



## LAKWOOD CITY COUNCIL STUDY SESSION AGENDA

Monday, February 27, 2023

7:00 P.M.

City of Lakewood

Council Chambers

6000 Main Street SW

Lakewood, WA 98499

Residents can virtually attend City Council meetings by watching them live on the city's YouTube channel:

<https://www.youtube.com/user/cityoflakewoodwa>

Those who do not have access to YouTube can call in to listen by telephone via Zoom: Dial +1(253) 215-8782 and enter meeting ID: 868 7263 2373

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Page No.

### CALL TO ORDER

### ITEMS FOR DISCUSSION:

- (3) 1. United Way of Pierce County Presentation. – *Dona Ponepinto, President and CEO, United Way of Pierce County*
- (26) 2. Opioid Litigation Update. – (Memorandum)
- (40) 3. Review naming process for Motor Avenue Plaza. – (Memorandum)
- (47) 4. Parks Capital Improvement Program Update - American Lake Park and Wards Lake Park. – (Memorandum)

### ITEMS TENTATIVELY SCHEDULED FOR THE MARCH 6, 2023 REGULAR CITY COUNCIL MEETING:

1. Business Showcase. – *Bite Me Cookies, Deborah Tuggle*
2. Proclamation recognizing March as Women's History Month.  
- *Linda Smith, President/CEO, Lakewood Chamber of Commerce*
3. Proclamation recognizing March as American Red Cross Month.  
- *Larry Smith and Yvette Wilson, American Red Cross*
4. Youth Council Report.
5. Clover Park School District Report.

*Persons requesting special accommodations or language interpreters should contact the City Clerk, 253-983-7705, as soon as possible in advance of the Council meeting so that an attempt to provide the special accommodations can be made.*

6. Authorizing the execution of an amendment to the purchase and sale agreement related to Wards Lake Park. – (Motion – Consent Agenda)
7. Authorizing the execution of an amendment to the agreement with Tangram Design, LLC, for parks way finding signs. – (Motion – Consent Agenda)
8. Authorizing the execution of an agreement with Public Restroom Company for the American Lake Park Access Improvements. – (Motion – Consent Agenda)
9. Authorizing the execution of an agreement with Stantec Consulting Services, Inc., for the military installation resiliency review project. – (Motion – Consent Agenda)
10. Authorizing the execution of an agreement with Matrix, for the military housing study project. – (Motion – Consent Agenda)
11. Approving the disposal through surplus of vehicle 42221, a boom truck formerly used to maintain the City of Lakewood's traffic signal system. – (Motion – Consent Agenda)
12. This is the date set for public hearing on the request to vacate 113<sup>th</sup> Street SW, west of Kendrick Street SW. – (Public Hearings and Appeals – Regular Agenda)
13. Update on Lakewood's Diversity, Equity, Inclusion and Belonging Strategic Plan Development. – (Reports by the City Manager)

## **REPORTS BY THE CITY MANAGER**

## **CITY COUNCIL COMMENTS**

## **ADJOURNMENT**

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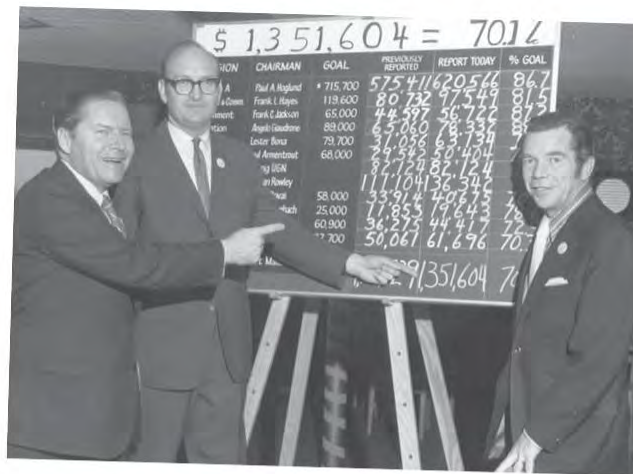
# CREATING POSSIBILITIES TOGETHER

100 YEARS AND BEYOND



United Way of Pierce County





CREATING POSSIBILITIES  
**100**  
 1921 - 2021  
 TOGETHER



United Way of Pierce County

tackling poverty  
 at its roots





# CREATING POSSIBILITIES TOGETHER

100 YEARS AND BEYOND



United Way of Pierce County

tackling poverty  
at its **roots**



**TOGETHER** We've invested...

**OVER \$6M** INTO THE COMMUNITY  
**IN 2021 ALONE**

**\$350M** INTO PIERCE COUNTY  
**OVER 100 YEARS**



We've moved...

**6,300** FAMILIES FROM CRISIS  
**TO SELF-SUFFICIENCY**

Since 2017 (towards our  
goal of 15,000 families)

**100%**  
**OF EVERY \$1**  
**DONATED**  
**GOES BACK INTO**  
**PIERCE COUNTY**



United Way of Pierce County

# tackling poverty at its **roots**



United Way of Pierce County

*Because one in three families is too many*

OUR  
**BOLD**  
GOAL

We will lift **15,000 households**  
out of poverty **by 2028** and into  
self-sufficiency, one family at a time.



United Way of Pierce County

tackling poverty  
at its **roots**



**1 in 3**  
**HOUSEHOLDS**  
**STRUGGLE WITH**  
**POVERTY**

*101,000 families in  
Pierce County, many who  
are hardworking families  
with children, struggle to  
make ends meet.*

Who is  
**ALICE?**

Asset  
Limited



Income  
Constrained



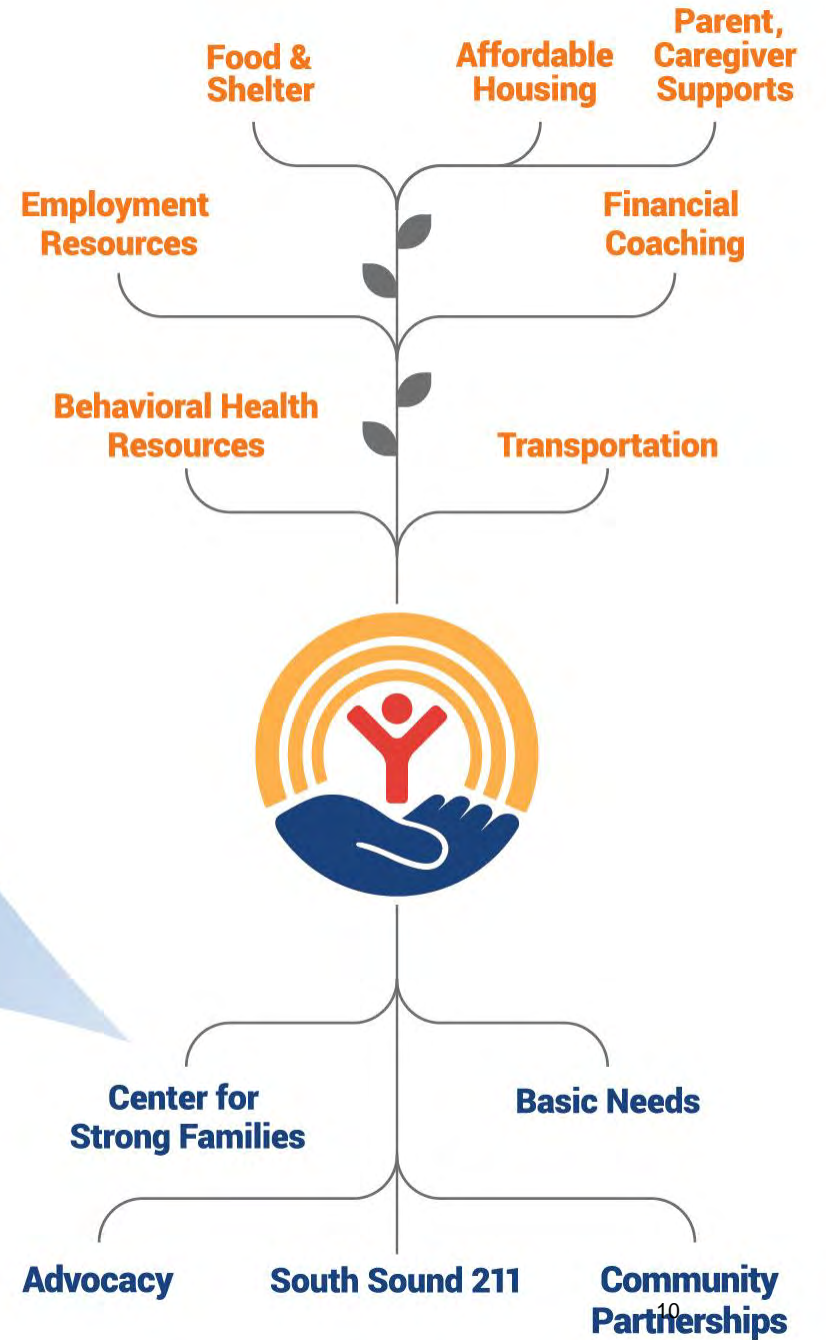
Employed



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at its **roots**

# Our Work



United Way of Pierce County

tackling poverty  
at its **roots**

# Basic Needs

We provide essential components of the social safety net, such as food and shelter.

Donors like you, helped more than  
**143,708** people last year.

tackling poverty  
at its **roots**



# South Sound 211

Pierce, Thurston and Lewis Counties

We connect people in need with a trained specialist and to critical community resources, such as:

- Utilities
- Basic Food
- Legal Assistance
- Housing
- Behavioral & Physical Health
- ...and much more!
- Transportation

More than **80,000** contacts made last year.

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at its **roots**



# 211 Services



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## South Sound 211

The Basic Food program provides funds to help qualifying applicants purchase nutritious food each month. The benefit card can be used just like a debit card and is now eligible to more people.



We partner with nearly all pharmacies nationwide to negotiate prescription discounts, so you receive a lower price. Our pharmacy discount card is for everyone nationwide, whether or not you have health insurance coverage. More than 13 million people helped and \$1.5 billion in savings!



## Help Me Grow Pierce County

Help Me Grow  
Pierce County

Help Me Grow Pierce County, a free service offered through a partnership of local community organizations, supports children's growth and well-being by connecting families to local resources for pregnancy and children ages 0 to 5 years old, and by connecting them to other families.

## Ride United: Lyft



Our 211 Transportation Navigators can help you with access issues that include bus passes, ridesharing services and other resources throughout Pierce, Thurston and Lewis Counties. We do this by providing free Lyft rides for trips related to Education, Employment, Financial Benefits, Food Access and Medical Appointments.

# Center for Strong Families



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at its roots

7 centers in Pierce County help residents face their toughest financial challenges by helping families take control of their finances and improve their bottom line.

