client does not feel itchy despite a severe infestation. Crusted scabies is extremely contagious and difficult to treat.

The two most commonly used medications for scabies are Kwell (lindane) and Elimite. Both medications are supplied as a lotion which is applied to the entire body from the neck down. Kwell is a neuro-toxic drug which can cause neurologic problems such as seizures if used improperly. It should be used with extreme caution in people who are pregnant, nursing, or under two years of age. It is a prescription drug and should only be used by the person for whom it was

prescribed. A drug called Eurax (Crotamiton) may be prescribed for people who cannot use Kwell or Elimite. Severe cases may be treated with an oral medication in addition to the topical lotions.

Prompt and thorough treatment is essential for cure of the infestation and control of spread. In addition to treatment of a person with scabies, clothing and bedding should also be carefully laundered or isolated to prevent the re-infection or spread of the infestation.

Scabies is contagious. However, it is spread only through close or direct contact with an infected person or that person's clothing or bedding. You cannot get scabies by talking to someone with scabies, or simply by being in the same room with that person. Scabies is usually spread between family members or sexual contacts. It is most common in crowded environments including homeless shelters. Scabies can be spread among homeless persons by sleeping close to each other or by sharing clothing. Contact with infested laundry is the most likely route of transmission for shelter staff. Scabies is easily killed by carefully following the instructions outlined in this policy.

POLICY:

- All shelter staff, volunteers, and clients should utilize infection control practices, as outlined in the Health and Safety Best Practice Guidelines for Shelters (available from Health Care for the Homeless Network, 206-296-4656) so that scabies infestations will be prevented whenever possible.
- Actual or suspected cases should be identified and controlled in a timely, effective, and humane manner as is possible.
- The spread of scabies between clients, staff and volunteers should be minimized.
- Shelter and center managers are encouraged to call the Public Health Nurse Consultant at 206-296-4656 for advice and support regarding scabies or any health and safety concern.

PROCEDURE:

1. Intake Screening

Staff should observe clients for symptoms of scabies such as severe itching (which may worsen at night) and/or a red or crusted rash or evidence of scratch marks due to severe scratching.

If a client has such a rash, they should be referred for medical evaluation as soon as possible:

- A client with known or suspected scabies may stay the night at the shelter. In order to stay additional nights at the shelter, the client must demonstrate that he/she has been seen by a health care provider and that treatment, if prescribed, has been completed. Drop-in centers should encourage clients to seek care immediately.
- Treatment may be performed at the shelter so that staff can assist the client and assure adequate and safe treatment.
- If a client is known or strongly suspected to have Norwegian or Crusted scabies, that client should be referred immediately for medical evaluation. Shelter staff should advocate that the client be treated in a hospital facility where adequate isolation practices can be used, and that they not return to the shelter until treatment has been completed.

II. Treatment

If a client has been instructed by his/her medical provider to treat for scabies, shelter staff are encouraged to assist the client in completing the treatment. The following guidelines should be used along with any instructions on the medication label to assisting the client and assuring adequate treatment.

A. Application of Treatment

- Staff should explain the entire procedure to the client including the skin treatment and the need to launder or isolate clothing and bedding.
- The client should shower or bathe and then allow the skin to thoroughly cool for at least 30 minutes prior to applying the lotion.
- The client should gently massage the medication into the skin according to package or provider instructions. The most commonly prescribed medications are Lindane or Elimite lotion. The lotion should be applied from the neck down and behind the ears unless otherwise stated on the directions. Open sores should be avoided. A small amount can cover a sizable area. For most people 1 ounce of lotion is enough. Do not over apply.
- Staff should remind the client to thoroughly apply the lotion, especially to web spaces between fingers and toes and in between all skin folds. Extra attention should be given to any area where a rash is present.
- Scabies mites can hide under the fingernails. Clients should be instructed to clip their fingernails short to prevent re-infection. Lotion can be applied under the nails with a blunt toothpick or brushed on with a nail brush.
- If any skin areas are washed during the treatment, the lotion should be reapplied.
- Staff may assist if clients need physical assistance applying the lotion in hard to reach areas.
- **Gloves** should always be worn by staff when contacting client's skin and/or scabies lotions.
- Staff should not assist clients who are mentally confused and cannot understand or participate in the prescribed treatment. Such clients should be assisted by an RN or medical provider.

B. Completion of Treatment and Follow-up

- If possible, the client should shower/bathe 8-12 hours after applying the treatment to remove all lotion from the skin. (If necessary, this step can be skipped without risk to the client).
- After showering, the client should put on **freshly laundered clothing** or clothes that have not been worn for 72 hours. This includes shoes, outer coats, hats, and gloves.
- After showering, the client should be issued **fresh bedding** and their mat should be wiped down with a **standard disinfection bleach solution** (1 tsp bleach per quart of cool water).
- Generally one treatment as described above is sufficient to cure scabies. However, a medical provider may occasionally prescribe a second treatment to be completed 7-10 days after the initial treatment. Clients may need assistance and/or a reminder for the second treatment.
- Continued itching does not mean the treatment failed. It can take as long as two weeks for scabies symptoms to completely go away after treatment, however itching should decrease at least partially after 2 days. If a client continues to have severe itching several days after treatment, or if the rash appears to worsen after treatment, the client should be referred back for follow-up medical evaluation. It is possible that a client may be having a reaction to the medication. The medical provider may prescribe medication to help alleviate the itching.

