



DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
ENVIRONMENTAL COORDINATOR
11511 MAIN ST., P.O. BOX 90012
BELLEVUE, WA 98009-9012

DETERMINATION OF NON-SIGNIFICANCE

PROPONENT: Temple B'nai Torah

LOCATION OF PROPOSAL: 15727 NE 4th Street

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

FILE NUMBER: 08-112966 LZ

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 15, 2008**. 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This DNS may be withdrawn at any time if the proposal is modified so that it is likely to have significant adverse environmental impacts; if there is significant new information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.

Carol V. Hurland
Environmental Coordinator

4/24/08
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: 15727 NE 4th Street
Proposal Description: To provide a temporary encampment for members of TC4.
File Number: **LZ-08-112966**
Applicant: Temple B'Nai Torah
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**

Carol V. Helland Br

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

Application Date: March 20, 2008
Public Notice(600 feet): March 27, 2008
Public Meeting: April 10, 2008
Minimum Comment Period: April 10, 2008
Bulletin Publication Date: **April 24, 2008**
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 Temple B'Nai Torah (TBT) requests approval to locate a temporary encampment at 15727 NE 4th Street for 90 days. An invitation to locate the encampment has been extended by the applicant with a proposed installation date of May 8, 2008. This is the second time that TBT has hosted TC4. The first occurrence was November 16, 2005 with departure occurring February 14, 2006.

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 TBT. See Para. 3.2 & 3.3 of Consent Decree.

TBT applied for a permit on March 20, 2008. Because TBT 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. Rabbi James Mirel of the TBT 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, Kirkland and Bellevue. Currently, TC4 is located at Kirkland Congregational Church in Kirkland.

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

TBT is located on the south side of NE 4th Street between 156th and 164th Avenues NE. The surrounding properties adjacent to the Temple are predominately single-family to the south and

west with exception of the Church of the Nazarene to the north, the Jewish Day School (JDS) to the east and Lake Hills Montessori to the west. The Temple has been operating in this location since its construction in 1998. The Temple is located on Lot 1 of a three lot short plat (Bellevue File No. PSPSE-94-9899), while the Jewish Day School is located on lots 2 and 3. Lot 1 contains 3.1 acres; lot 2 contains 1.28 acres while lot 3 contains 5.08 acres.

The Temple site contains a circular driveway with 20 parking stalls. In the center of the drive is a landscaped area that is populated primarily with evergreen trees. The Temple structure is located to the south of this circular driveway. The Temple has a large lawn area located south and west of its sanctuary doors, which is the proposed location of the encampment. The area is very flat and is a manicured lawn area. Beyond the lawn area are berms that are used to separate the manicured landscape area from the native vegetation areas that exist along the west and south property lines. These areas contain both overstory and understory vegetation, which is very dense in some areas. Most of the trees along these property lines are fir trees. The Temple's building roof and footing drains flow freely overland across this lawn area. The flow drains to a swale along the base of the berms and is conveyed to a piped system along the west side of the property. See Section VII for utility discussion regarding stormwater conveyance.

See Attachments C and D for zoning and site maps.

IV. Proposed Site Layout

TC4 is proposed to be located in the Temple's manicured lawn area west and south of the Temple. There will be one opening provided for ingress and egress for the encampment, located just south of the circular driveway. 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, tents for donations, and blanket storage will be located near this ingress/egress access point.

Tents are proposed to be located between the temple walls and the raised berms to the south and west that separate the native vegetation areas along the site perimeter from the manicured lawn. No tents will be placed to the south or the west of the berm. A large 20 by 40 foot tent that is designated as the "Hilton" will be located at the southeast corner of the temple site. This tent is used by men that are new to Tent City until they can be accommodated in a private tent. The southern portion of the Temple contains a substantial building overhang that projects 17 feet over a 25 by 75 foot patio area. The kitchen will be located in this area along with a commons area for TC4 residents.

TBT has a garbage area at the southeast corner of the site that can be accessed from a service road via NE 1st Street. As a temporary measure, the garbage containers will be removed from this area and placed outside of the screen to the east so that the portable shower facility that is owned by TC4 can be placed there. Electricity will be provided from the electrical room located inside of the Temple at the southeast corner of the facility. A temporary connection will occur at this location so that the shower can have heated water. Directly adjacent to the shower will be four portable toilets. To fulfill the Fire Department requirement for a crash door, the Temple will construct a temporary wall between the Temple structure and fence that will be equipped with an emergency exit.

Several hose bibs located along the west and south building elevations will provide potable water for the encampment. See Section VII for building comments regarding plumbing permits. See Attachment D for the revised site plan forming the basis for the Director's decision.

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-1.8 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 TBT. 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 TBT and SHARE/WHEEL submitted with application.	1. Yes. Staff has obtained a copy of TBT'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(1)	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. TBT's address is considered the permanent address for purposes of compliance with the LUC.

¹ TBT was requested by its neighbors at its March 18th meeting to move the four designated parking stalls for TC4 residents from the northwest corner of the site. This request was made to eliminate/reduce noise from residents coming back to the encampment from night shifts. These four stalls are now located at the northeast portion of the circular drive.

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 TBT on April 10, 2008	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 April 10, 2008	Yes
Meet with schools and known daycares (1) LUC 20.30U.122.B	See Section VI for discussion of meetings and comments	Required meeting on March 31, 2008.	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 27, 2008	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 TBT.

D. Temporary Encampment Use Requirements (LUC 20.30U.125). TBT'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. See Section XI for related condition.
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
			Rabbi James Mirel consistent with Para. 3.3.1 of the Consent Decree. See Attachment A See Section XI for related condition.
Location Frequency LUC 20.30U.125.A.5	Once every 18 months	Previous encampment at this location—November 16, 2005 with departure February 14, 2006	Yes. No other camps previously sited at TBT 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 of the TBT parking lot (see site plan).	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. Rabbi James Mirel to maintain resident log.	1. Yes. Detailed in Encampment Management Plan. 2. Yes. The Director approves retention of the log by Rabbi James Mirel, 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. Intends to use a common container for coffee and water per para 3.2 of the consent decree. 3. No response to this item.	1. Yes. Hardship exception not necessary. Complies with Para. 3.2 of Consent Decree. See <u>Section XI for related condition.</u> 2. Yes. Hardship exception not necessary. Complies with Para. 3.2 of Consent Decree. See <u>Section XI for related condition.</u> 3. Yes. See <u>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. See <u>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. See <u>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. See <u>Section XI for related condition.</u> 2. Yes. Complies with Para 3.3.4 of Consent

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
		cleaning on days when not professionally cleaned.	Decree. See Section XI for related condition.
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	1. Kitchen to be located under building overhang at southwest corner of building. 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	1. Yes. Kitchen is separate from sleeping areas, and enclosed. 2. Yes. Complies with Para. 3.2 of Consent Decree. See Section XI for related condition. 3. Yes 4. Yes. As conditioned in Section XI, complies with Para. 3.3.5 of Consent Decree. See Section XI for related condition.
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. See Section XI for related condition. 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 	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	1. Yes. Complies with Section 3.2 of Consent Decree. 2. Yes. As conditioned in Section XI, complies with para. 3.2 of Consent Decree. See Attachments F and G for guidelines.