## A Network of Trusted Community Organizations:

- Bethel School District
- Clover Park Technical College
- Goodwill of the Olympics and Rainier Region
- Sound Outreach
- Sumner-Bonney Lake School District
- Tacoma Community House
- Tacoma Housing Authority

**\$1,943** Average monthly increase in earnings last year



# Community Impact

Last Year

## **BASIC NEEDS**

**450,000**

meals and snacks provided to kids and their families by Power Pack partners

**5,709**

individuals received supportive services designed to break down barriers to self-sufficiency

**1,205**

individuals attained or maintained stable, permanent housing



**211**

**704**

individuals connected with coaches

**\$5,018**

average increase in short-term savings

**337**

Individuals who achieved key financial goal

**8,416**

individuals connected to rental assistance

**2,269**

individuals connected to transportation

**4,066**

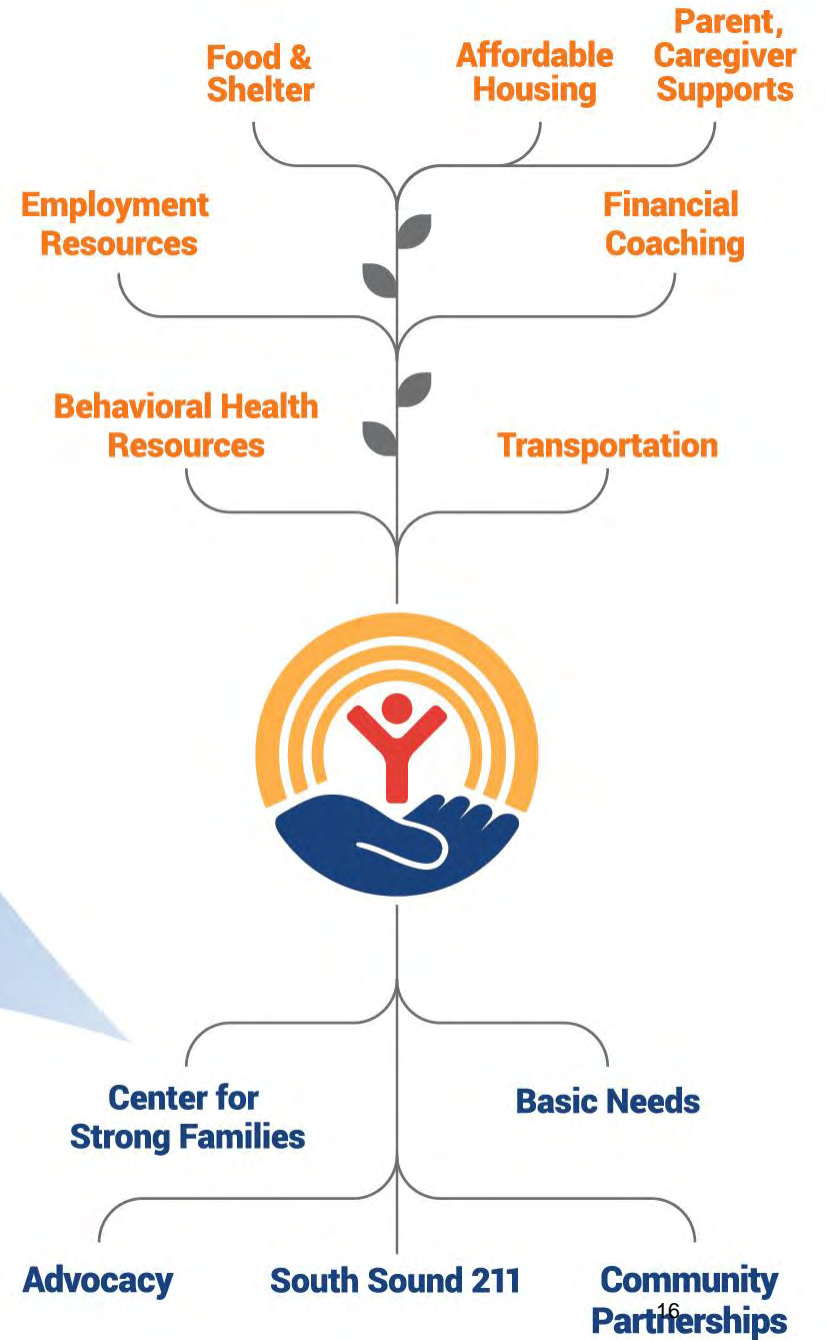
individuals connected to shelter



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United Way of Pierce County

# Our Work



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# Advocacy In Action



United Way of Pierce County

- **Legislative Day(s) in Olympia**  
Board members, volunteers and staff met with twenty legislators over three days to share our commitment to advancing our bold goal.

## *We supported successful legislation that:*

- Strengthened the state's Supplemental Nutrition Assistance Program (SNAP)
- Provided funding for the Fair Start for Kids Act
- Secured continued funding for the Help Me Grow Pierce County pilot program
- Secured \$3M in state funding to support the state-wide 211 system

*Learn more at:*

***[www.uwpc.org/advocate](http://www.uwpc.org/advocate)***

**Washington Anti-Poverty Advocates Group** United Way of Pierce County

### 2021 Legislative Priorities

- Revenue**  
Support the revenue needed to maintain and increase access to critical human services, and promote economic recovery by investing in basic needs and dismantling institutional racism.
- Protect Funding for Human Services**  
Support funding for all human services, including additional investments in case-loads and services needed as a result of the pandemic.
- Update the State Standard of Need – HB 1151**  
Modernizing the outdated 1991 standard of need for cash assistance to better reflect actual costs of living in the State of Washington.
- Expand TANF Hardship Exemptions – SB5214**  
Expand the exemptions to the TANF time limits that disproportionately hurt Black, Indigenous, and families of color and ease punitive measures put in place during the Great Recession.
- Housing and Homelessness**  
Invest in rental assistance to address the short term homelessness crisis and invest \$250 million in the Housing Trust Fund and build needed permanent affordable housing.
- Food Security and Nutrition – HB 1151**  
Strengthen food stamps by creating a transitional food benefit; extending funding for SNAP fruit/vegetable incentives; and, bringing parity to our state's food assistance program for legally residing immigrants.

For more information, contact Melanie Smith at [smith.melaniej@gmail.com](mailto:smith.melaniej@gmail.com) or Laurie Lippold at [laurielippold@gmail.com](mailto:laurielippold@gmail.com)

# Key Partnerships

- **Guaranteed Income Initiative – Growing Resilience in Tacoma (GRIT)**
- Hunger-Free Pierce County
- Pierce County Coordinated Transportation Coalition

A single organization cannot solve many entrenched social problems alone. Creating partnerships is what sets us apart and is one of the most strategic ways United Way is driving change to fight the complex challenges of poverty.

- Pierce County Connected Fund
- Pierce County Early Childhood Network
- Pierce County Workforce Partnership
- Ride United
- WA211



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# GRIT (Growing Resilience in Tacoma)



***"[GRIT] changed my house for the better. And I've felt so much less month-to-month stress since this program started. It feels like I have some room to breathe." -GRIT recipient***

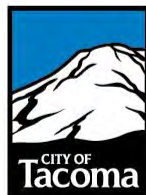
Our newest initiative, Growing Resilience in Tacoma (GRIT), is a guaranteed income demonstration, in partnership with the City of Tacoma. GRIT is the natural evolution of work already being undertaken in our community to dismantle poverty. A guaranteed income is a monthly cash payment given directly to individuals. It is unconditional, with no strings attached. A guaranteed income is meant to supplement, rather than replace, the existing social safety net.

***"Thank you for the gift of \$500. I have been struggling to keep my head above water. With this gift, I will be able to catch up on a few bills and get some groceries in my house." - Lisa***

***"Thank you so much for the money to help me move forward and improve my life. I feel as if a huge weight has been lifted off my shoulders. I feel so blessed for your time and care." - Fred***



United Way of Pierce County



# Volunteer

Small acts have the power to create possibilities.

Great and small acts of kindness create a ripple effect and have the power to create possibilities. Help harness the volunteer spirit to improve conditions in Pierce County.

Get connected with a volunteer opportunity today: [uwpc.org/volunteer](https://uwpc.org/volunteer)



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# Annual Volunteer Events



Day of Action



Martin Luther King, Jr. (MLK)  
Month of Service



Summer of Action



Everything But the Turkey Food Drive

# Thank You



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at its **roots**



# 2021 Community Impact Report: SOUTH PIERCE

Our bold goal is to lift 15,000 households out of poverty by 2028. To date, through your investments and our community partnerships, **6,300 families** are moving toward self-sufficiency and are on their way to thriving.

In 2021, United Way investments in Pierce County resulted in more than 220,000 community impact touchpoints.

- United Way's investments supported community services through 26 organizations **servicing 143,708 individuals** in our community.
- Throughout Pierce County, we have **seven Center for Strong Families sites** serving 455 individuals to build household self-sufficiency.
- Our South Sound 2-1-1 serves Pierce, Thurston, and Lewis Counties, receiving **more than 80,000 contacts annually**.

## For the South Pierce area:

**Centers for Strong Families** – clients engaged in integrated service delivery including financial coaching, employment resources, and income supports designed to move families from crisis to thriving

- **59 people served** in the South Pierce area
- **14 job placement**, average wage of \$17.06
- Average credit score **increase of 32 points**

**Hunger Initiative** - increasing access to healthy, fresh food for those in need

- United Way supports St. Leo Food Connection in providing weekend food packs (Power Packs) to students. **250 Clover Park students were served weekly** by Power Packs during the 2020-21 school year.

## Community Impact

- In 2021, UWPC investments supported **9,727 individuals in South Pierce** served through our 26 funded partner organizations.

## South Sound 211

- In 2021, South Sound 211 received **9,168 calls from the South Pierce County area**.

## Gifts in Kind

- Thirty five nonprofit partners in Pierce County each received donations of new and gently used items to distribute to families in need valued at, on average, \$171,108.

## IMPACT SNAPSHOT

# 143,708

Individuals receiving food, shelter and other essentials to help households move from crisis to stability

# 80,087

Service requests for our South Sound 211 information & referral system

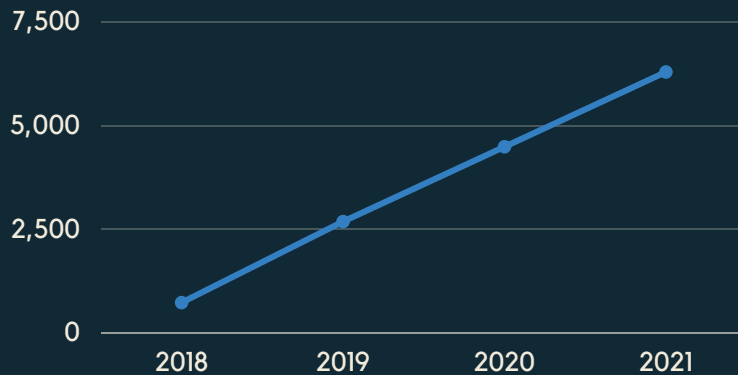
# 19,204

South Pierce County residents served through United Way's programs and investments

# HOUSEHOLDS MOVING TOWARD SELF-SUFFICIENCY



# 6,300



Poverty and self-sufficiency are not exclusively financial issues. Many factors interact to determine whether a family has the resources to exit poverty and attain stability. Self-sufficiency touches multiple domains that include education, well-being, social capital, and finances at the individual, family and community levels of society.

## PROGRAM

## DESCRIPTION

## HIGHLIGHTS

### Center for Strong Families (CSF)

In 2015, United Way launched Center for Strong Families, a network of partners implementing proven strategies to provide struggling families the tools and resources they need to thrive.

Since 2016:

- **1,529 households** enrolled in services
- **550 people** have enrolled in occupational skills training
- **854 people** have obtained jobs
- **776 people** have achieved a FICO score increase

### Hunger-Free Pierce County Collaborative (HFPCCC)

While United Way works to break the cycle of poverty over the long term, every day people face immediate crises that threaten their health and wellbeing. HFPCCC is working to create a community where each person has access to sufficient, nutritious and culturally-appropriate food to support good health.

- **Power Packs** - invest in programs providing weekend food packs for children who rely on free school meals for foundational nutrition.
- **Sustainable Food System** - invest in refrigerated vehicles to support food rescue and access to healthy, fresh food.

### South Sound 211

In addition to operating as a public resource in Pierce, Thurston and Lewis Counties, South Sound 211 is serving as critical infrastructure for local innovative partnerships in our service area.

- **Help Me Grow** - providing resource navigation and access for families with young children
- **Transportation Navigation** - central intake point for special needs transportation, including Ride United in partnership with Lyft
- **Workforce Navigation** - providing workforce development services and supports
- **Housing Navigation** - a single point of contact for various programs for those experiencing homelessness or on the verge of becoming unhoused
- **Mental Health Navigation** - navigator provides confidential information for counseling, support groups and treatment



We couldn't have done  
it without your  
generous *support.*

Thank you  
to all our donors  
and volunteers.