C. Treatment of Bedding and Linens

- Clients should be issued *clean bedding* to use the night following the application of the treatment. The mat should be wiped down with a *standard bleach disinfection solution*.
- A *second fresh set of bedding* should be issued after the treatment is washed off.
- Bedding used by a client with scabies should be laundered according to the laundry procedures described below.

D. Treatment of Clients Clothing

Clothing worn by the infected client within the last 72 hours should be considered contaminated. This includes shoes, overcoats, hats, gloves. The newly treated client should not wear contaminated clothing until it has been treated in the following manner.

- Clothing can be laundered using a hot wash cycle followed by thorough drying in hot dryer (20 minutes on 160 F, the “high” or “cotton” setting)
- If laundering is not possible, contaminated clothing must be isolated for 72 hours before the treated client may wear the clothing again. Clothing can be isolated simply by placing the items in a sealed *plastic bag* for 3 days.
- Shelter staff should assist the client in finding *replacement clothing* as necessary.

III. Prevention of an Outbreak Situation

An outbreak is defined as the simultaneous infection of multiple clients and or staff with an infectious disease. If questions arise beyond the scope of this policy related to an outbreak situation, the On-Site RN or Shelter Manager should call the Public Health Nurse Consultant at the Health Care for the Homeless Network for specific guidance (206-296-4656).

A. Contacts

Any client who is known to have scabies should be asked to notify any sexual partners, close family members, or persons with whom the client may have slept or shared clothing. These persons should be told of the risk for scabies and referred for medical evaluation if any are having symptoms. Explain to the client that they can easily be re-infested if they continue to have direct contact with untreated family members or sexual contacts. Immunity to scabies does not develop after infection.

B. General Guidelines for Prevention of the Spread of Scabies

Scabies mites cannot live away from the human body for very long, however scabies is occasionally spread through contact with recently used/worn clothing or bedding. It is generally recommended that staff and clients take a Standard Precautions approach as outlined in the Health and Safety Best Practice Guidelines for Shelters (available from the Public Health Nurse Consultant at 296-5091). The maintenance of a clean environment and the practice of infection control standards will prevent or minimize the spread of infectious diseases such as scabies.

Any client could potentially be infested and not yet be symptomatic. For this reason the following cleaning and laundry practices should be followed *at all times* regardless of whether or not there are known cases of scabies in the shelter:

- If possible, all chairs and couches should be *plastic or vinyl covered* so that they can be wiped down daily with a *standard disinfectant*.

- Carpeted floors should be vacuumed thoroughly and daily. Seal used *vacuum bags* in a *plastic bag* and disposed of immediately. Linoleum/vinyl/wood floors are preferable.
- All laundry done at the shelter should be considered potentially contaminated and should be laundered in a hot wash cycle (105-120 F) with normal *detergent* and then thoroughly dried in a hot dryer (at least 30 minutes at 160 F). Do not overload washers or driers.
- All staff should wear a *disposable gown/apron and gloves* when in contact with dirty laundry.
- Bedding awaiting laundering should be stored in a separate container (*plastic bag, bin, or laundry cart*) so that it cannot come in contact with clean bedding, clothing or people.
- Bedding that is being held for use by any returning client will be stored in a separate plastic bag or container so that each client's bedding is always isolated.
- Laundry additives such as bleach are not necessary to kill scabies.
- Mattresses should be covered with a *washable cover* and should be wiped thoroughly with a *disinfectant cleaner* before use by any other clients.
- Clients should not sleep so close together that they can touch each other while sleeping. Intake procedure should include gathering information about symptoms (i.e. "Do you have a rash or area that is itchy?") Clients who are scratching themselves frequently should be taken aside and asked about symptoms and referred for evaluation.

C. Dress Code

- All persons (clients and staff) should wear shoes at all times.
- All persons should wear clothes that cover the thighs (no short shorts or mini skirts) so that there will be a clothing barrier when sitting in a chair.

IV. Symptomatic Staff

Staff who experience itching, should first of all, relax. The idea of scabies makes most of us start to itch, but a true infestation will present the usual symptoms. It is helpful to remember that:

- Symptoms usually take 2-4 weeks to develop
- Itching begins gradually. It is severe and worsens at night
- Scabies rash is usually found in typical places (see background section)
- Staff who experience significant symptoms of scabies should consult the on-site RN or their primary care provider and notify the provider that they may have had a contact with scabies.
- Staff who do not have health insurance can file an L&I claim to cover the cost of the visit.
- Staff are discouraged from self-treating without advice from a health care provider and are prohibited from sharing scabies lotions with any client.

V. Education

- Shelter staff should be trained in the above described procedures at the time of hire and should receive refresher training on a regular basis.
- Clients should receive verbal and written information regarding the prevention and identification of scabies including the following recommendations:
 - Avoid sharing clothing and bedding.
 - Avoid sleeping so close to another person that you are touching that person.
 - Avoid direct contact with persons that itch.
 - If you have an itchy rash or burrows on the skin, seek medical treatment and notify shelter staff immediately.

