



STATE OF WASHINGTON
WASHINGTON STATE BOARD OF HEALTH

PO Box 47990 • Olympia, Washington 98504-7990

February 10, 2005

The Honorable Mark Miloscia
Washington State House of Representatives
Housing Committee Chair
437A Legislative Building
PO Box 40600
Olympia, Washington 98504-0600

Dear Representative Miloscia:

I am writing as chair of the Washington State Board of Health in reference to House Bill 1585, regarding standards for housing for people who are temporarily homeless, which is scheduled to be heard before your committee today. I thought it might be useful to provide the committee with some information about the work that the Board and its partners have been doing on standards for homeless housing.

The Board has authority under Chapter 70.62 RCW to write health and safety standards for transient accommodations. These standards are enforced by the Department of Health (DOH) Transient Accommodations Program. Transient accommodations are defined in statute as “any facility such as a hotel, motel, condominium, resort, or any other facility or place offering three or more lodging units to travelers and transient guests.” Twice in the last several years informal opinions from assistant attorneys general assigned to DOH have affirmed that the definition of transient accommodations includes homeless shelters with three or more rooms used for sleeping.

When the Board opened the TA rule for review in 2001, many shelter operators argued that they should not be governed by it. Regulation and the accompanying registration fees, they argued, were unnecessary and overly burdensome on nonprofit organizations that are already trying to address a critical social need with very limited resources. The Board and DOH, however, questioned the advisability of withdrawing state protections from a vulnerable group simply because they cannot afford commercial lodgings.

After exploring possible alternatives with shelter operators and the Department of Community Trade and Economic Development, which funds and regulates many shelters, the Board and DOH convened a Homeless Shelter Workgroup that comprised shelter operators, providers of health care to the homeless, homeless advocates, and representatives of several state agencies. After three daylong meetings, the workgroup reached consensus on a regulatory framework to recommend to the Board. Shelters would have to register and would be subject to enforcement

The Honorable Mark Miloscia
February 10, 2005
Page 2

action by state and local public health, but they would not go through routine inspections and enforcement would be complaint-driven. DOH would adjust fees downward to reflect the costs of this scaled-back program. DOH and SBOH would work with the Homeless Shelter Workgroup or a similar group to develop specific standards for shelters that would be broad, basic, and not highly prescriptive. The group proposed a framework as a starting point for developing standards and a broad definition of a homeless shelter.

Workgroup participants presented the recommendations to the Board in September and the Board is considering whether to initiate rule writing from homeless shelters as part of its work plan for 2005-06.

House Bill 1545 presents a very different regulatory framework for homeless shelters and appears to conflict with the Board's current authority under Chapter 70.62 RCW. Although Section 1 of the bill speaks to the vulnerability of homeless workers, the remaining portions would appear to apply to homeless shelters regardless of whether the homeless resident is employed and regardless of whether the shelter is operated to accommodate workers while they perform some kind of labor.

The Board believes that the health and safety of homeless residents must be assured but that the regulatory framework should consider the needs of both residents and operators. Otherwise, the unintended consequence is likely to be that more people will go without shelter, and are likely to suffer serious health consequences from exposure to crime, disease, and the elements. The framework established to regulate temporary worker housing may not be the best framework for homeless shelters, particular since the nature of facilities for the homeless vary greatly—from emergency shelters set up in church basements for a single night to apartment-like complexes designed to serve families in transition. I would also urge that any legislation approved by the committee address any conflicts with existing authority to regulate homeless shelters.

If you, the committee members, or the sponsors have questions about the Board's work on homeless shelter health and safety standards, please contact Craig McLaughlin at (360) 236-4106 or craig.mclaughlin@doh.wa.gov.

Sincerely,



Thomas Locke, MD, MPH
Chair, State Board of Health

cc: Committee on Housing Members
The Honorable Toby Nixon
Ms. Christina Hulet, Governor's Executive Policy Office
Ms. Chris Townley, Department of Health
Washington State Board of Health Members
Mr. Craig McLaughlin, State Board of Health