With deep respect and appreciation for our donors and community throughout our 100 years of service, we thank you for giving us the opportunity to be a leader in addressing the most pressing needs in Pierce County. As we look beyond 100 years, we are committed to continuing this legacy, evolving and making an impact along with you.

## Raise your voice to create change!

*By becoming an advocate in your community, you help to inspire hope and create opportunities for a better tomorrow for households who are struggling to get by. Advocacy is a key part of our fight against poverty. Visit <https://www.uwpc.org/advocate> to learn more about United Way of Pierce County's advocacy work.*



-  [contactus@uwpc.org](mailto:contactus@uwpc.org)
-  [www.uwpc.org](http://www.uwpc.org)
-  1501 Pacific Ave #400  
Tacoma, WA 98401
-  (253) 272-4263





To: Mayor and City Councilmembers

From: Heidi Ann Wachter, City Attorney

Through: John Caulfield, City Manager

Date: February 27, 2023

Subject: Opioid Litigation Update

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The City is a participating litigant in one case among many nationwide seeking recovery for damages associated with the opioid epidemic. This case involves numerous plaintiffs comprised primarily of cities and counties and numerous defendants comprised primarily of producers and distributors of opioids. Due to the number of defendants and variety of circumstances (some defendants declaring bankruptcy, others settling, etc.), this case is expected to resolve in pieces rather than as a single judgment.

The first such piece occurred earlier this year when the State of Washington settled with defendants McKesson Corporation, Cardinal Health, Inc. and AmerisourceBergen Corporation, each a distributor. Defendants in question settled with the State of Washington on the condition that the settlement dispose of all liability for distribution in the state; in order for the State to settle the case, each jurisdiction agreed that there is no further exposure for these defendants. The City Council previously authorized the City's participation in the "OneWA MOU" that brought the cities and counties of Washington together regardless of participation in the litigation.

On September 6, 2022, the City Council approved submission of the "Participation Form" and authorized the "Allocation Agreement." The "Participation Form" simply identified the City as one participating in the settlement reached by the State. The "Allocation Agreement" detailed the amount to be paid.

The City received their first settlement allocation for years 1 and 2 on December 31, 2022 in the amount of \$84,168.29.

With regard to how funds may be used, attached is Exhibit A to the One WA Memo of Understanding. This outlines the intended use funding, with reporting to the OACs. The concept is for the geographic areas (Pierce County for Lakewood) to collaborate and determine best use of the money and then oversee the expenditure. As indicated, that collaboration seems to be slow but may pick up if the money only comes with the establishment of the OAC.

Interested departments within the city have met to review the outline of intended uses, mindful of the current distribution amount, and brainstorm best uses. The following is the initial list, which is not intended to be exhaustive:

- Narcan
- Drug Court (may require a regional effort)
- Prevention (advertising/training/PR)
- “Portland Loo” with a needle drop at Ward’s Lake Park
- Nexus to homeless programs/can look at camp cleanup
- Non-profits – brainstorm with Community Collaboration
- Work with the Health Department
- Related business and retail theft... work with the Northwest Retailer’s Association (if we need to reign it in, maybe focus on publicly accessible places/bathrooms)
- Urban forestry – tie it in through work crew/drug court...or focus on clean-up

Each item on this list was considered and some are not tenable for any number of reasons. For example, one idea, the “Portland Loo” carries a price of approximately \$250,000.00 before getting to any question of ongoing maintenance. Similarly, a drug court for the city will cost far more than the current distribution.

As discussion continued, the topic of the embedded mental health team through the Lakewood Police Department came into focus as the best use for the funding. The program is enormously successful, the distribution is sufficient to fund a significant portion of an FTE and there is some partnership with Greater Lakes Mental Health.

# **EXHIBIT A**

# OPIOID ABATEMENT STRATEGIES

## PART ONE: TREATMENT

### A. TREAT OPIOID USE DISORDER (OUD)

Support treatment of Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health (SUD/MH) conditions, co-usage, and/or co-addiction through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including all forms of Medication-Assisted Treatment (MAT) approved by the U.S. Food and Drug Administration.
2. Support and reimburse services that include the full American Society of Addiction Medicine (ASAM) continuum of care for OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including but not limited to:
  - a. Medication-Assisted Treatment (MAT);
  - b. Abstinence-based treatment;
  - c. Treatment, recovery, or other services provided by states, subdivisions, community health centers; non-for-profit providers; or for-profit providers;
  - d. Treatment by providers that focus on OUD treatment as well as treatment by providers that offer OUD treatment along with treatment for other SUD/MH conditions, co-usage, and/or co-addiction; or
  - e. Evidence-informed residential services programs, as noted below.
3. Expand telehealth to increase access to treatment for OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including MAT, as well as counseling, psychiatric support, and other treatment and recovery support services.
4. Improve oversight of Opioid Treatment Programs (OTPs) to assure evidence-based, evidence-informed, or promising practices such as adequate methadone dosing.
5. Support mobile intervention, treatment, and recovery services, offered by qualified professionals and service providers, such as peer recovery coaches, for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction and for persons who have experienced an opioid overdose.
6. Support treatment of mental health trauma resulting from the traumatic experiences of the opioid user (e.g., violence, sexual assault, human trafficking, or adverse childhood experiences) and family members (e.g., surviving family members after an overdose

or overdose fatality), and training of health care personnel to identify and address such trauma.

7. Support detoxification (detox) and withdrawal management services for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including medical detox, referral to treatment, or connections to other services or supports.
8. Support training on MAT for health care providers, students, or other supporting professionals, such as peer recovery coaches or recovery outreach specialists, including telementoring to assist community-based providers in rural or underserved areas.
9. Support workforce development for addiction professionals who work with persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
10. Provide fellowships for addiction medicine specialists for direct patient care, instructors, and clinical research for treatments.
11. Provide funding and training for clinicians to obtain a waiver under the federal Drug Addiction Treatment Act of 2000 (DATA 2000) to prescribe MAT for OUD, and provide technical assistance and professional support to clinicians who have obtained a DATA 2000 waiver.
12. Support the dissemination of web-based training curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service-Opioids web-based training curriculum and motivational interviewing.
13. Support the development and dissemination of new curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service for Medication-Assisted Treatment.

## **B. SUPPORT PEOPLE IN TREATMENT AND RECOVERY**

Support people in treatment for and recovery from OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Provide the full continuum of care of recovery services for OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including supportive housing, residential treatment, medical detox services, peer support services and counseling, community navigators, case management, and connections to community-based services.
2. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those who need it to persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.

3. Provide access to housing for people with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including supportive housing, recovery housing, housing assistance programs, or training for housing providers.
4. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
5. Support or expand peer-recovery centers, which may include support groups, social events, computer access, or other services for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
6. Provide employment training or educational services for persons in treatment for or recovery from OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
7. Identify successful recovery programs such as physician, pilot, and college recovery programs, and provide support and technical assistance to increase the number and capacity of high-quality programs to help those in recovery.
8. Engage non-profits, faith-based communities, and community coalitions to support people in treatment and recovery and to support family members in their efforts to manage the opioid user in the family.
9. Provide training and development of procedures for government staff to appropriately interact and provide social and other services to current and recovering opioid users, including reducing stigma.
10. Support stigma reduction efforts regarding treatment and support for persons with OUD, including reducing the stigma on effective treatment.

**C. CONNECT PEOPLE WHO NEED HELP TO THE HELP THEY NEED (CONNECTIONS TO CARE)**

Provide connections to care for people who have – or are at risk of developing – OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Ensure that health care providers are screening for OUD and other risk factors and know how to appropriately counsel and treat (or refer if necessary) a patient for OUD treatment.
2. Support Screening, Brief Intervention and Referral to Treatment (SBIRT) programs to reduce the transition from use to disorders.
3. Provide training and long-term implementation of SBIRT in key systems (health, schools, colleges, criminal justice, and probation), with a focus on youth and young adults when transition from misuse to opioid disorder is common.

4. Purchase automated versions of SBIRT and support ongoing costs of the technology.
5. Support training for emergency room personnel treating opioid overdose patients on post-discharge planning, including community referrals for MAT, recovery case management or support services.
6. Support hospital programs that transition persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, or persons who have experienced an opioid overdose, into community treatment or recovery services through a bridge clinic or similar approach.
7. Support crisis stabilization centers that serve as an alternative to hospital emergency departments for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction or persons that have experienced an opioid overdose.
8. Support the work of Emergency Medical Systems, including peer support specialists, to connect individuals to treatment or other appropriate services following an opioid overdose or other opioid-related adverse event.
9. Provide funding for peer support specialists or recovery coaches in emergency departments, detox facilities, recovery centers, recovery housing, or similar settings; offer services, supports, or connections to care to persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction or to persons who have experienced an opioid overdose.
10. Provide funding for peer navigators, recovery coaches, care coordinators, or care managers that offer assistance to persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction or to persons who have experienced on opioid overdose.
11. Create or support school-based contacts that parents can engage with to seek immediate treatment services for their child; and support prevention, intervention, treatment, and recovery programs focused on young people.
12. Develop and support best practices on addressing OUD in the workplace.
13. Support assistance programs for health care providers with OUD.
14. Engage non-profits and the faith community as a system to support outreach for treatment.
15. Support centralized call centers that provide information and connections to appropriate services and supports for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
16. Create or support intake and call centers to facilitate education and access to treatment, prevention, and recovery services for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.



17. Develop or support a National Treatment Availability Clearinghouse – a multistate/nationally accessible database whereby health care providers can list locations for currently available in-patient and out-patient OUD treatment services that are accessible on a real-time basis by persons who seek treatment.

**D. ADDRESS THE NEEDS OF CRIMINAL-JUSTICE-INVOLVED PERSONS**

Address the needs of persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction who are involved – or are at risk of becoming involved – in the criminal justice system through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Support pre-arrest or post-arrest diversion and deflection strategies for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including established strategies such as:
  - a. Self-referral strategies such as the Angel Programs or the Police Assisted Addiction Recovery Initiative (PAARI);
  - b. Active outreach strategies such as the Drug Abuse Response Team (DART) model;
  - c. “Naloxone Plus” strategies, which work to ensure that individuals who have received naloxone to reverse the effects of an overdose are then linked to treatment programs or other appropriate services;
  - d. Officer prevention strategies, such as the Law Enforcement Assisted Diversion (LEAD) model;
  - e. Officer intervention strategies such as the Leon County, Florida Adult Civil Citation Network or the Chicago Westside Narcotics Diversion to Treatment Initiative;
  - f. Co-responder and/or alternative responder models to address OUD-related 911 calls with greater SUD expertise and to reduce perceived barriers associated with law enforcement 911 responses; or
  - g. County prosecution diversion programs, including diversion officer salary, only for counties with a population of 50,000 or less. Any diversion services in matters involving opioids must include drug testing, monitoring, or treatment.
2. Support pre-trial services that connect individuals with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction to evidence-informed treatment, including MAT, and related services.
3. Support treatment and recovery courts for persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, but only if these courts provide referrals to evidence-informed treatment, including MAT.

4. Provide evidence-informed treatment, including MAT, recovery support, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction who are incarcerated in jail or prison.
5. Provide evidence-informed treatment, including MAT, recovery support, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction who are leaving jail or prison have recently left jail or prison, are on probation or parole, are under community corrections supervision, or are in re-entry programs or facilities.
6. Support critical time interventions (CTI), particularly for individuals living with dual-diagnosis OUD/serious mental illness, and services for individuals who face immediate risks and service needs and risks upon release from correctional settings.
7. Provide training on best practices for addressing the needs of criminal-justice-involved persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction to law enforcement, correctional, or judicial personnel or to providers of treatment, recovery, case management, or other services offered in connection with any of the strategies described in this section.