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
	<ul style="list-style-type: none"> ▪ Productive cough or weight loss is prominent among residents 3. Individual with communicable disease cannot prepare or serve food.	regulations. 3. No individual will serve food in compliance with standards above.	3. Yes
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 TBT'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.

TBT's Outreach Meetings

The TBT has held two outreach meetings on the TC4 proposal as summarized below:

1. **March 18th:** TBT held a public meeting with adjacent neighbors within 600 feet of its site. There were approximately a dozen neighbors who attended this meeting along with members from TC4. Meeting minutes have also been provided which are available in the project file. Additionally, TBT mailed out a follow up letter dated April 3, 2008, to all neighbors within 600 feet to acknowledge comments made within this meeting. A copy of this letter is noted within the project file.
2. **March 31st:** There are six daycare/schools within 600 feet of this site: Ark Day Care, Absorbent Mind Montessori, Jewish Day School (JDS), Family Home Daycare, Little Friends Daycare, and Lake Hills Montessori. Located just outside the 600 foot radius is Spectrum preschool. They were also invited to the meetings of daycares/schools.
 - a. The administrator of the Ark Day Care stated that she did not need to meet so did not attend the meeting held on March 31st. She stated that she would let her parents know of the scheduled TC4 stay at TBT.
 - b. The school administrator of Absorbent Mind Montessori declined to attend as well so did not attend the meeting held on March 31st.
 - c. TBT met with the administrator for JDS on February 25th. He has already notified JDS parents that TC4 is returning to TBT and stated that they are supportive of this scheduled stay. JDS and TBT will be operating a joint day camp this summer that will include TC4 in their programming.
 - d. TBT called the owner of the Family Home Daycare who stated that she was fine with TC4's scheduled stay at TBT. She did not see foresee any problems for her facility.
 - e. TBT called and left a message with the operator of Little Friends Daycare. As of the date of this staff report, TBT has not had a return phone call from its operator.
 - f. TBT representatives met with the school administrator of Lake Hills Montessori. Her school is in session until June 15, 2008. The administrator at this facility had the following comments/requests:

- ✓ No security patrols during schools hours 8:30 a.m. to 3:30 p.m. on 157th Street.
- ✓ No pedestrian access to the greenbelt area beyond the required security fence.
- ✓ Better maintenance of the blackberries located in the greenbelt by TBT.
- ✓ If a complaint is lodged on TBT's complaint line, can the responder give a return call to ensure resolution to an issue?
- ✓ The administrator had questions regarding the code of conduct and how violations are handled. Does TC4 maintain a log that is accessible to the public? Additionally, questions were also raised about out of state warrants and how they are handled.

TBT/TC4 Response to Lake Hills Montessori

TBT contacted TC4 to request that they limit security patrols on 157th Avenue SE during the time that Lake Hills Montessori is in session and not patrol the greenbelt area. TC4 is not willing to limit their patrols, because the only way they can protect themselves from accusations about loitering, littering, and people sleeping in the greenbelt is to actively patrol the area. Patrollers will always wear orange vests.

The TBT-TC4 agreement describes how code of conduct violations are handled. TBT is notified of any code of conduct violations related to neighbors or TBT.

Complaints received from neighbors will be acted on, and resolution will be communicated to the caller with a phone call.

In regards to the final item regarding out of state warrants, BPD states that records checks are run at the state level (WACIC) and national level (NCIC). An out of state warrant would show up if it exists and is entered in the system. Warrant service would be handled as they normally would.

3. **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 10, 2008, with public notice occurring within 600 feet of this site. There were 6 individuals who attended this meeting from the adjacent neighborhood. TBT had approximately 6 members of its congregation at the meeting along with TC4 who had approximately 8 members. See the project file for those who signed the sign-in sheet. Representatives from PCD and BPD conducted the meeting. The following is an overview of comments/requests made:

- a. **Bellevue Police Department:** BPD reported the results of the Meet and Confer Meeting that took place earlier on April 10th, between TC4, TBT and BPD.

City Response: BPD discussed the agreed safety plan/procedures. BPD will have additional patrols in the area during the scheduled stay and time will be split between bike officers and vehicle drive-bys. The Crossroads Police Center will be an additional resource for the area as well. See Section VII.7 for additional BPD discussion.

- b. **TBT—Daycare/Preschool Reporting:** TBT reported the results of the preschool/daycare meeting that was held March 31, 2008, based upon item #2 above. No one from the affected schools/daycares attended the City public meeting.

City Response: No further response necessary.

- c. **TC4 Overview:** TC4 discussed the origins of TC3 and TC4 to provide an overview of how the encampment came into existence and why they are necessary. They also discussed how the encampment is operated and the accountability of its residents when living in TC4.

City Response: No further comments necessary.

- d. **Construction Noise/Parking—Jewish Day School (JDS):** Staff received many comments during the meeting regarding the JDS' capital improvements. JDS received Administrative Amendment approval (LI-06-100285) to construct a new gymnasium and library. Affected neighbors understand that JDS is improving their property but feel that between the construction noise and TC4 stays at the Church of Resurrection and again at TBT that their neighborhood is inundated by nonresidential uses. Because TC4 is scheduled during the summer months, voices and activities could be a further detriment when windows and doors are open during the warmer weather.

Staff also heard comments/complaints regarding the amount of construction parking that appears to be taking place throughout the neighborhood.