Sample Policy: Lice Policies & Procedures

TITLE: Prevention and Management of Lice Infestation in settings that serve homeless clients.

SCOPE: Shelter and center staff, volunteers, and clients.

PURPOSE: To provide guidance to shelter staff in the prevention, identification and management of lice infestations in shelter clients and/or staff and volunteers.

BACKGROUND INFORMATION

Types of lice:

- There are 3 types of lice found on humans: **Head lice** (known as pediculosis) are about 3mm long, **body lice** are about 2 mm long, **pubic lice** (also known as “crabs”) are about 2mm long and rounder in shape.
- Lice are wingless insects that live by sucking human blood. Adult lice can only live 2-3 days independent of humans. There are some claims that un-hatched nits can survive away from the host and hatch under certain conditions, however this is unlikely. Hatched nits (nymphs) must find a blood meal as soon as possible or they die before becoming full-fledged lice.
- The female louse lays eggs called *nits*. She can lay about 100 in her brief 30 day lifespan. Nits are about 1mm long ovals visible with the naked eye. Empty (hatched) nits are white or translucent. Un-hatched nits are brownish and hard to see. **Head lice nits** cement firmly to the hair shaft ¼ inch from the scalp or closer. **Body lice nits** are generally found along seam lines in clothing. **Pubic lice nits** can be found in pubic and body hair.

Symptoms of lice infestation:

- Intense itching in the infested area and irritability. Itchiness may not present as a symptom until infestation is established, about 2 weeks after lice first “move in”. Itchiness is believed to be caused by an allergic reaction to the louse’s saliva.
- Redness from scratching may be visible. Scratching can lead to secondary infections, such as staph infection.

Transmission of Lice

- Lice do not jump or fly, they can only be spread through direct physical contact with an infested person or through sharing of personal items such as hats, combs, clothing, pillows, towels, blankets, or bedding.
- **Head lice** are common in child care settings and schools. Head lice are not associated with poor hygiene as head lice like clean hair. Since children play close to one another lice can travel from child to child directly or via shared clothing, hats, combs, or brushes. Children may also bring lice home to other family members.
- **Body lice** are usually seen in adults who have limited access to hygiene facilities, and can be common in places such as shelters where conditions are crowded and clients might share personal items. Body lice travel from person to person via by direct contact or via shared clothing, bedding, and towels.
- **Crab lice** are spread sexually or via bedding and towels

POLICY:

Infection control practices should be utilized by staff, volunteers and clients of the Shelter so that lice infestations will be prevented whenever possible. Actual or suspected cases should be identified and controlled in as timely, effective, and humane a manner as possible. The spread of lice between clients, staff, and volunteers should be minimized.

PROCEDURE:

1. Intake Screening

- Upon entering the shelter, staff should discretely ask each client if they have symptoms of lice, such as itching in the head, trunk, or groin area. Assure the client that they will not be excluded from shelter or services by answering affirmatively.
- If a client complains of or is observed to have such symptoms, or if they report having had recent contact with a person diagnosed with lice, they should be referred for medical evaluation as soon as possible.
- A staff person trained to assist clients with head lice may examine the client for the presence of nits or head lice on hair follicles. Staff should wear *latex gloves* when examining a client.
- A client with known or suspected lice may stay one night at the shelter. In order to stay additional nights, the client must show a note from a medical provider indicating that they have been evaluated, and that treatment, if prescribed, has been initiated (see sample form).
- A client known or strongly suspected to have a lice infestation should be isolated as best as possible. The laundry/bedding of that client should be handled with *gloves* and not allowed to come in contact with staff hair or clothes.
- If the shelter has facilities for bathing and laundry and if the staff is trained, treatment may be performed at the shelter so that staff can assist the client and assure adequate safe treatment.
- See treatment guidelines for the 3 types of lice infestations below.

II. Diagnosis

The presence of live adult lice or viable nits is diagnostic of lice infestation:

- **Head lice** nits are typically found behind the ears and along the back of the head, however the entire scalp should be examined. Un-hatched nits are found on the hair shaft close to the scalp. Some nits resemble dandruff, but unlike dandruff they are very difficult to remove.
- **Body lice** rarely are found on the skin. Rather, they typically live on clothing, particularly in the seams. These lice appear as bugs the size of sesame seeds, with a gray-white color.
- **Pubic or crab lice** are found as nits on pubic hair, eyebrows, eyelashes, or underarm hair. Crab lice often leave a bluish stain under the skin around the chest, thighs, or abdomen.
- The skin in the affected areas of all 3 types of lice often appears reddened or scratched.

III. Treatment of Head Lice

If a client has been instructed by their medical provider to treat for lice, shelter staff who have received training in lice treatment may assist the client in completing their treatment. The following guidelines pertain to the use of Nix™ for the treatment of *head lice* and *should be used along with any instructions on the medication label to assure client safety*. If any other medication has been prescribed, staff should follow label instructions for procedure.