**E. ADDRESS THE NEEDS OF PREGNANT OR PARENTING WOMEN AND THEIR FAMILIES, INCLUDING BABIES WITH NEONATAL ABSTINENCE SYNDROME**

Address the needs of pregnant or parenting women with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, and the needs of their families, including babies with neonatal abstinence syndrome, through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Support evidence-based, evidence-informed, or promising treatment, including MAT, recovery services and supports, and prevention services for pregnant women – or women who could become pregnant – who have OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, and other measures to educate and provide support to families affected by Neonatal Abstinence Syndrome.
2. Provide training for obstetricians or other healthcare personnel that work with pregnant women and their families regarding treatment of OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
3. Provide training to health care providers who work with pregnant or parenting women on best practices for compliance with federal requirements that children born with Neonatal Abstinence Syndrome get referred to appropriate services and receive a plan of safe care.
4. Provide enhanced support for children and family members suffering trauma as a result of addiction in the family; and offer trauma-informed behavioral health treatment for adverse childhood events.

5. Offer enhanced family supports and home-based wrap-around services to persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, including but not limited to parent skills training.
6. Support for Children’s Services – Fund additional positions and services, including supportive housing and other residential services, relating to children being removed from the home and/or placed in foster care due to custodial opioid use.

PART TWO: PREVENTION
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**F. PREVENT OVER-PRESCRIBING AND ENSURE APPROPRIATE PRESCRIBING AND DISPENSING OF OPIOIDS**

Support efforts to prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Training for health care providers regarding safe and responsible opioid prescribing, dosing, and tapering patients off opioids.
2. Academic counter-detailing to educate prescribers on appropriate opioid prescribing.
3. Continuing Medical Education (CME) on appropriate prescribing of opioids.
4. Support for non-opioid pain treatment alternatives, including training providers to offer or refer to multi-modal, evidence-informed treatment of pain.
5. Support enhancements or improvements to Prescription Drug Monitoring Programs (PDMPs), including but not limited to improvements that:
  - a. Increase the number of prescribers using PDMPs;
  - b. Improve point-of-care decision-making by increasing the quantity, quality, or format of data available to prescribers using PDMPs or by improving the interface that prescribers use to access PDMP data, or both; or
  - c. Enable states to use PDMP data in support of surveillance or intervention strategies, including MAT referrals and follow-up for individuals identified within PDMP data as likely to experience OUD.
6. Development and implementation of a national PDMP – Fund development of a multistate/national PDMP that permits information sharing while providing appropriate safeguards on sharing of private health information, including but not limited to:
  - a. Integration of PDMP data with electronic health records, overdose episodes, and decision support tools for health care providers relating to OUD.

- b. Ensuring PDMPs incorporate available overdose/naloxone deployment data, including the United States Department of Transportation’s Emergency Medical Technician overdose database.
7. Increase electronic prescribing to prevent diversion or forgery.
8. Educate Dispensers on appropriate opioid dispensing.

**G. PREVENT MISUSE OF OPIOIDS**

Support efforts to discourage or prevent misuse of opioids through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Corrective advertising or affirmative public education campaigns based on evidence.
2. Public education relating to drug disposal.
3. Drug take-back disposal or destruction programs.
4. Fund community anti-drug coalitions that engage in drug prevention efforts.
5. Support community coalitions in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction – including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA).
6. Engage non-profits and faith-based communities as systems to support prevention.
7. Support evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent-teacher and student associations, and others.
8. School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids.
9. Support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
10. Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills.
11. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses or other school staff, to

address mental health needs in young people that (when not properly addressed) increase the risk of opioid or other drug misuse.

#### **H. PREVENT OVERDOSE DEATHS AND OTHER HARMS**

Support efforts to prevent or reduce overdose deaths or other opioid-related harms through evidence-based, evidence-informed, or promising programs or strategies that may include, but are not limited to, the following:

1. Increase availability and distribution of naloxone and other drugs that treat overdoses for first responders, overdose patients, opioid users, families and friends of opioid users, schools, community navigators and outreach workers, drug offenders upon release from jail/prison, or other members of the general public.
2. Provision by public health entities of free naloxone to anyone in the community, including but not limited to provision of intra-nasal naloxone in settings where other options are not available or allowed.
3. Training and education regarding naloxone and other drugs that treat overdoses for first responders, overdose patients, patients taking opioids, families, schools, and other members of the general public.
4. Enable school nurses and other school staff to respond to opioid overdoses, and provide them with naloxone, training, and support.
5. Expand, improve, or develop data tracking software and applications for overdoses/naloxone revivals.
6. Public education relating to emergency responses to overdoses.
7. Public education relating to immunity and Good Samaritan laws.
8. Educate first responders regarding the existence and operation of immunity and Good Samaritan laws.
9. Expand access to testing and treatment for infectious diseases such as HIV and Hepatitis C resulting from intravenous opioid use.
10. Support mobile units that offer or provide referrals to treatment, recovery supports, health care, or other appropriate services to persons that use opioids or persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
11. Provide training in treatment and recovery strategies to health care providers, students, peer recovery coaches, recovery outreach specialists, or other professionals that provide care to persons who use opioids or persons with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction.
12. Support screening for fentanyl in routine clinical toxicology testing.

## PART THREE: OTHER STRATEGIES

### **I. FIRST RESPONDERS**

In addition to items C8, D1 through D7, H1, H3, and H8, support the following:

1. Current and future law enforcement expenditures relating to the opioid epidemic.
2. Educate law enforcement or other first responders regarding appropriate practices and precautions when dealing with fentanyl or other drugs.

### **J. LEADERSHIP, PLANNING AND COORDINATION**

Support efforts to provide leadership, planning, and coordination to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following:

1. Community regional planning to identify goals for reducing harms related to the opioid epidemic, to identify areas and populations with the greatest needs for treatment intervention services, or to support other strategies to abate the opioid epidemic described in this opioid abatement strategy list.
2. A government dashboard to track key opioid-related indicators and supports as identified through collaborative community processes.
3. Invest in infrastructure or staffing at government or not-for-profit agencies to support collaborative, cross-system coordination with the purpose of preventing overprescribing, opioid misuse, or opioid overdoses, treating those with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, supporting them in treatment or recovery, connecting them to care, or implementing other strategies to abate the opioid epidemic described in this opioid abatement strategy list.
4. Provide resources to staff government oversight and management of opioid abatement programs.

### **K. TRAINING**

In addition to the training referred to in various items above, support training to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following:

1. Provide funding for staff training or networking programs and services to improve the capability of government, community, and not-for-profit entities to abate the opioid crisis.
2. Invest in infrastructure and staffing for collaborative cross-system coordination to prevent opioid misuse, prevent overdoses, and treat those with OUD and any co-occurring SUD/MH conditions, co-usage, and/or co-addiction, or implement other

strategies to abate the opioid epidemic described in this opioid abatement strategy list (e.g., health care, primary care, pharmacies, PDMPs, etc.).

## **L. RESEARCH**

Support opioid abatement research that may include, but is not limited to, the following:

1. Monitoring, surveillance, and evaluation of programs and strategies described in this opioid abatement strategy list.
2. Research non-opioid treatment of chronic pain.
3. Research on improved service delivery for modalities such as SBIRT that demonstrate promising but mixed results in populations vulnerable to opioid use disorders.
4. Research on innovative supply-side enforcement efforts such as improved detection of mail-based delivery of synthetic opioids.
5. Expanded research on swift/certain/fair models to reduce and deter opioid misuse within criminal justice populations that build upon promising approaches used to address other substances (e.g. Hawaii HOPE and Dakota 24/7).
6. Research on expanded modalities such as prescription methadone that can expand access to MAT.



TO: Mayor and City Council

FROM: Mary Dodsworth, Parks, Recreation & Community Services Director

THROUGH: John Caulfield, City Manager *John E. Caulfield*

DATE: February 27, 2023

SUBJECT: Naming Process for Motor Ave

ATTACHMENT: Resolution 2022-06

**Summary:** City Council discussed naming or renaming the plaza area on Motor Avenue in Lakewood. A series of options and processes are provided for Council consideration.

**Background:** A major goal of the City of Lakewood is to create a downtown area in the Central Business District (CBD) zone and redevelop it into an urban area with civic amenities, walkable streets and a mix of uses including housing, entertainment, restaurants, and retail. In 2018 City Council approved the Lakewood Downtown Plan vision which included suggested land use changes and gathering places to help bring about desired change and development. One of the concepts was to create a festival street along Motor Avenue consistent with an adopted concept plan known as the Lakewood Colonial Plaza Project. In 2019 Motor Ave was improved as a “complete street” and banners identifying the area with historic images and uses were installed as part of the citywide banners and brackets program. In 2019 a grand opening was held to celebrate the changes and to introduce this new festival street area to our community. Soon thereafter the pandemic delayed the City from hosting events at this site.

In late 2021 the City started hosting events in this space to include our 25th Anniversary party and a variety of street festivals. Street festivals occur under the lights and have included food trucks, cars shows, dance parties, arts, craft and farmers market vendors, community partner booths, live music, international entertainment and family activities and games. The events are marketed as “Street Festivals on Motor Ave” (see below).

**Current Status:** If you were to ask just about anyone in the city where Motor Avenue is located you would most likely hear a number of responses to include “I don’t know or is it that space near the old QFC store?” When directing folks to this area we often use landmarks to help people find their way by saying it’s near Little Church on the Prairie or



the Lakewood Historical Museum. Very few remember the old Lakewood Theatre or Lakewood Terrace restaurant. When attending our Street Festival events most folks do not know the name of the street they are visiting. So how did they get there? They either saw signs regarding an event, know the band, are following one of the vendors or could see the road was closed and followed the detours until they saw the food trucks. Although the road has a name (Motor Avenue), the area has an identity problem.

**Naming a City Resource:** In June, 2022 City Council updated Resolution No. 2022-06 (attached) creating a policy and procedure for naming/renaming a public park, facility, street or open space area. This policy allows City Council to nominate a site to be named or renamed and recommends soliciting suggestions for names from the community.

Before determining a new name for any area a few questions should be considered.

- Who is suggesting the name change - Council decision or a nomination by an individual or group?
- What criteria should be used and why (see current policy);
- When should the name change – has the site changed or is this associated with a past or current memorial event (city anniversary or birthday of a historic figure).
- Where is the identified area to be named/renamed – is this an entire new area or part of an existing site? Do you want to add the “name” at the beginning, middle or end of the physical area?
- Why does this location need a name – is it a new space or building or will it identify the area for current use (Motor Ave) or planning for a proposed future use (Amazon Square)
- How do you name / rename an area. Add signage, update maps, or if a street name is proposed to be changed and or the suggested name doesn’t identify the site by location, new signage and specific marketing and wayfinding should be included in the process

**Naming or Renaming Motor Avenue:** The following criteria can be considered when choosing a name for the road or the area known as Motor Avenue:

- Past use or history of the site: Colonial Center
  - Potential name: *Colonial Plaza*
- Present use of the site: Motor Avenue
  - Potential name: *Motor Ave*
- Future use of the site: Central Business District
  - Potential name: *Central Marketplace*
- Significant natural feature or landmark: Lakewood Theatre
  - Potential name: *Theatre on the Square*
- Outstanding Individual, Historical figures or Native American heritage
  - Potential name: *Community or Unity Plaza* (after Dr. Claudia Thomas)

**Process:** Per the resolution the following process could occur:

- Council can choose to name or rename Motor Avenue (the entire road or area in or near the roadway) by consensus or Council action.
- Council can direct the City to use a variety of sources to inform the community that a change is being considered (website, Connections magazine, signage at the site or social media).

- Council can provide suggested names or the City can survey the community regarding names. The survey could be open for all suggestions, could feature a few naming options or could provide naming criteria and asked for suggestions to go with the various categories. Survey could be on city website or occur at various community meetings or events such as SummerFEST or farmers market.
- Council can review the outcome of the survey or community input process and either select one name for consideration or select a variety of options to consider. Council will refer the name(s) to the appropriate staff (City Manager) or committee (Parks and Recreation Advisory Board - PRAB) for review. Based on previous process, it was suggested that only one name at a time be reviewed by the PRAB/community.
- An application would be created and the staff/committee would select the appropriate process to solicit public input to represent a broad range of demographics and interests.
- If selected, the PRAB could consider at a future meeting
- When ready, the PRAB would forward a recommendation to Council for consideration
- Council will make the final decision and take official action regarding naming or renaming a public street or open space area.