City Response: Construction hours are regulated by Bellevue City Code (BCC) 9.18. Hours are limited to 7 a.m. to 6 p.m., Monday through Friday and 9 a.m. to 6 p.m. on Saturdays. If work is occurring outside of the timelines mentioned above, residents can call Code Compliance at (425) 452-4570 or the Police by calling 911. It should also be mentioned that TC4 implement quiet hours from 9 p.m. to 8 a.m. So this should help with the voice and activity concerns of adjacent neighbors. In regards to construction parking, this permit was issued with a condition that construction parking take place on-site at JDS and not within the City right-of-way: See below:

Right of Way Use Permit: *Prior to issuance of any construction or clearing and grading permits, the applicant must apply for a right-of-way use permit(s) from the City's Transportation Department. More than one right of way use permit may be needed, such as one for hauling and one for construction work within the right of way. In some cases, right of way use permits for different purposes may be combined into one document. A right of way use permit may require the following:*

- a. *Designated truck-hauling routes*
- b. *Truck loading/unloading activities*
- c. *Location of construction and hauling*
- d. *Hours of construction and hauling*
- e. *Provisions for street sweeping, excavation, and construction*
- f. *Provisions for pavement restoration*
- g. *Location of construction signing and pedestrian detour routes*
- h. *Provision of sufficient off-street parking for construction workers, construction vehicles, and staging activities*
- i. *All other construction activities as they affect the public street system*

In addition, the clearing and grading permit requires a calculation of the amount of material to be imported/exported.

*Authority: BBC 14.30
Reviewer: Jon Regalia, (425) 452-4599*

Given the above condition of approval, the information provided during our meeting has since been forwarded to the Transportation Department for enforcement.

- e. **Hardship Response (60 vs. 90 days):** One of the adjacent residents made a request that the City limit the stay of the encampment to 60 days despite the hardship request made by Rabbi Mirel dated March 18, 2008.

City Response: LUC 20.30U.125.A.4 limits the number of days of an encampment to 60 days. However, the Consent Decree (C-05-1921-JCC) supersedes this ordinance by allowing an additional 30 days for a total of 90 days stay if the following is provided:

A bona-fide and sincere statement by the religious leader or representative of the Host....that a 60 day limit would substantially burden of religion by violating specified tenets of its religious belief related to sheltering the homeless or assisting the poor.

Staff has reviewed the religious tenets supplied by the Rabbi and determined that he has provided a sincere request for an additional 30 days according to the Consent Decree. As such, the Director of Planning and Community Development approves the Rabbi's request so that TC4 may be deployed at this location for 90 days.

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 TBT. 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

- a. Fire extinguishers are required. Individual locations of each extinguisher within the encampment will be verified during field inspection by fire inspector.
- b. Provide adequate egress illumination.
- c. Keep tents five feet west of the concrete walk on the west side of the building. This will provide a walkway for persons who exit the doors on this side of the building.

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 Dave Dickson at (425) 452-4359 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.

7. Bellevue Police Department

On April 10, 2008, the Bellevue Police Department (BPD) held a required meet and confer meeting with the TBT 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 security patrol personnel operating outside the encampment will wear orange vests for identification purposes. 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 criminal records check 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 associated with this proposal, 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 TBT has communicated with its adjacent neighbors, conducted a meet and confer conference with the Bellevue Police Department and met with the preschool administrators 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 TBT 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 Steve Lynch, (425) 452-4443

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 TBT. The duration of the encampment is permitted to extend from May 8, 2008 to August 5, 2008.

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. Minimum side and rear yard setback are 50 feet. 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:** TBT'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. **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 southeast 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 in the absence of mechanical refrigeration:

- 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:** As an acceptable alternative to providing 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/ 5 Foot Walkway:** Maintain a minimum aisle width of 44 inches between tents for aisles. Additionally, tents shall be kept five feet west on the concrete walk on the west side of the building.

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.

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

22. **Revegetation of Site:** At the conclusion of the scheduled stay, 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—Rabbi James Mirel, TBT
- 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—Rabbi James Mirel)

Building an Inclusive Sacred Community of Reform Jews



TEMPLE
B'NAI
TORAH

בני תורה

March 18, 2008

STATEMENT OF SUPPORT FOR TENT CITY4 FROM THE
PERSPECTIVE OF REFORM JUDAISM

Rabbi James L. Mirel, D.D.
Senior Rabbi, Temple B'nai Torah

I welcome the opportunity to submit this statement in conjunction with the application of Temple B'nai Torah with regard to hosting Tent City4. I serve as the Senior Rabbi and Spiritual leader of Temple B'nai Torah. Although the decision to host Tent City resides with the democratically elected lay Board of Directors, they rely on my advice and teaching in their deliberations.

Much of what follows was shared with Board prior to their decision.

- I. REFORM JUDAISM DEMANDS JUSTICE. Following the Biblical injunction "Justice, justice shall thou pursue" (Deuteronomy) it is clear that in matter of justice an individual or congregation is obligated in this regard. It is not left as an optional matter. It is also clear from the commentaries on this verse that even if such a course of action might bring one into conflict with the government or any other group (such as neighbors), once the just course has been determined by prayer, study and reflection, that course of action must be pursued even at considerable risk and/or inconvenience.

Reform Jews are committed to social justice. Even as Reform Jews embrace Ritual, prayer, and ceremony more than ever, we continue to see social justice as the jewel in the Reform Jewish Crown. Like the prophets, we never forget that God is concerned about the everyday and that the blights of society take precedence over the mysteries of heaven. A Reform synagogue that does not alleviate the anguish of the suffering is a contradiction in terms.

Rabbi Eric Yoffie, President
Union for Reform Judaism

RECEIVED

MAR 20 2008

PERMIT PROCESSING

James L. Mirel, D.D.
Senior Rabbi

David Serkin-Poole
Cantor

Yohanna Kinberg
Assistant Rabbi

Shellie Oakley
Interim Executive Director

Elizabeth Fagin
Director of Education

Jackie Frank
President

15727 NE 4th St.
Bellevue, WA 98008

Phone (425) 603-9677
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www.templebnaitorah.org

- II. REFORM JUDAISM DEMANDS HOLINESS. We learn in the Torah “Be thou holy for I the Lord thy God art holy.” (Leviticus). The obligation to emulate God is unequivocal. With regard to the poor and the needy, we are taught that their needs are foremost in the heart of God. Holiness consists, in part, of doing everything in our power to mollify their pain and suffering. This is at the center of our religious tradition. It cannot be ignored or compromised.

And God said, “let us make humankind in our image, after our likeness.”

Genesis 1:26

- III. REFORM JUDAISM SETS A CLEAR STANDARD FOR ACTION.

We are taught in the Bible “Love your neighbor as yourself” (Leviticus). Once we apply the standard of empathy and determine what we ourselves would request in a time of need, it is our obligation to provide that level of consideration to each human being we meet. In Judaism, the word “neighbor” implies every other human being.

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.

- IV. REFORM JUDAISM REJECTS ALL ARTIFICIAL LIMITATIONS TO JUST ACTION.

Our tradition teaches “These are the things that have no artificial limits...acts of loving-kindness”. (Talmud). We maintain our right and duty as Reform Jews to fully pursue justice without any limitations. Since Tent City4 has specifically requested a stay of 90 days, we are obligated to honor that request, unless we are convinced that there is a compelling reason to limit their time with us. If they had requested 120 days we would make the same argument based on our clear religious obligation.