[Note: For the treatment of *body lice* and *pubic lice*, refer to those sections below AND TO SPECIFIC INSTRUCTIONS FROM THE PROVIDER]

A. Treatment of the Client with Head Lice

- Staff should explain the entire procedure to the client. This includes the skin treatment and the need to launder or isolate clothing, bedding, and other personal items (brushes, combs...)
- There should be a clearly communicated expectation that the client will cooperate and will follow these instructions explicitly.
- Lice are best removed by using a combination of manual combing and lice treatments.
- Both insecticidal and non-chemical treatments are available over the counter.
- The most important step of treatment is thorough and frequent combing of the hair for at least 14 days to remove lice and nits.

B. Step-by-Step Treatment Procedure for treatment and removal of head lice

- Allow yourself enough time to do a good job. It may take as long as an hour if the hair is long and thick. Work in good light.
- Apply one of the *lice treatments* as described below.
- Be sure to use an effective *nit-removal comb* such as *Licemeister®* or *LiceOut®*.
- Place a *towel* between the hair and shoulders of the person who has head lice.
- Part the hair into four sections and pin the hair with clips to prepare it for combing.
- Starting with one section. Select a small area of the section that is about 1 inch square. Start at the scalp and pull the comb all the way through to the end of the strands of hair.
- If nits remain attached to the hair shaft, comb through the hair strands again.
- After each comb-through, dip the lice comb in *hot water* and wipe it with a *paper towel*.
- Continue combing until all sections are done.
- Wash the towel and clothes that the person wore during the combing as described below.
- Wash the comb in *extra-hot (128° F) soapy water* for at least 10 minutes.
- Wash hands completely when done.

C. What chemical-free treatments are recommended?

Chemical-free treatments can be used as often as needed. They do not kill lice or nits. Rather, they slow down the lice and make them easier to comb out. These treatments include coating the hair with *HairClean 1-2-3®* or with a water-based product such as *LiceOut®* (follow instructions on the box):

1. Apply thickly to hair.
2. Cover hair with *disposable shower cap* and leave in place for at least 30 minutes.
3. Follow instructions for lice and nit removal using an *effective lice comb*.
4. Do not use these treatments at the same time the chemical treatment is used.

D. About chemical treatment: Nix®

Although Nix® is the most effective of the chemical treatments, it will not kill lice that have become resistant. Nix® can be purchased without a prescription.

1. Wash the hair with a mild shampoo (such as baby shampoo) that contains no conditioner.
2. Apply Nix® following the instructions on the box.
3. Comb the hair with a *clean lice comb* to remove the nits. Dry hair as usual.
4. Repeat Nix® treatment in 7 days.

REMEMBER: Since lice may be resistant to Nix[®] and other pesticides, *you must perform daily nit combing for 14 days after using these products to assure complete removal of lice and nits.*

E. Cautions when using Nix[®]

- **Do not use** Nix[®] when open sores are present.
- **Do not use** Nix[®] on children who are less than 2 months of age.
- Pregnant/breastfeeding women should consult their health care provider before using Nix[®].
- **Never mix** Nix[®] with other lice treatments.
- **Do not use** any other creme rinse, shampoo containing creme rinse, hair spray, mousse, gel, mayonnaise, or vinegar on the hair for at least 1 week *after* using Nix[®], because they may weaken the action of Nix[®].
- Chlorine in pool water may also deactivate Nix[®] leading to some treatment failures.
- **Never use** Nix[®] on eyebrows or eyelashes. Instead, apply petrolatum jelly for a few days and pluck off nits with fingers.
- **Never use** Nix[®] more often than recommended. It is an insecticide and can be poisonous if used improperly.

F. Additional Lice Treatment Procedures

In addition to the steps listed above, the following actions may help control the spread or re-infestation of head lice in a household:

- Check other household members for lice. Those who have lice should be treated. Do not treat someone if you do not see lice or nits in their hair.
- Guardians should notify their child's school and child care program if their child has lice.
- Wash all combs/brushes the person used in extra-hot (128.3F) soapy water for at least 10 min
- Wash all clothing (including coats, hats, scarves...) and bedding used by the infested person in the last 2 days prior to treatment.

To wash these items, do **ONE** of the following:

- Wash in **extra-hot water** or heat dry the item at temperatures >128.3 F for at least 5 minutes.
- Dry clean the item.
- Pack non-washable items in a **sealed plastic bag** for 2 days to eliminate the risk from lice that may have been dislodged onto those items.
- Upholstered furniture, carpets, bicycle helmets, sports helmets, and upholstered car seats may be vacuumed. Change the **vacuum cleaner bag** after use, place it in a sealed plastic bag, and put the bag in the outside garbage.
- **Do not use lice sprays!** They may cause toxic or allergic reactions.

G. What to do if lice come back or the treatment fails to work

- If lice come back, it is usually because nits or newly hatched lice were not removed with the first treatments.
- Follow the combing instructions as described.
- **You may use the *chemical-free treatments*** as often as needed.
- **You may use Nix[®]** again after 7 days have passed since the last Nix[®] application.
- Regardless of which treatment you use, the most important step is to **comb** out the lice and nits completely.

H. Additional information

- National Pediculosis Association <http://www.headlice.org/>
- Centers for Disease Control <http://www.cdc.gov/ncidod/dpd/parasites/lice/>

IV. Treatment of Body Lice

A. Person

- Often the person with body lice should simply be encouraged to take a shower with soap and warm water to dislodge any lice that may be on their body.
- Sometimes providers may prescribe treatment with *Nix*[®] or other *chemical treatments* (follow provider or package directions).