Staff will be at the February 27<sup>th</sup> study session to continue the conversation.



## RESOLUTION NO. 2022-06

A RESOLUTION of the City Council of the City of Lakewood, Washington, creating a policy and procedure for the naming/renaming of a public park, facility, street, open space or natural area.

WHEREAS, the City Council is inspired by its own sense of history, progress and heritage to provide lasting remembrance of events and individuals; and

WHEREAS, the naming and renaming of a public park, facility, street, open space or natural area must reflect dignity and significance as well as honoring the past, present and future of the land or community; and

WHEREAS, the City Council and community have sufficient occasion to name or rename a public park, facility, street, open space or natural area that a transparent process will be of use; and

WHEREAS, it is appropriate to establish criteria and procedures for the official naming/renaming of a public park, facility, street, open space or natural area.

NOW, THEREFORE, THE CITY COUNCIL OF THE CITY OF LAKEWOOD, WASHINGTON HEREBY RESOLVES as follows:

Section 1. That Resolution 2016-18 is hereby repealed.

Section 2.

A. The naming/renaming of a public park, facility, street, open space or natural area shall be in accordance with the procedures and criteria set forth below. City parks and other city facilities referenced in the procedures and criteria includes but is not limited to a public park, facility, street, open space or natural area. Once adopted, name changes should occur on an exceptional basis only. Permanent naming/renaming opportunities shall comply with this policy.

B. Naming Application Process

Any group, person, or organization may submit an application to name or rename a public park, facility, street, open space or natural area. The application is to be submitted to the City Manager. Applications should contain the following information:

1. Name of applicant;
2. Proposed name;
3. Background/support for proposed name;
4. Demonstrated community support for proposed name on a petition that includes not less than 300 signatures and residential address within the city;
5. Identification of interested/impacted stakeholders;
6. Description/Map showing location; and
7. If proposing to name/rename after an outstanding person, documentation of that person's community or financial contribution to the City, State or Nation's history.

Applications pursuant to this section shall be accompanied by a \$250 fee. When the fee is added to the fee schedule, the fee schedule shall apply.

- C. Proposed naming information submitted to the City or referred by the City Council will be reviewed by the City Manager or designee, who shall then direct a process appropriate to the proposal.
1. Such process shall most often involve a City community advisory board or committee as assigned by the City Manager or designee.
  2. Names shall be considered based on the criteria outlined below and with consideration of public input appropriate to the proposal. Public input solicited shall include appropriate notice to and communication with residents.
  3. The proposal shall be submitted to the City Council, who will review the recommendations, suggestions and public input, after which the City Council shall determine the name for public park, facility, street, open space or natural area. The City Council is not bound in any way by the proposal submitted. City Council review shall include adequacy of notice, communication with residents and composition of the committee.
- D. If the City Council determines that a public park, facility, street, open space or natural area should be named or renamed, the City may solicit suggestions for names from community organizations and individuals. All suggestions, whether solicited or independently offered, shall be acknowledged and considered.
- E. The following criteria shall be considered:
1. The past, present and future history of the land or community. Such consideration should include the following:
    - a) It is in the best interest of the city and provides a worthy and enduring legacy for the city; and
    - b) The name reflects the significance of a feature and the mission and vision of the city; and
    - c) The name is appropriate to the location and will remain relevant as the city grows and changes.
  2. The individual or entity who has donated substantial monies or land or has been otherwise instrumental in the acquisition of the property.
  3. The articulated preference of residents of the neighborhood surrounding the public facility.
  4. Engenders a strong, positive image.
  5. Has broad public support.
  6. Outstanding individuals will be considered posthumously. Consideration will be given when the person was exceptionally dedicated or demonstrated excellence in service in ways that made a significant contribution to the land, community, park, or city department or the person risked his or her life to save or protect others. There shall be a lapse of at least thirty six (36) months between the date of the death of the person(s) or

of the event commemorated and the submittal of application naming or renaming of the public park, facility, street, open space or natural area; or at the discretion of the City Council.

7. When a public park, facility, street, open space or natural area is associated with or located near events, people, and places of historic, cultural or social significance: consideration will be given to naming the park and/or facility, after such events, people and places. This history may include its founders, other historical figures, Native American heritage, local landmarks, prominent geographical locations, and natural features.
8. A gift-related naming occurs when a donor makes a significant contribution that adds considerable value to the City of Lakewood. If the city benefits from the generosity of residents, businesses, organizations and foundations, the significance of the donation may warrant consideration for requests from either the donor or another party to acknowledge such a gift by naming. Decisions regarding such recognition are made on a case-by-case basis and will take into consideration the total cost of the project, the availability of other funds and the level of financial contribution. All gift-related naming will be documented by a written donor agreement. As a guideline, the threshold for considering the naming of an asset will include one or more of the following:
  - a) Land for the majority of the park was deeded to the City by the donor; and
  - b) Contribution of a minimum of 60% of the capital construction costs associated with developing the park and/or facility; and
  - c) Provision of a minimum 20-year endowment for the continued maintenance, operation and/or programming of the Asset.
9. Name changes will be subject to review that includes consideration of the original justification for the current name, the monetary value of prior contributions, and the rationale for changing the name. The naming/renaming process would follow all other steps in the naming application process.

The naming of physical entities is intended to be in place for the life of the specific physical entity. If, in the determination of the City Council, circumstances change so that the purpose for which the physical entity was established is significantly altered, past its life cycle or if the physical entity is no longer needed or habitable, they will determine an appropriate way to recognize the donor's naming gift in perpetuity. If the City and the donor(s) previously established a contract that provides a practicable course of action, then that action shall be followed.

10. The donation of land, facilities, or funds for the acquisition, renovation or maintenance of land or facilities, shall not constitute an obligation by the City to name the land and/or facility or any portion thereof after an individual, family or organization. The City retains sole discretion with regard to initiating the process to name or rename a park or facility and further, the City retains sole discretion to implement, modify or reject the name or rename recommended by the process.
11. As modifications are made to property over time, situations may occur where it is in the best interest of the city at the sole discretion of the city, to relocate, modify, or reallocate named city property. This is to insure that the original purpose of the naming and the donor's wishes, if built with private funds, are preserved as appropriate.

F. Naming/Renaming Process

The following steps shall be used as guidelines for consideration:

1. Refer completed application to appropriate staff or committee for review and recommendation;
2. Solicit public input, the purpose of which is to represent the broad range of demographics and interests of city residents;
3. Forward recommendation to City Council for review and consideration; and
4. Notify the applicant of the application status once the City Council has taken action.

Section 3. That this Resolution shall be in full force and effect upon passage and signatures hereon.

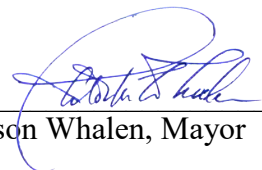
PASSED by the City Council this 6<sup>th</sup> day of June, 2022.

CITY OF LAKEWOOD

Attest:



\_\_\_\_\_  
Briana Schumacher, City Clerk

  
\_\_\_\_\_  
Jason Whalen, Mayor

Approved as to Form:



\_\_\_\_\_  
Heidi Wachter, City Attorney



TO: Mayor and City Councilmembers

FROM: Stacey Reding, Capital Projects Coordinator  
Mary Dodsworth, Parks, Recreation & Community Services Director

THROUGH: John J. Caulfield, City Manager *John J. Caulfield*

DATE: February 27, 2023

SUBJECT: Parks CIP Update: American Lake Park & Wards Lake Park

ATTACHMENTS: American Lake 60% Site Plan, American Lake Costs Summary,  
Wards Lake Phase 1 Site Plan, Wards Lake Phase 2 Site Plan, Wards  
Lake Costs Summary

**Summary:** In 2019 the City was successful in receiving several grants relating to parks capital improvement Projects which included American Lake Park Access Improvements and Wards Lake Park Phase 1 Improvements. Since that time the City has been working on design, permitting and other site related issues which have increased development costs beyond the current allocated funding for each project. A summary of each park project will be provided along with project scopes and cost estimates, revenue sources and current cost projections.

#### American Lake Park Access Improvements

American Lake Park, located on the north shore of American Lake is one of the City's most popular waterfront parks (especially is the summer). Previous updates to the park included a major boat launch improvement in 2009, play equipment replacement in 2019, large picnic shelter installation in 2020 and repaved the main parking lot adjacent to the park, added pedestrian access around the site along with an overflow parking area along Veteran's Drive to support summer park use in 2021.

In 2019 a schematic/master plan for park improvements was created to support grant applications for improvements to the main park. The scope of those grants proposed to develop an ADA accessible route to the lake shore from the upper parking area as well as other circulation improvements to promote pedestrian safety and access throughout the site, remove the current restroom and create an entrance plaza, adding a small shelter for community use, replace aging infrastructure including a retaining wall, bulkhead and restroom facility. Successful grants for this project include RCO funds for local parks, Aquatic Land Enhancement Acct and a State legislative allocation (Dept. of Commerce).

A design contract for the project was approved by Council in May of 2022. Since that time several additional design/scope items have been added to support a comprehensive update of the park and address safety and management of the site for future use. A summary of those additional improvements includes:

- Adding plantings to the islands in the main parking lot
- Increasing trash capacity at the park by adding trash bays around the park and a compactor with new block enclosure.
- Power and irrigation improvements around the existing shelter and restroom bldg.
- Improving ADA accessibility at the play area
- Relocating a temp moorage dock to a swim dock to separate boaters and swimmers
- Beach improvements on the waterfront to support ADA access including a paver plaza at the end of the accessible route with bench seating
- Retaining wall along the shoreline to prevent slope erosion

A summary of costs and a site plan are attached. Below is a summary of the current project schedule:

<b>American Lake Access Improvements Project Schedule 2-16-23</b>	
Design	May 2022-June 2023
Permitting	Mar- July 2023
Bidding	August 15 2023
Council Construction Contract Appro	Sept 12 2023
Construction	Oct 2023 -June 2024

### Wards Lake Park

**Background:** Wards Lake Park is a 26 acre site located near I-5 and the International District and the only public open space area east of Bridgeport Way. Between 1999-2003 improvements to the park included the acquisition of a number of parcels to expand the park to 26 total acres, the removal of abandoned structures and the development of the current neighborhood park located off 84<sup>th</sup> and Pine streets. In 2018, in conjunction with the 2020 Legacy Plan update, a master plan for Wards Lake Park was developed to support future design and development of the park. The master plan entailed a 3-Phase approach to development and included the acquisition of an additional 10.75 acres.

Acquisition of the land began in 2019 with grant funding to support the purchase through the Pierce County Conservation Futures (Resolution 2019-123) program. While the purchase of a single residential parcel (.24 acres) successfully closed in November 2020, the purchase of the additional 10.47 acres has been ongoing and extremely challenging due to a variety of issues including updating a binding site plan (BSP) that is associated with the remaining parcels.

The BSP Amendment to support acquisition of the 10.47 acres was successfully submitted for permitting January of 2023 and will take several months for review by a variety of agencies. The extended deadline for the Pierce County Conservation Futures grant however, ended in Dec 2022 so the additional funding anticipated will not be available to purchase the \$55,000 property.



**Current Status:** A design contract was approved by Council in February of 2022 to support Phase 1 Improvements at the park following successful RCO and DOC grant applications for the project. The federally-funded LWCF grant awarded via RCO has been complicated, with retro-active pre-agreement requirements from National Parks Service (NPS) delaying contract issuance. Site survey work and construction feasibility has also resulted in a shift of the 3-phased master plan approach developed in 2018 to the current site plans for phase 1 & 2 attached.