Share your bread with the hungry, and take the wretched poor into your home. When you see the naked, clothe him, and do not ignore your own kin.

Isaiah 58:7

For there will never cease to be needy ones in your land; therefore I command you: open your hand to the poor and needy kin in your land.

Deuteronomy 15:4, 11

- V. REFORM JUDAISM PRIORITIZES ACTIONS THAT HELP THE

HOMELESS. The torah teaches “Love the stranger, for you know the heart of the stranger seeing that you yourselves were strangers in the land of Egypt”. (Exodus). The ultimate stranger (‘ger’) is a person without a home. We put a high priority in reaching out to the homeless and consider that to be a ‘mitzvah’ above most others. In a similar way, we are taught that all of our prayers and rituals are for naught if we turn our back on the needy.

VI. REFORM JUDAISM REQUIRES CIVIL DISOBEDIANCE IF CONFRONTED WITH A GOVERNMENT ACTION WHICH ABROGATES OUR PRACTICE OF RELIGION. While, in general, conformity to the 'law of the land' is the norm, it is clear that any arbitrary restriction on the practice of our religion demands civil disobedience. This is based on the aforementioned verse "Justice, justice shall thou pursue". The repetition of the word "justice" implies that even if it means ignoring an arbitrary or unjust regulation, we must be willing to go forward.

Responsible citizenship is an ethical obligation that involves regard for the decision-making process of the community in which we live. It does not, however, require blind obedience if it conflicts with other ethical values.

Said Samuel: The Law of the Government is Law
Gittin 10B

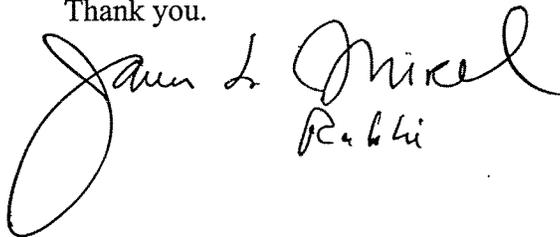
Hillel said: If I am not for myself, who will be for me? But if I am only for myself, what am I? And if not now, when?

Pirkei Avot 1:14

In conclusion, I submit this document with the sincere hope that all the parties can arrive at a just and equitable arrangement for the hosting of Tent City4 on our Temple property. Judaism tells us to 'pursue peace' whenever possible. Having said that, I am personally willing to face prosecution or even incarceration in defense of my right to practice my religion as a basic freedom granted to me by the Constitution.

I am available for testimony in this regard at any time.

Thank you.


Rabbi

ATTACHMENT B
(Code of Conduct)

SHARE/WHEEL TENT CITY4

CODE OF CONDUCT

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.

TENT CITY 4 RESIDENCY REQUIREMENTS

1. **Three times per week, you must do a 3 hour Security Shift, (or an equivalent duty as approved by Executive Committee).**

Equivalent Duties are:

A – Litter Busters Detail.

B – Kitchen Duty, Donations Coordinator, Blanket Coordinator or Tent Master Duty (these are all Elected Positions, chosen at the weekly camp meeting).

C – Salmon Watcher Duty (this requires attendance at a Training Session first).

NOTE – Whenever there are more than 80 residents in the camp, you are only required to perform Two Security Shifts each week.

2. **Once every two weeks, you must perform one *Approved Community Credit Activity*.**

Typical Community Credit Activities include:

- Attendance at an Authorized Sunday Church Service.
- Attendance at various Community Meetings or Hearings that involve TC4.
- Attendance at Site-Specific Functions (such as 'Salmon Watcher' training for the Woodinville TC4 Site).

Sign-Up sheets for authorized Community Credit activities are available in the EC Tent. Ask whoever is currently on desk if you have any questions.

3. **Every ^{WED}Monday is Blanket Inspection day. This means that all of your TC4 issued blankets must be turned in for washing by 8:30 AM. Large bags are provided near the donations tent for this purpose.**

NOTE: When Monday is a Legal Holiday, blanket day is Tuesday.

All Residents of the 'Community Tents' must turn their blankets in EVERY Monday.

Other residents must turn their blankets in once every TWO Weeks, as follows:

- Week 1 – All Single Men
- Week 2 – All Single Women & All Couples Tents

Check with an Executive Committee Member to determine which Monday is your Blanket Inspection Day.

IF THERE ARE ANY TC4 ISSUED BLANKETS FOUND IN YOUR TENT ON BLANKET INSPECTION DAY, YOU WILL BE BARRED FROM TENT CITY 4 FOR A SEVEN-DAY PERIOD.

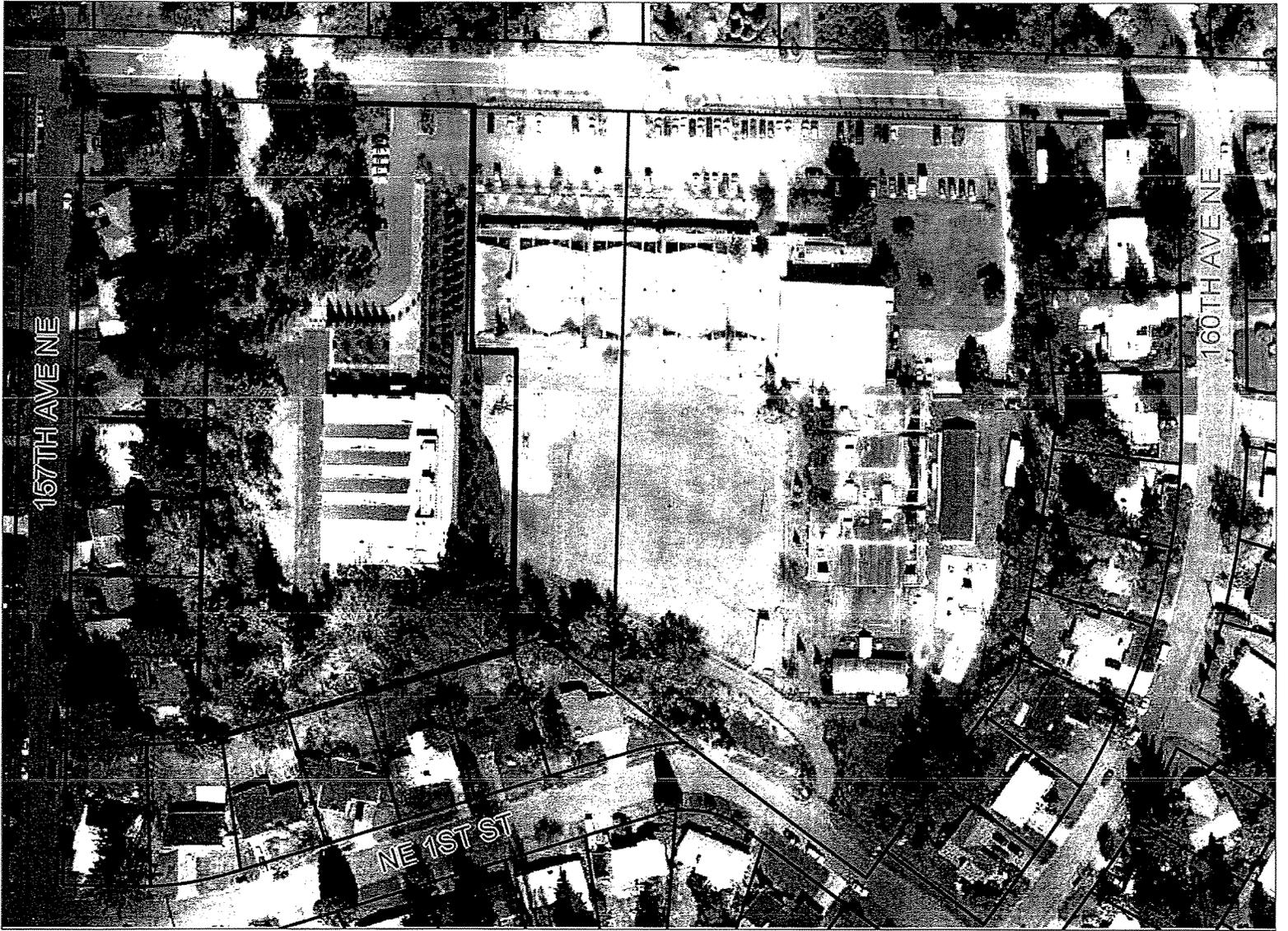
4. **Any of the following are grounds for being permanently barred from Tent City 4:**