B. Clothing

- Body lice live in the seams of the clothing. It is vital to thoroughly wash and dry all clothing that has been worn by the client within the last 7 days.
- Wash clothes in *hot soapy water* on the regular wash cycle.
- Dry clothing in a *dryer* for 30 minutes on the hottest setting. Do not overload the dryer.
- It may be prudent to wash all of the client's clothing if possible.
- Clothing that can't be washed can be dry cleaned or placed in sealed plastic bags for 1 week.

C. Bedding:

- Wash all bedding and linens in *hot soapy water* (105-120 F) and dry them thoroughly in a *hot dryer* (at least 30min at 160 F). Make sure the dryer is not over-loaded.
- Special laundry additives/disinfectants are not necessary to kill lice or nits.
- All staff that work with laundry should wear a protective *disposable gown/apron and gloves* to prevent direct contact with dirty linens. Staff should treat *all* linens and bedding as though they could potentially be infested, not just the linen used by someone with a known diagnosis (see Laundry Sample Policy).
- Dirty bedding that is awaiting laundering should be stored in a separate container (such as a *plastic bag or bin*) so that it cannot come in contact with clean bedding.
- Bedding that is being held for use by any returning client will be stored in a separate plastic bag or container so that client's bedding is always isolated.
- Mattresses should be covered with a *washable cover*. Mattresses or mats should be cleaned with a *disinfectant cleaner* before use by any other clients.
- Clients should be spaced so they don't come in contact with each other while sleeping.
- Clients who have backpacks and bed rolls may need assistance in determining what needs to be laundered and in accessing laundry facilities.

V. Treatment of Pubic or Crab Lice

- A health care provider should prescribe treatment.
- Assist the client in following the directions given.
- Assist with laundering clothes and bedding used by the client in the last 3 days.

VI. Notification and Treatment of Contacts

- Any client known to have body or crab lice should be asked to notify any sexual partners, close family members, or persons with whom they may have slept or shared clothing or other personal items. These persons should be told of the risk for lice transmission and referred for evaluation and treatment.
- Explain to the client that they can easily be re-infested if they continue to have direct contact with untreated family members or sexual contacts.

- Be on the look-out for other clients complaining of itching or seen scratching excessively. Inquire discretely about symptoms and refer for evaluation.

VII. Preventive Treatment of the Environment

It is generally recommended that staff and clients take a Standard Precautions approach to the maintenance of a clean environment. Consistent practice of infection control standards, as outlined in the Health and Safety Standards for Shelters, will help prevent or minimize the spread of infectious diseases and pest infestations such as lice. Any client could potentially be infested with lice and not yet be symptomatic. For this reason the following cleaning and laundry practices should be followed *at all times* regardless of whether there are known cases of lice in the shelter.

- All chairs and couches that are plastic or vinyl covered should be wiped down daily with a standard disinfectant.
- Cloth upholstered furniture should be vacuumed daily.
- Carpeted floors should be vacuumed thoroughly on a daily basis.
- All laundry done at the shelter should be considered potentially contaminated and should be laundered in a hot wash cycle (105-120 F) with normal detergent and then thoroughly dried in a hot dryer (at least 30 minutes at 160 F). Drying is the most important part of this process. *Do not overload the dryer!*
- All staff should wear a *disposable gown/apron* and *gloves* when contacting dirty laundry.
- All staff should wear clothes that cover the thighs at all times (no short shorts or mini skirts) so that there will be a clothing barrier when sitting in a chair.
- All people in shelter should wear shoes in public areas.

VIII. Symptomatic Staff

- Staff experiencing itching should relax and not panic. The *idea* of lice makes most of us start to itch, but *a true infestation is only transmitted through direct contact with an infested person or that person's clothing.*
- Staff who experience significant symptoms of lice or who have found nits on their person should consult their primary care provider and notify the provider that they may have had exposure to lice.
- Staff who have actual lice infestations should be asked to notify their intimate contacts so that they may also be treated if necessary. This will discourage re-infestation.

IX. Education

- Shelter staff should be trained in control of communicable diseases including lice infestation.
- In the event of a lice infestation at your agency, clients should receive verbal and written information regarding the prevention and identification of lice, including the following:
 - a. *Avoid* sharing clothing, hats, pillows, blankets, combs, and hairbrushes.
 - b. *Avoid* sleeping close enough to another person that you are touching that person.
 - c. *Avoid* direct contact with persons that itch.
 - d. If you or someone you know has an itchy rash, or has nits, seek medical treatment immediately and follow through with the prescribed treatment.

X. Additional Handouts Available From Public Health

- **Lice Aren't Nice**
Patient information about lice and lice treatment.
- **Parent Checklist for Lice Infestation**
Checklist designed to assist parents with the management of lice treatment.
- **Staff Checklist for Lice Infestation**
Checklist designed to assist staff with the management of lice outbreaks.
- **Sample Letter**
Letter to schools and child care providers regarding lice diagnosed at shelter.
- **Sample Note**
Note to health care provider regarding shelter client suspected of having lice.
- **Shelter Health and Safety Standards**
General guidelines regarding the control of communicable diseases in shelter settings.