Grant applications for Phase 2 were submitted to RCO in 2022 with anticipated award of a LWCF, WWRP, & YAF grants following this year’s legislative session to support development of a new neighborhood park, expanded parking at the main park, a 3 acre BMX track, trail improvements, a new restroom, 2 new playground areas and site furnishings including 2 shelters at the main entry off 84<sup>th</sup>.

In an effort to expedite phase 2 design with pre-award requirements for NPS, we are proposing combining construction for phases 1&2. This approach will offset cost over-runs by reducing mobilization, increasing project management efficiency, and reducing impact to park use and the surrounding neighborhood.

A summary of costs for phase 1 and a site plan for phase 1 & 2 are attached. Below is a summary of the current project schedule:

<b>Wards Lake Ph 1 &amp; 2 Project Schedule 2-16-23</b>	
Phase 1 Design	Nov 2021-Dec 2022
Phase 1 Permitting	Jan -May 2023
Phase 2 Design	Mar 2023-Nov 2023
Phase 2 Permitting	Nov 2023-Feb 2024
Bidding	Mar 18th 2024
Council Const. Contract Approval	April 29th, 2024
Construction Both Phase 1&2	May 2024-Feb 2025

Staff will attend the February 27 study session to review the site plans, cost estimates and project timelines.

# Parks CIP Update

## Wards Lake Park & American Lake Park

February 27<sup>th</sup>, 2023



# American Lake Park

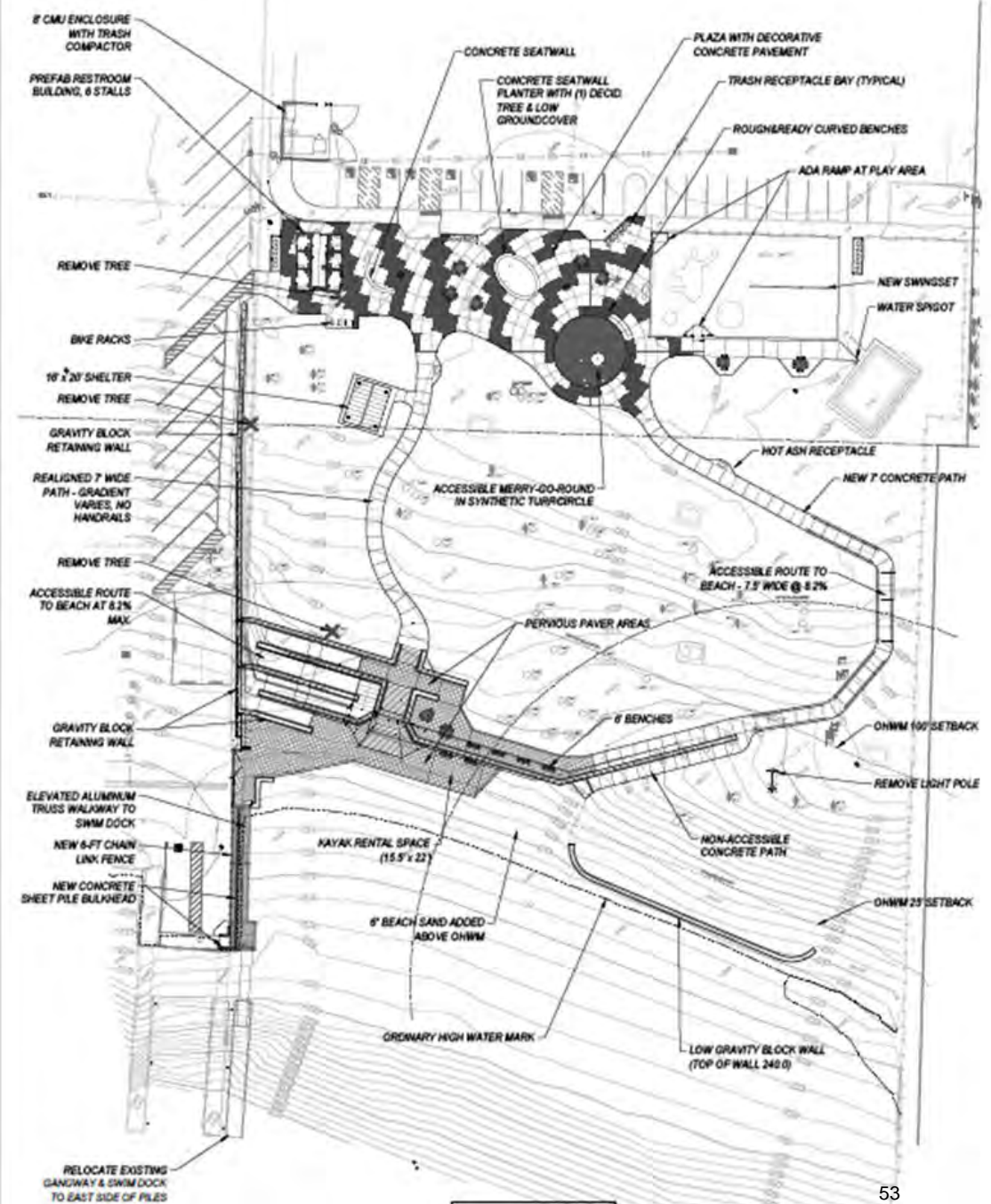


# Master Plan 2019-20 Grants

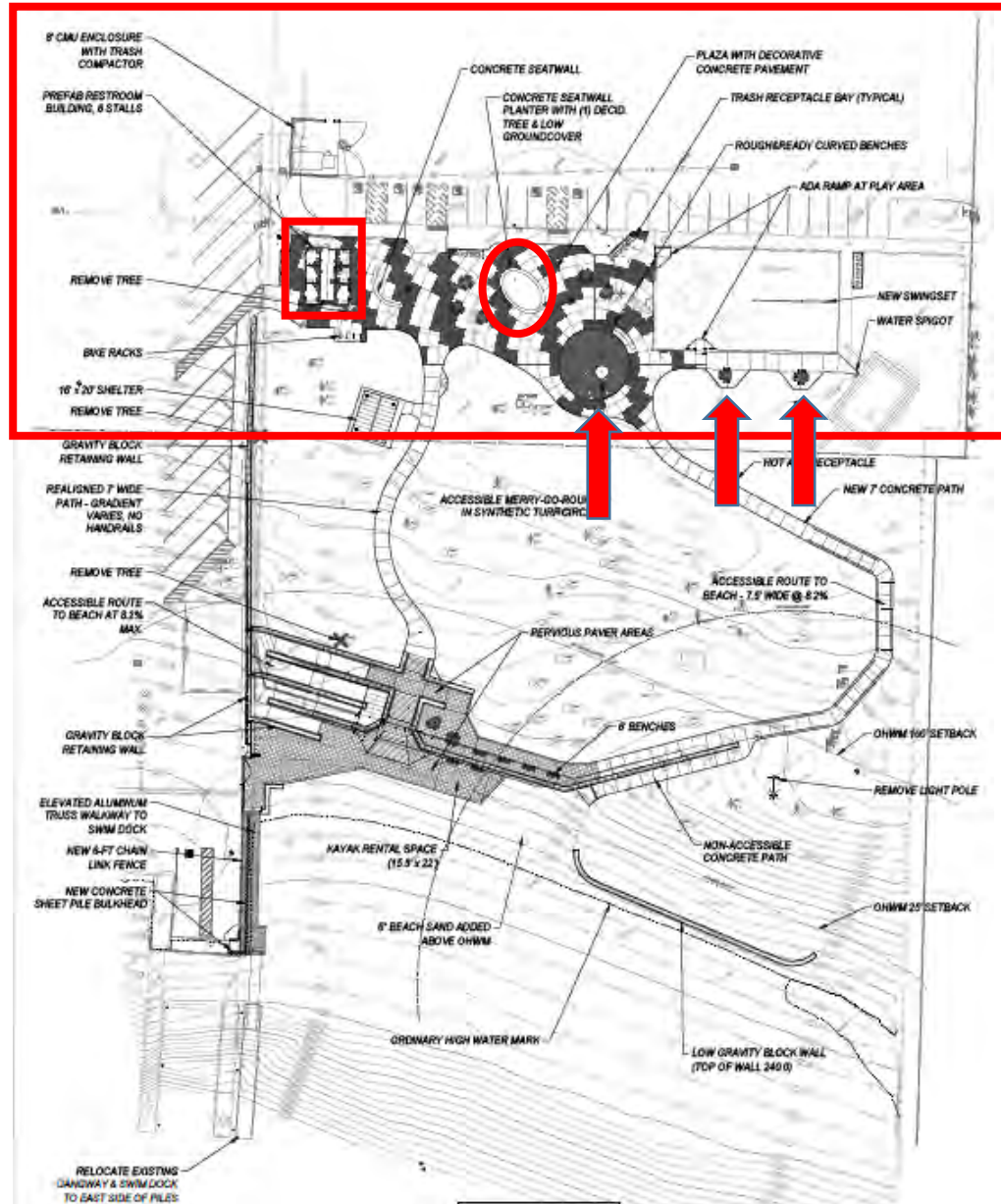


- New Park Monument Sign
- Replace Aging Infrastructure
- ADA Route To Beach
- New Entry Plaza
- New Shelter + Furnishings





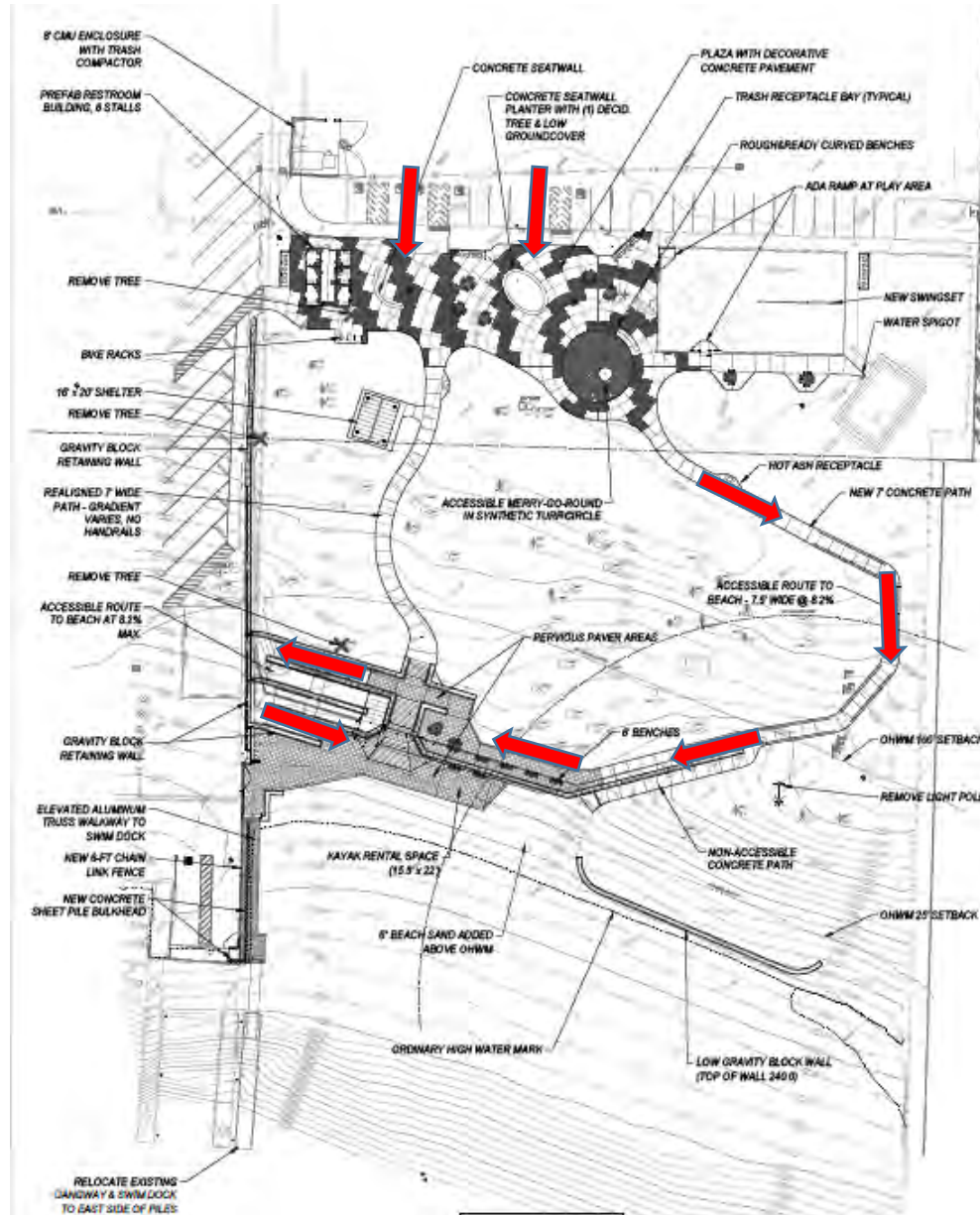
# Plaza Improvements



- Relocated Restroom
- Seatwalls + Picnic Seating
- Raised Planter
- ADA play expansion:
  - Ramps
  - Accessible Merry-go-round
  - Replace Swings