- Alcohol in Camp – Possession, Showing up Drunk, or Alcohol on Breath.
- Illegal Drugs in Camp – Possession, Under the Influence, or Possession of Paraphernalia.
- Violence or Threats of Violence.
- Sexual Harassment.
- Theft (of any residents property or of TC4 community property).
- Anything that causes a 911 Call to be placed (other than legitimate Medical Emergency).
- Any Open Flames or Smoking in Tents.
- Repeated Write-Ups for Minor Infractions.
- Violating any of our specific agreements with the current Host Church and/or Host City (ask any EC Member if in doubt as to these agreements).

Resident's Signature _____

Executive Committee Member's Signature _____

ATTACHMENT C
(Zoning Map)



R-5

R-1.8

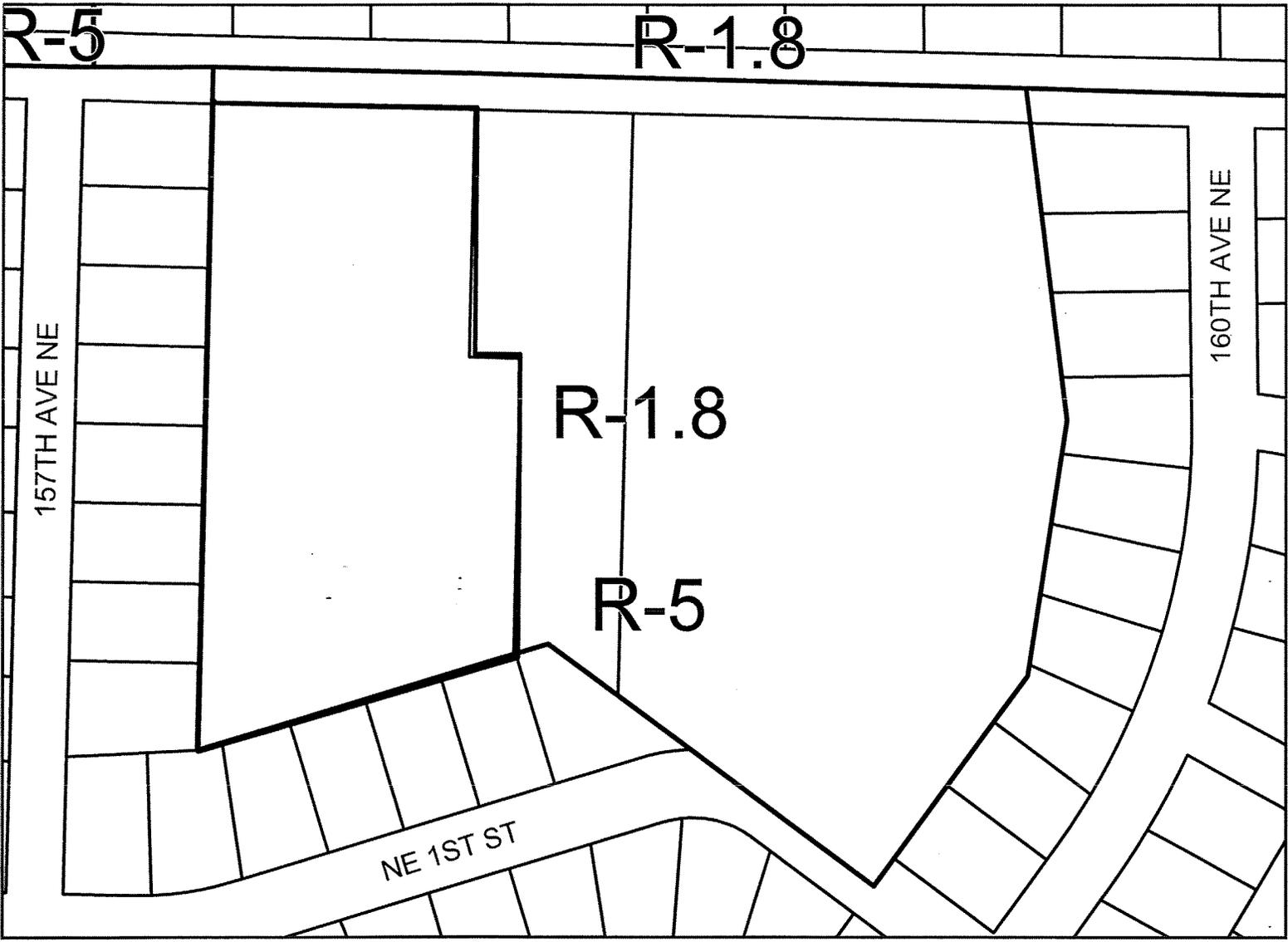
157TH AVE NE

160TH AVE NE

R-1.8

R-5

NE 1ST ST



ATTACHMENT D
(Plans and Drawings)