REFERENCES

Recommended Shelter Health and Safety Best Practice:

Chin, James (Ed). Control of Communicable Diseases Manual. American Public Health Association, 17th Ed. 2000.

O'Connell, J. (Ed). The Health Care of Homeless Persons: A Manual of Communicable Diseases and Common Problems in Shelters and on the Streets. Boston Health Care for the Homeless Program. 2004.

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Estes, S.A. & Estes, J.: *Therapy of Scabies: Hospitals, Nursing Homes and the Homeless*. Seminars in Dermatology. Vol 12. No 1. March 1993. p26-33.

Estes, S.A.: The Diagnosis and Management of Scabies. Reed & Carnrick. Piscataway, NJ. 1988.

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Donnelly, E., and Lipkin, J: *Pediculosis Prevention and Control Strategies of Community Health and School Nurses*, Journal of Community Health Nursing. 1991, 8(2). p85-95.

Halpern, J.S.: *Recognition and Treatment of Pediculosis in the Emergency Department*, Journal of Emergency Nursing. 1994. April 20(2). p103-133.

O'Connell, J. (Ed). The Health Care of Homeless Persons: A Manual of Communicable Diseases and Common Problems in Shelters and on the Streets. Boston Health Care for the Homeless Program. 2004.

ATTACHMENT H
(Human Services Resource Guide)



Bus Transportation

Bus Transportation (continued)

Metro Rider Information Line
(206) 553-3000

Routes At Major Intersections

156th Ave SE & Main Street

Distance: 0.2 mile E

Route MT 229 Seattle/Overlake Transit Center

Route MT 245 Factoria/Kirkland

156th Ave. NE & Main Street

Distance: 0.2 mile E

Route MT 229 Overlake Transit center

Route MT 245 Kirkland

Route MT 890 Crossroads

148th Ave. NE & Main Street

Distance: 0.3 mile W

Route MT 222 Overlake

Route MT 247 Overlake

148th Ave. SE & Main Street

Distance: 0.3 mile W

Route MT 222 Bellevue

Route MT 247 Kent Boeing

Lake Hills Blvd. & 154th Ave. SE

Distance: 0.5 mile S

Route MT 272 University District

Lake Hills Blvd. & 154th Ave. SE

Distance: 0.5 mile S

Route MT 272 Eastgate

NE 8th St. & 156th Ave. NE
Distance: 0.7 mile N

Route MT 230 Bellevue Transit Center

Route MT 253 Bellevue Transit Center

Route 261 Seattle

NE 8th St. & 156th Ave. NE

Distance: 0.8 mile NE

Route MT 230 Redmond Park and Ride

Route MT 926 Eastgate Park and Ride

164th Ave. NE & Main St.

Distance: 0.8 mile E

Route MT 225 Overlake Transit Center

Route MT 296 Crossroads

164th Ave. SE & Main Street

Distance: 0.8 mile E

Route MT 225 Seattle

156th Ave. NE & NE 10th St.

Distance: 0.8 mile N

Route MT 253 Bear Creek Park and Ride

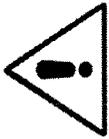
Route MT 253 Redmond Park and Ride

Route MT 261 Overlake Park and Ride

140th Ave. NE & NE 1st Place

Distance 0.8 mile

Route MT 889 International School



Crisis Services

Crisis Clinic

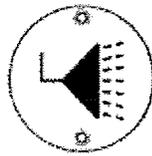
Crisis Line
1-866-427-4747

Eastside Domestic Violence Program

Crisis Line
(425) 746-1940

King County Sexual Assault Resource Center

Crisis Line
1-888-998-6423



Shower Facilities

Bellevue Aquatic Center

601-153rd Avenue NE
(425) 452-4444
Distance: 0.75 miles
Fee: \$2.00

Preferred times are 8:00 am - 10:00 am or 8:00 pm - 9:00 pm weekdays and 8:00 am - 3:00 pm weekends



Laundry Self-Service

Kwik N' Cleaner

2311 156th Ave NE
(425) 746-8813
Distance: 1.46 miles

Overlake Village

Maytag Laundry
14910 NE 24th St
Redmond, WA
(425) 881-0303
Distance: 1.52 miles



Supplies/Hardware/Auto

Schuck's Auto Supply

15425 NE 24th St
(425) 747-5888
Distance: 1.51 miles

Home Depot

325 120th Ave NE
(425) 451-7351
Distance: 2.22 miles

Seattle Hardware Co

14505 NE 20th St
(425) 456-3385
Distance: 1.34 miles

Big 5 Sporting Goods

4055 Factoria Blvd SE
(425) 747-5230
Distance: 2.96 miles

Napa Auto Parts

2033 140th Ave NE
(425) 746-5801
Distance: 1.54 miles

Fred Meyer

2051 148th Ave. NE
Redmond, WA
(425) 556-8000
Distance: 1.32 miles



Thrift Stores

Children's Hospital & Thrift
15137 NE 24th St
Redmond, WA
(425) 746-3092
Distance: 1.5 miles

St Margaret's Thrift Shop
4228 Factoria Blvd SE
(425) 641-6830
Distance: 3.16 miles