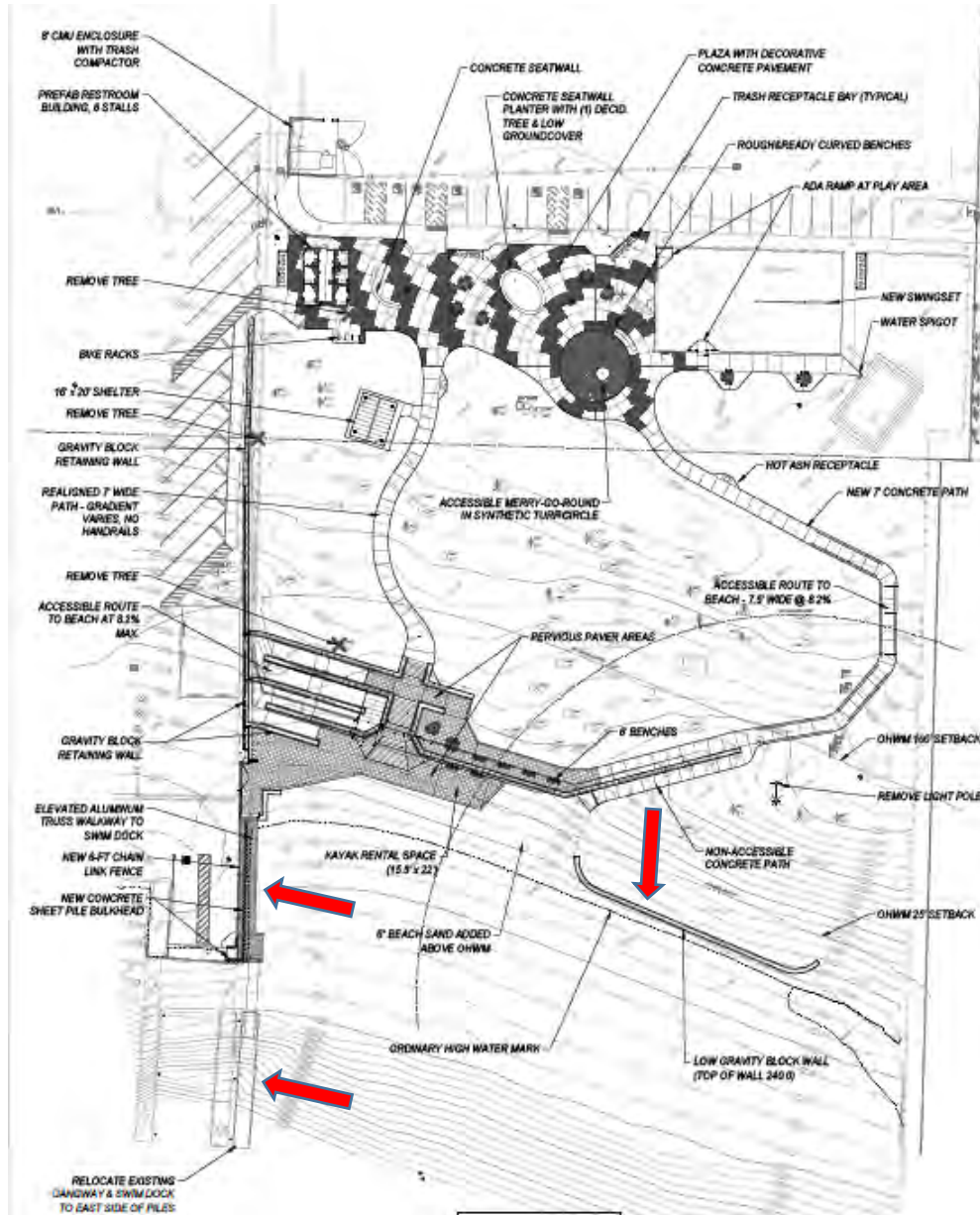
# ADA route



- Multiple Routes Explored
- Handrails Ramps/Steps
- Upper Viewpoint Access
- Switchback to Beach
- Replace Aging Wall
- Destination Plaza



# Beach Improvements

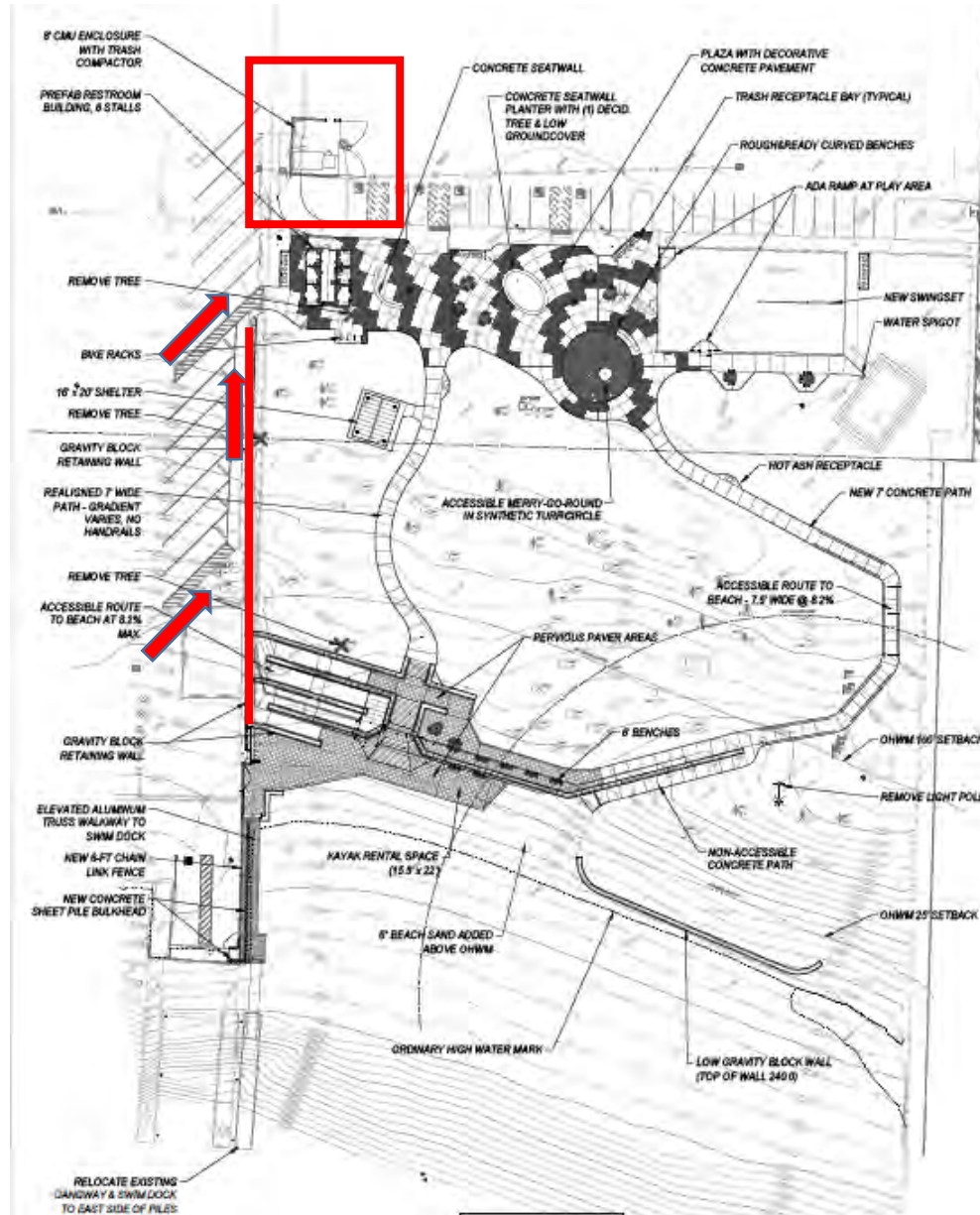


- Retaining Seatwall
- Beach plaza
- Bulkhead
- Sand Added
- Improved Swim Safety:
  - Relocate Float
  - New Ramp to Float





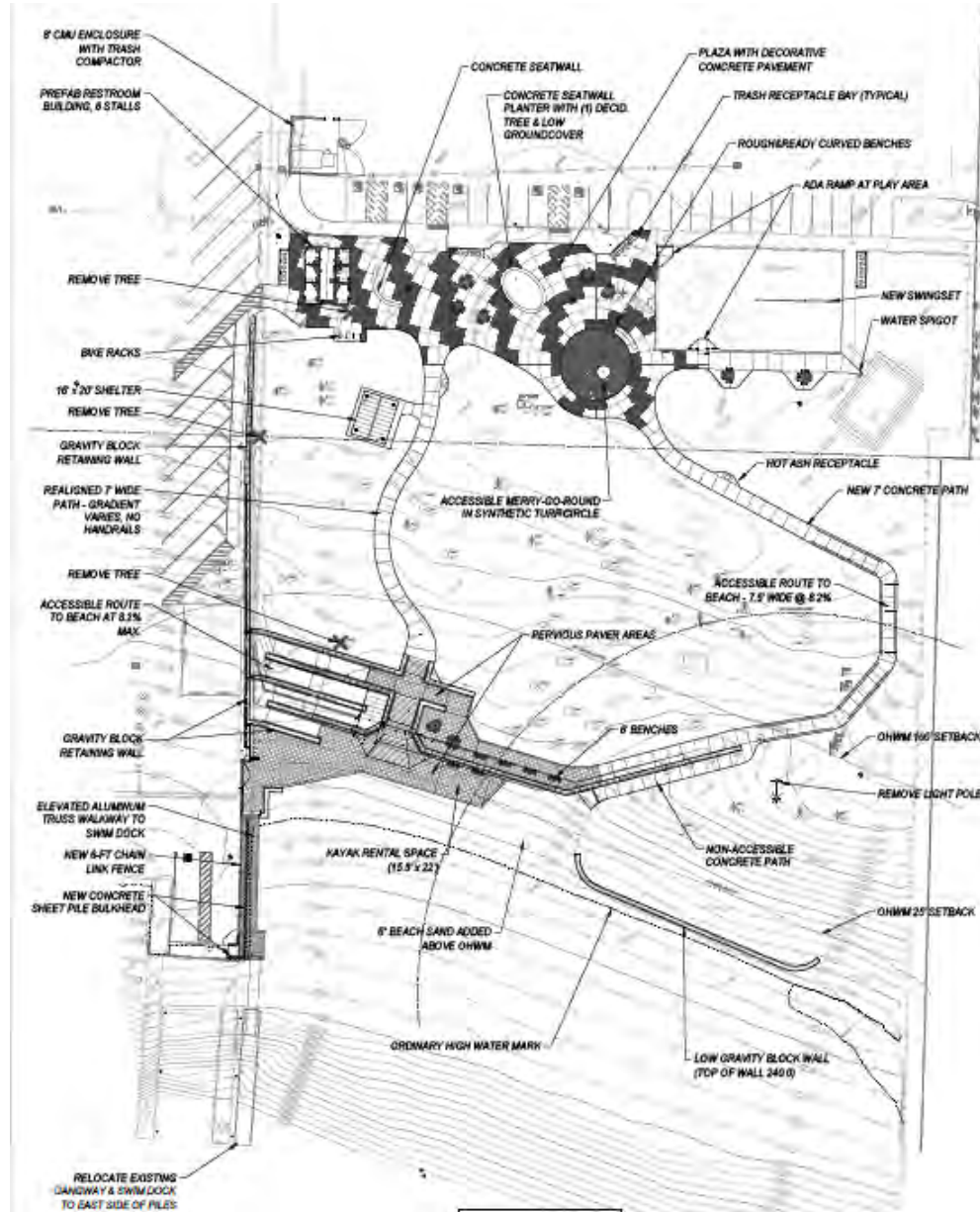
# Parking Lot



- Parking Lot Landscaping
- Trash Compactor
- Route to Restroom
- Replace Retaining Wall