Apr 21 2008

Layout not to scale

Tents at 1' setback from toe of berms

Screening Fence near top of berms

Tents at 1' setback from toe of berms

Common Area to include kitchen and library functions. 4' corridors from doors to be maintained.

crash gate in fence for emergency exit from Camp

Tents at building sidewalk

Common Area

Tent City 4
Encampment Layout
Temple B'nai Torah

CITY OF BELLEVUE
DEPT OF PLANNING
COMMUNITY DEVELOPMENT
LAND USE APPROVAL

APPROVED
AS CORRECTED

OVERSIGHT OR VIOLATIONS OF CITY ORDINANCES ARE NOT INCLUDED IN THIS APPROVAL

BY *[Signature]*

DATE 4/21/08

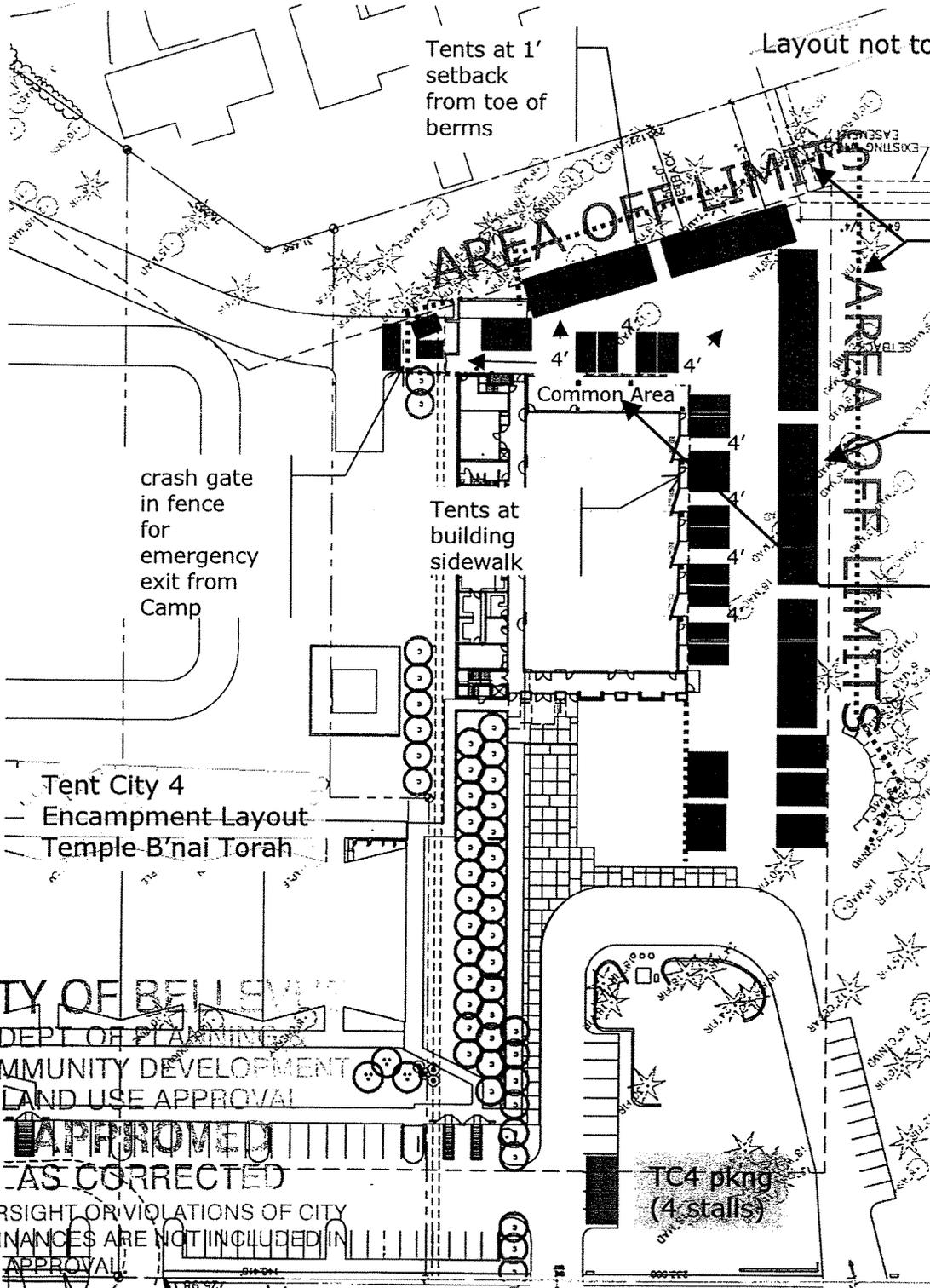
SITE PLAN
W/BLDG. EXITS

11727 NE 4th St.
Bellevue, WA 98008

TEMPLE
B'NAI
TORAH

- | | |
|-------------------------|--------------------------------|
| 1. Security tent (9X12) | 4. Hilton (Single men) (20X40) |
| 2. Donations (9X12) | 5. Shower |
| 3. Blankets (9X12) | 6. Honey buckets |
| | 7. Dumpster |

Unnumbered tents are living tents fencing



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 E

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

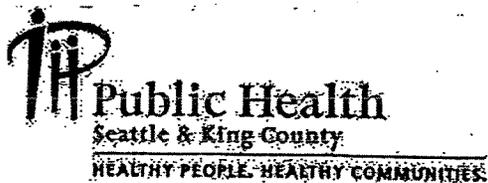


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Revised:

- 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

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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/cpsc/pub/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>

Recommended Shelter Health and Safety Best Practice Guidelines – July 2005

Developed by Health Care for the Homeless, Public Health – Seattle & King County

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*.

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:

I. 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/>

Appendix F - Sample Policy: Lice Policies and Procedures

Developed by Health Care for the Homeless, Public Health – Seattle & King County

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.

Scabies Policies and Procedures:

- Brickner, Scharer & Conanan: Health Care of Homeless People. Springer Publishing Company. NY, NY. 1985. p35-55.
- 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.
- 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.