Goodwill Industries
14515 NE 20th St.
(425) 649-2080
Distance: 1.34 miles

Value Village
16771 Redmond Way
Redmond, WA
(425) 883-2049
Distance: 4.45 miles



Clothing Banks

Belleuve Seventh Day Adventist Church
Open Wednesdays 9:30 a.m. to noon
15 140th Avenue NE
(425) 746-1763
Distance: 0.79 miles

YWCA Working Wardrobe
Business attire for men and women with job interviews or work
16601 NE 80th Street, Redmond
(425) 556-1354
Distance: 4.59 miles



Houses of Worship

New Hope Ministries
15760 NE 4th St
(425) 746-3730
Distance: 0.39 miles

Cross Of Christ Lutheran Church
411 156th Ave NE
(425) 746-7300
Distance: 0.32 miles

St Louise Catholic Church
141 156th Ave SE
(425) 747-4450
Distance: 0.22 miles

Calvary Lutheran Church
16231 NE 6th St
(425) 401-1595
Distance: 0.70 miles

Church Of Holy Apostles
15220 Main St
(425) 644-1613
Distance: 0.0 miles

Unity Church Of Bellevue
16330 NE 4th St
(425) 747-5950
Distance: 0.77 miles

Ministerio De Fortalez Church
35 148th Ave SE
(425) 603-0646
Distance: 0.3 miles

Church Of Jesus Christ Of LDS
14536 Main St
(425) 747-4250
Distance: 1.21 miles

Bellevue Christian Reformed
1221 148th Ave NE
(425) 747-5288
Distance: 0.84 miles

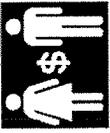
Lake Sammamish Foursquare Church
14434 NE 8th St
(425) 463-7000
Distance: 0.72 miles

Islamic Center Of Eastside
14700 Main St
(425) 746-0398
Distance: 0.36 miles

Overlake Park Presbyterian Church
1836 156th Ave NE
(425) 746-8080
Distance: 1.15 miles

St Peters United Methodist Church
17222 NE 8th St
(425) 747-3210
Distance: 1.32 miles

Temple B'Nai Torah
15727 NE 4th St.
(425) 603-9677
Distance: 1.32 miles



Employment

Bellevue Community College

Community Career Center / Women's Center
Worksource Affiliate Site
3000 Landerholm Circle, Bldg. B, Room B231
(425) 564-2279
Distance: 1.85 miles

disAbility Resource Network

Vocational support and case management for individuals with disabilities
16315 NE 87th Street, Suite B3, Redmond
(425) 558-0993
Distance: 4.90 miles

Community Psychiatric Clinic

Vocational services for individuals recovering from mental illness
13133 Bel-Red Road
(425) 454-3021
Distance: 1.58 miles

Jewish Family Service

Eastside Multi-Ethnic Center
Bilingual Career Counselors and Case Managers specializing in immigrant and refugee communities
15821 NE 8th Street, Suite 210
(425) 643-2221
Distance: 0.60 miles



Medical/Dental Clinics

Eastgate Public Health Center

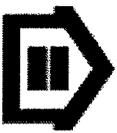
Services provided on sliding scale to non-insured individuals
14350 SE Eastgate Way
(206) 296-4920
Distance: 2.18 miles

Community Health Centers of King County

Medical and Dental Care to insured and non-insured individuals
16315 NE 87th Street, Suite, B-6, Redmond
(425) 882-1697
Distance: 4.90 miles

Rotacare Free Medical Clinic

No appointments. Open Saturdays from 9:30-11:30
Hopelink
14812 Main Street
Distance: 0.28 miles



Shelters

Congregations for the Homeless

Indoor shelter for single adult men hosted by local faith communities
(425) 749-8369 or (206) 295-7803

The Landing

14230 Bel-Red Road
Indoor emergency shelter for young adults age 18-23. Open 9 pm - 9 am Sunday through Thursday
Bellevue Family YMCA
(425) 822-9349 or 206-810-4083
Distance: 1.83 miles



Hospitals

Group Health Hospital

2700 152nd Avenue NE
(425) 883-5151
Distance: 2.22 miles

Overlake Hospital

1035 116th Avenue NE
(425) 688-5000
Distance: 2.41 miles



Employment (continued)

Labor Ready

827-108th Ave. NE, Suite A
(425) 688-8878
Distance: 2.86 miles

Westminster Chapel Job Support Ministry

1346 NE 24th Street
(425) 562-8028
Distance: 1.82 miles



Legal Information

Catholic Community Services (Bellevue)

12828 Northup Way Ste 100
(425) 284-2211
Distance: 1.99 miles

Eastside Legal Assistance Program

(425) 747-7274

Northwest Women's Law Center

907 Pine Street, Ste. 500 (Seattle)
(206) 621-7691
Distance: 10.42 miles

Washington Law Help

206-464-1519



Government/ Municipal Court

Social Security Administration
505-106th Avenue NE, Suite 301
(800) 772-1213
Distance: 2.93 miles

Washington State Department of Social and Health Services (DSHS)
14360 SE Eastgate Way
(206) 341-7404 or (800) 662-6715
Distance: 2.18 miles

King County District Court
585 112th Avenue SE
(206) 205-9200 or (800) 325-6165
Distance: 2.56 miles