Lice Policies and Procedures:

- Brickner, Scharer & Conanan: Health Care of Homeless People. Springer Publishing Company. NY, NY. 1985. p145-150.
- 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
(Draft Human Services Resource Guide)

Bellevue Resource Information Booklet





Banks

Contents

First Mutual Bank
 15635 NE 8th St
 (425) 644-4214
 Distance: 0.2 miles

Bank Of America
 15550 Lake Hills Blvd
 (206) 358-2500
 Distance: 0.6 miles

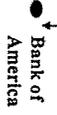
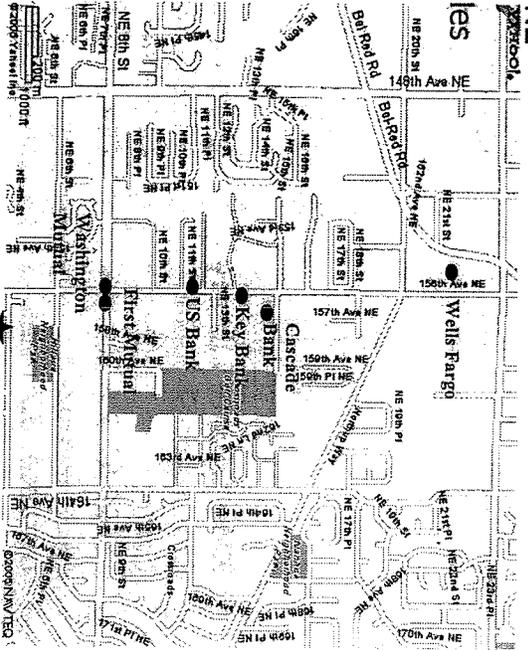
Washington Mutual
 15600 NE 8th St # K8
 (425) 590-4060
 Distance: 0.2 miles

Cascade Bank
 15751 NE 15th St
 (425) 643-6200
 Distance: 0.6 miles

US Bank
 1128 156th Ave NE
 (425) 401-1388
 Distance: 0.4 miles

Wells Fargo Bank
 15000 NE 8th St., A-6
 (425) 747-6511
 Distance: .69 miles

Key Bank
 1350 156th Ave NE
 (425) 641-1015
 Distance: 0.6 miles



- Grocery Stores 1
 - Food Banks and Feeding Programs 2
 - Shelters 3
 - Hospitals 3
 - Medical/Dental Clinics 4
 - Thrift Stores 5
 - Clothing Banks 5
 - Laundry Self-Service 6
 - Supplies/Hardware/Auto 6
 - Bus Transportation 7
 - Crisis Services 9
 - Shower Facilities 9
 - Houses of Worship 10
 - Employment 11
 - Legal Information 12
 - Government/Municipal Court 13
 - Libraries 13
 - Post Office 14
 - Gas Stations 14
 - Banks 15
- All addresses are within Bellevue unless otherwise noted.
- All distances are calculated from Temple B'Nai Torah.
- 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.



Government/ Municipal Court

Social Security Administration
505-106th Avenue NE, Suite 301
(800) 772-1213
Distance: 3.60 miles

**Washington State Department of Social and
Health Services (DSHS) - Crossroads**
805 156th Ave. NE
(206) 341-7404 or (800) 662-6715
Distance: 0.33 miles

King County District Court
585 112th Avenue SE
(206) 205-9200 or (800) 325-6165
Distance: 3.93 miles

Bellevue City Hall
450-110th Ave. NE
(425) 452-6800
Distance: 3.4 miles

Bellevue Mini-City Hall
Crossroads Bellevue Shopping Center
NE 8th & 156th
(425) 452-2800



Food Banks and Feeding Programs

Hopelink
Food Bank
Emergency Feeding Services
14812 Main Street
(425) 943-7555
Distance: 0.81 miles

World Impact Network
Food Bank
2015 Richards Road
(425) 643-8246
Distance: 4.11 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: 2.45 miles

Salvation Army
Weekday Evening Community Dinners
911 164th Ave. NE
(425) 452-7300
Distance: 0.92 miles



Employment

Belleve Community College

Community Career Center / Women's Center
Worksource Affiliate Site
3000 Landerholm Circle, Bldg. B, Room B231
(425) 564-2279
Distance: 2.96 miles

Alliance of People with Disabilities

Support services for individuals with disabilities.
16315 NE 87th Street, Suite B3, Redmond
(425) 558-0993
Distance: 6.88 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: 0.44 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: 4.38 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: 6.89 miles

Rotacare Free Medical Clinic

No appointments. Open Saturdays from 9:30-11:30
Hopelink
14812 Main Street
Distance: 0.81 miles



Crisis Services

Crisis Clinic

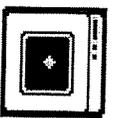
Crisis Line
1-800-244-5767

Eastside Domestic Violence Program

Crisis Line
(425) 746-7940

King County Sexual Assault Resource Center

Crisis Line
1-800-825-7273



Laundry Self-Service

Kwik N' Cleaner

2311 156th Ave NE
(425) 746-8813
Distance: 1.2 miles

Overlake Village Maytag Laundry

14910 NE 24th St
Redmond, WA
(425) 881-0303
Distance: 1.3 miles



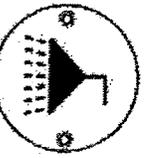
Supplies/Hardware/Auto

Schuck's Auto Supply

15425 NE 24th St
(425) 747-5888
Distance: 1.2 miles

Home Depot

325 120th Ave NE
(425) 451-7351
Distance: 2.8 miles



Shower Facilities

Belleuve Aquatic Center

601-153rd Avenue NE
(425) 452-4444
Distance: 0.34 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

Seattle Hardware Co

14505 NE 20th St
(425) 456-3385
Distance: 1.2 miles

Big 5 Sporting Goods

4055 Factoria Blvd SE
(425) 747-5230
Distance: 3.3 miles

Napa Auto Parts

2033 140th Ave NE
(425) 746-5801
Distance: 1.5 miles

Fred Meyer

17667 NE 76th St
Redmond, WA
(425) 556-8000
Distance: 4.2 miles



Bus Transportation

Bus Transportation

Metro Rider Information Line
(206) 553-3000

Routes At Major Intersections

156th Ave NE & NE 4th St

Distance: 0.1 mile W

Route MT 229 Seattle/Overlake Transit Center

Route MT 245 Factoria/Kirkland

Route MT 890 Crossroads

NE 8th St & 156th Ave NE

Distance: 0.3 mile N

Route MT 230 Bellevue Transit Center/Redmond Park
and Ride

Route MT 253 Bellevue Transit Center

Route MT 261 Seattle

Route MT 272 University District/Eastgate

Route MT 926 Eastgate Park and Ride/Crossroads

164th Ave NE & NE 4th St

Distance: 0.4 mile E

Route MT 225 Overlake Transit Center/Seattle

272 University District/Eastgate

926 Eastgate/Crossroads

156th Ave NE & NE 10th St

Distance: 0.4 mile N

Route MT 253 Bear Creek Park and Ride, Redmond
Park and Ride

Route MT 261 Overlake Park and Ride/Seattle

229 Overlake Transit Center

245 Kirkland/Factoria

926 Crossroads



Thrift Stores

- Children's Hospital & Thrift**
15137 NE 24th St
Redmond, WA
(425) 746-3092
Distance: 1.3 miles
- St Margaret's Thrift Shop**
4228 Factoria Blvd SE
(425) 641-6830
Distance: 3.4 miles