Bellevue City Hall
450-110th Ave. NE
(425) 452-6802
Distance: 3.37 miles

Bellevue Mini-City Hall
Crossroads Bellevue Shopping Center
(425) 452-2800



Food Banks and Feeding Programs

Hopelink
Food Bank
Emergency Feeding Services
14812 Main Street
(425) 943-7555
Distance: 0.28 miles

World Impact Network
Food Bank
2015 Richards Road
(425) 643-8246
Distance: 1.83 miles

Emergency Feeding Program
Emergency Food Packs
St. Andrew's Lutheran Church
2650 148th Ave. SE
(425) 653-1652
Call for other distribution locations in Bellevue
Distance: 1.65 miles

Salvation Army
Weekday Evening Community Dinners
911 164th Ave. NE
(425) 452-7300
Distance: 1.36 miles



Grocery Stores

QFC Quality Food Center
 15600 NE 8th St # K1
 (425) 865-0282
 Distance: 0.53 miles

Trader Joe's Co
 15400 NE 20th St
 (425) 643-6885
 Distance: 1.25 miles

Belleuve Oriental Mart
 900 160th Ave NE # 2
 (425) 747-1351
 Distance: 0.64 miles

Uwajimaya Inc
 (425) 747-9012
 15555 NE 24th St
 Distance: 1.51 miles

Crossroads Mini Mart
 1422 156th Ave NE
 (425) 641-8571
 Distance: 0.91 miles

7-Eleven
 (425) 885-0197
 15521 Bel Red Rd
 Distance: 1.53 miles

Top Food & Drug Bakery
 15751 NE 15th St
 (425) 748-1300
 Distance: 0.96 miles

Safeway
 1645 140th Ave NE
 (425) 373-5263
 Distance: 1.36 miles



Post Office

US Post Office
 15731 NE 8th St
 (800) 275-8777
 Distance: 0.57 miles



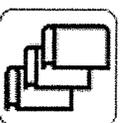
Gas Stations

BP
 15615 NE 8th St
 (425) 957-0306
 Distance: 0.54 miles

Lake Hills Texaco
 106 148th Ave NE
 (425) 746-1244
 Distance: 0.29 miles

7-Eleven
 827 164th Ave NE
 (425) 747-5106
 Distance: 0.88 miles

7-Eleven
 15 148th Ave NE
 (425) 746-7564
 Distance: 0.30 miles



Libraries

King County Library
 Crossroads Shopping
 Center
 15600 NE 8th St
 (425) 644-6203
 Distance: 0.53 miles

Lake Hills Library
 15228 Lake Hills Blvd
 (425) 747-3350
 Distance: 0.53 miles



Banks

First Mutual Bank
15635 NE 8th St
(425) 644-4214
Distance: 0.54 miles

Washington Mutual
15600 NE 8th St # K8
(425) 590-4060
Distance: 0.53 miles

US Bank
1128 156th Ave NE
(425) 401-1388
Distance: 0.73 miles

Key Bank
1350 156th Ave NE
(425) 641-1015
Distance: 0.87 miles

Bank Of America
15550 Lake Hills Blvd
(206) 358-2500
Distance: 0.5 miles

Cascade Bank
15751 NE 15th St
(425) 643-6200
Distance: 0.96 miles

Wells Fargo Bank
1645-140th Ave. NE
(425) 644-7063
Distance: 1.3 miles

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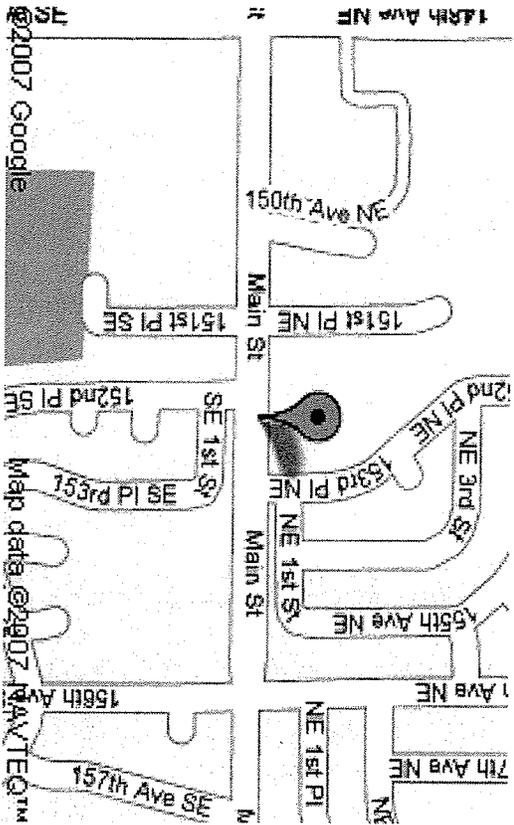
- All addresses are within Bellevue unless otherwise noted.

- All distances are calculated from Episcopal Church of the Resurrection.

- If you need help locating any additional services, please call the Community Information Line at (206) 461-3200 or the Bellevue Human Services Division at (425) 452-6884.

NOTES

Episcopal Church of the Resurrection
15220 Main Street
Bellevue, WA 98007



Bellevue Resource Information Booklet