- Goodwill Industries**
14506 NE 20th St
(425) 957-4770
Distance: 1.8 miles
- Value Village**
16771 Redmond Way
Redmond, WA
(425) 883-2049
Distance: 4.1 miles



Clothing Banks

- Bellevue Seventh Day Adventist Church**
Open Wednesdays 9:30 a.m. to noon
15 140th Avenue NE
(425) 746-1763
Distance: 1.80 miles

- YWCA Working Wardrobe**
Business attire for men and women with job interviews or work
16601 NE 80th Street, Redmond
(425) 556-1354
Distance: 6.42 miles



Houses of Worship (within one mile)

- New Hope Ministries**
15760 NE 4th St
(425) 746-3730
Distance: 0.0 miles
- Ministerio De Fortalez Church**
35 148th Ave SE
(425) 603-0646
Distance: 0.6 miles

- Cross Of Christ Lutheran Church**
411 156th Ave NE
(425) 746-7300
Distance: 0.1 miles
- Church Of Jesus Christ Of LDS**
14536 Main St
(425) 747-4250
Distance: 0.7 miles

- St Louise Catholic Church**
141 156th Ave SE
(425) 747-4450
Distance: 0.3 miles
- Bellevue Christian Reformed Church**
1221 148th Ave NE
(425) 747-5288
Distance: 0.8 miles

- Calvary Lutheran Church**
16231 NE 6th St
(425) 401-1595
Distance: 0.3 miles
- Lake Sammamish Foursquare Church**
14434 NE 8th St
(425) 463-7000
Distance: 0.8 miles

- Church Of The Resurrection**
15220 Main St
(425) 746-0322
Distance: 0.3 miles
- Islamic Center Of Eastside**
14700 Main St
(425) 746-0398
Distance: 0.6 miles

- Church Of Holy Apostles**
15220 Main St
(425) 644-1613
Distance: 0.3 miles
- Overlake Park Presbyterian Church**
1836 156th Ave NE
(425) 746-8080
Distance: 0.9 miles

- Unity Church Of Bellevue**
16330 NE 4th St
(425) 747-5950
Distance: 0.3 miles
- St Peters United Methodist Church**
17222 NE 8th St
(425) 747-3210
Distance: 0.9 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

Indoor emergency shelter for young adults age 18-23.
Open 9 pm - 9 am Sunday through Thursday
Bellevue Family YMCA
(425) 869-6490
Distance: 1.86 miles



Hospitals

Group Health Hospital

2700 152nd Avenue NE
Redmond, WA 98052
(425) 883-5151
Distance: 2.27 miles

Overlake Hospital

1035 116th Avenue NE
(425) 688-5000
Distance: 2.95 miles



Employment (continued)

Labor Ready

827-108th Ave. NE, Suite A
(425) 688-8878
Distance: 3.37 miles

Westminster Chapel Job Support Ministry

1346 NE 24th Street
(425) 562-8028



Legal Information

Catholic Community Services (Bellevue)

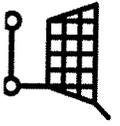
875-140th Ave. NE, Suite 205
(425) 284-2211
Distance: 1.35 miles

Eastside Legal Assistance Program

(425) 747-7274

Legal Assistance Referral

3161 Elliot Ave Ste 101 (Seattle)
(206) 621-7691
Distance: 14.44 miles



Grocery Stores

QFC Quality Food Center
 15600 NE 8th St # K1
 (425) 865-0282
 Distance: 0.2 miles

Trader Joe's Co
 15400 NE 20th St
 (425) 643-6885
 Distance: 1.0 mile

Belleve Oriental Mart
 900 160th Ave NE # 2
 (425) 747-1351
 Distance: 0.2 miles

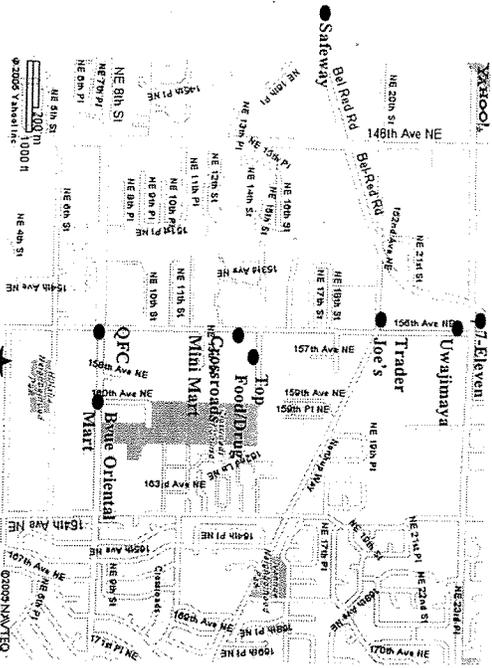
Uwajimaya Inc
 (425) 747-9012
 15555 NE 24th St
 Distance: 1.2 miles

Crossroads Mini Mart
 1422 156th Ave NE
 (425) 641-8571
 Distance: 0.6 miles

7-Eleven
 (425) 885-0197
 15521 Bel Red Rd
 Distance: 1.2 miles

Top Food & Drug Bakery
 15751 NE 15th St
 (425) 748-1300
 Distance: 0.6 miles

Safeway
 1645 140th Ave NE
 (425) 373-5263
 Distance: 1.3 miles



Post Office

US Post Office
 15731 NE 8th St
 (800) 275-8777
 Distance: 0.2 miles



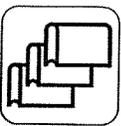
Gas Stations

BP
 15615 NE 8th St
 (425) 957-0306
 Distance: 0.2 miles

Lake Hills Texaco
 106 148th Ave NE
 (425) 746-1244
 Distance: 0.5 miles

7-Eleven
 827 164th Ave NE
 (425) 747-5106
 Distance: 0.4 miles

7-Eleven
 15 148th Ave NE
 (425) 746-7564
 Distance: 0.6 miles



Libraries

King County Library
 Crossroads Shopping
 Center
 15600 NE 8th St
 (425) 644-6203
 Distance: 0.2 miles

Lake Hills Library
 15228 Lake Hills Blvd
 (425) 747-3350
 Distance: 0.8 miles

**Temple B'nai Torah
15727 NE 4th St.
Bellevue, WA 98008**

NOTES