# Other Improvements



- Trash Bays
- Utilities
- Irrigation
- Site Furnishings



# Significant Cost Changes

- Restroom \$203K
- Retaining Walls \$594K
- Plaza \$201K
- Bulkhead \$144K
- Utilities \$108K
- Swim Dock \$137K
- Beach Pavers \$55K
- ADA Play \$88
- Trash Management \$128K
- Site Prep \$189K



# Cost Summary

**Total Project Cost:** 2019 Grant Scope vs. 2023 Current Cost Est  
\$1,665,195.00 \$4,155,292.33

<u>Revenues</u>	<u>Total</u>
ALEA grant	\$500,000
WWRP grant	\$500,000
DOC grant	\$252,840
City General Funds	\$620,000
REET	\$500,000
<b>Total Funding</b>	<b>\$2,372,840</b>

**Additional Resources Anticipated:** \$1,782,452.33



# Project Schedule

Design	May 2022- April 2023
Permitting	April- July 2023
Bidding	August 15 2023
Council Construction Contract Approval	Sept 12 2023
Construction	Oct 2023 -June 2024 9 months



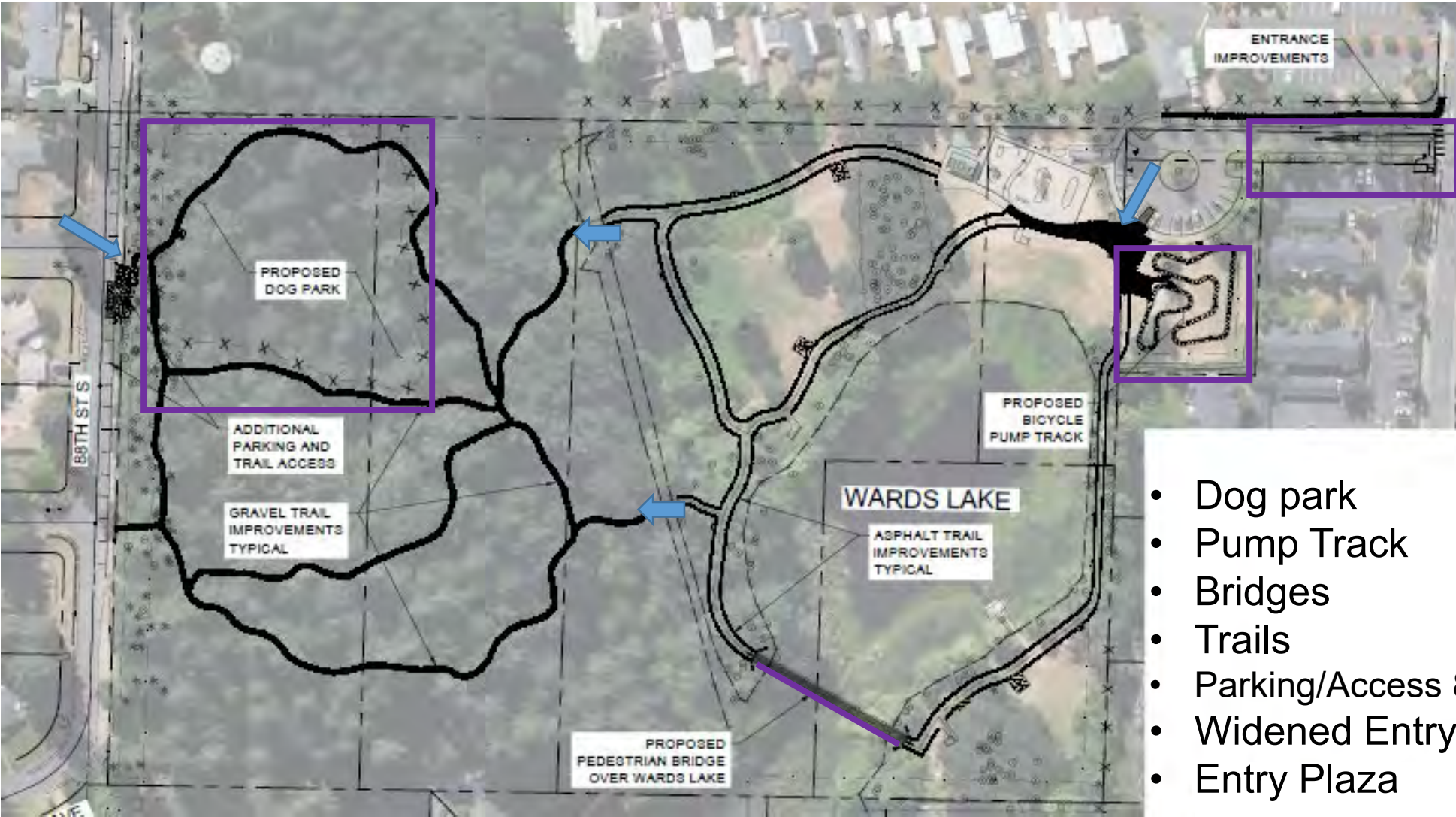
# Wards Lake Park



# Master Plan 2018



# Phase 1 Design



- Dog park
- Pump Track
- Bridges
- Trails
- Parking/Access 88th
- Widened Entry
- Entry Plaza

• Project Status: Currently in Permitting





# Significant Cost Changes

- Pump Track \$110K
- Bridge \$ 250K
- Landscaping \$ 295K
- Fencing \$ 148K
- Paths \$ 166K
- Utilities \$ 187K
- Site Prep \$170K



# Cost Summary

**Total Project Cost:** 2019 Grant Scope vs. Current Cost Est  
\$2,471,486 \$3,911,029

<u>Revenues</u>	<u>Total</u>
LWCF grant	\$1,000,000
WWRP grant	\$500,000
YAF grant	\$350,000
DOC grant	\$252,840
REET	\$182,500
SWM	\$56,277
<u>General Funds</u>	<u>\$132,500</u>
<b>Total Funding</b>	<b>\$2,474,117</b>

**Additional Resources Anticipated \$1,436,912**



# Phase 2 Design



- New Restroom
- 2 New Shelters
- BMX track
- New Neighborhood Park
- Trails
- Increased Parking
- 2 New Play Areas



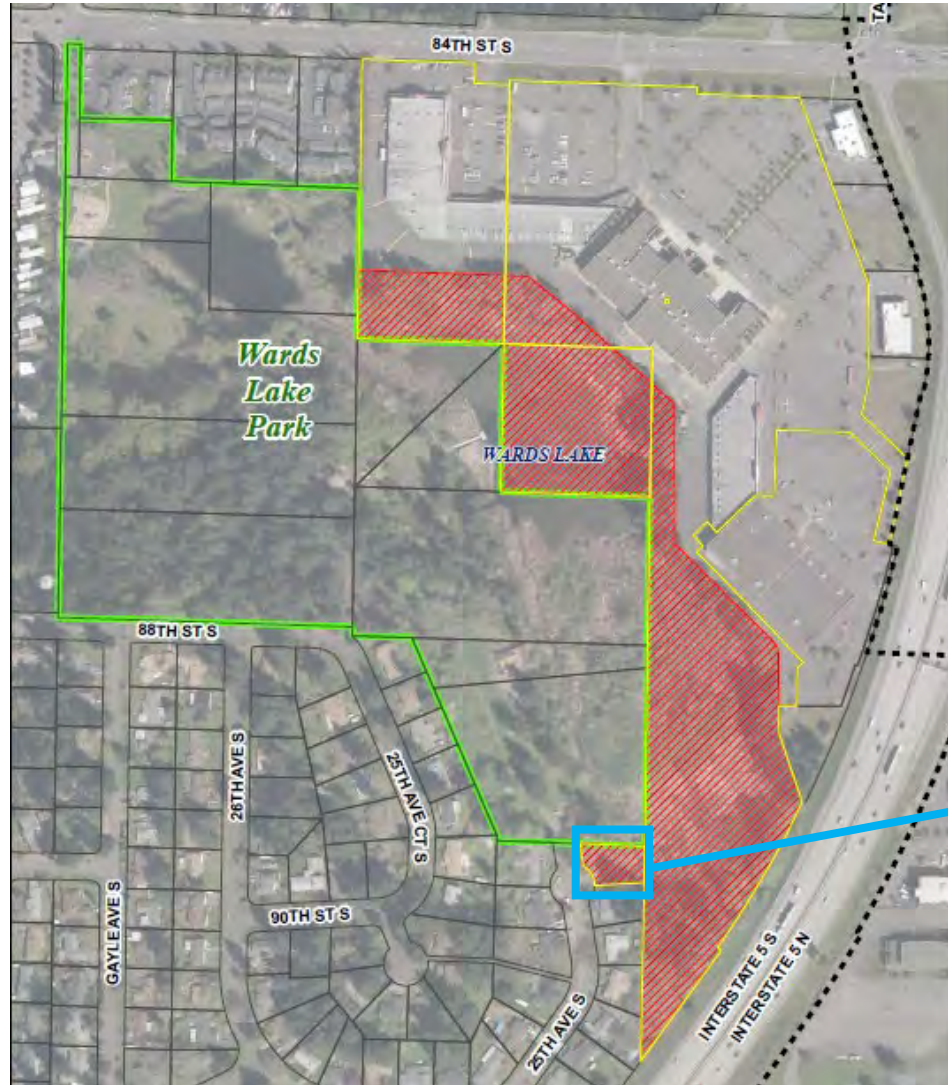
# Project Schedule

Phase 1 Design	Nov 2021-Dec 2022
Phase 1 Permitting	Jan -May 2023
Phase 2 Design	Mar 2023-Nov 2023
Phase 2 Permitting	Nov 2023-Feb 2024
Bidding	Mar 18 <sup>th</sup> 2024
Council Construction Contract Approval	April 29 <sup>th</sup> , 2024
<b><u>Construction Both Phase 1&amp;2</u></b>	<b>May 2024-Feb 2025</b>



# Phase 3

## Pending Acquisition area in RED



- BLA---BSP Amendment
- Status: In permitting Jan 2023
- Purchase and Sale Agreement:
  - Amendment Council Mar 6, 2023
- Closing Anticipated May-June 2023
- ➔ Purchase Completed 2020



# Project Planning Updates

- Restroom and site furnishings by owner
- Phase 1&2 WLP Consolidation
  - Mobilization reduction
  - Construction Schedule Reduction
  - Less impact on neighborhood
  - Project Management Efficiency



# Coming Soon!

- Wards Lake Contract Amendments
  - Ph 1 Contract Amendment
  - Ph 2 Design Contract
- American Lake Park Contract Amendment
- Restroom / Site Furnishings Contract Approval

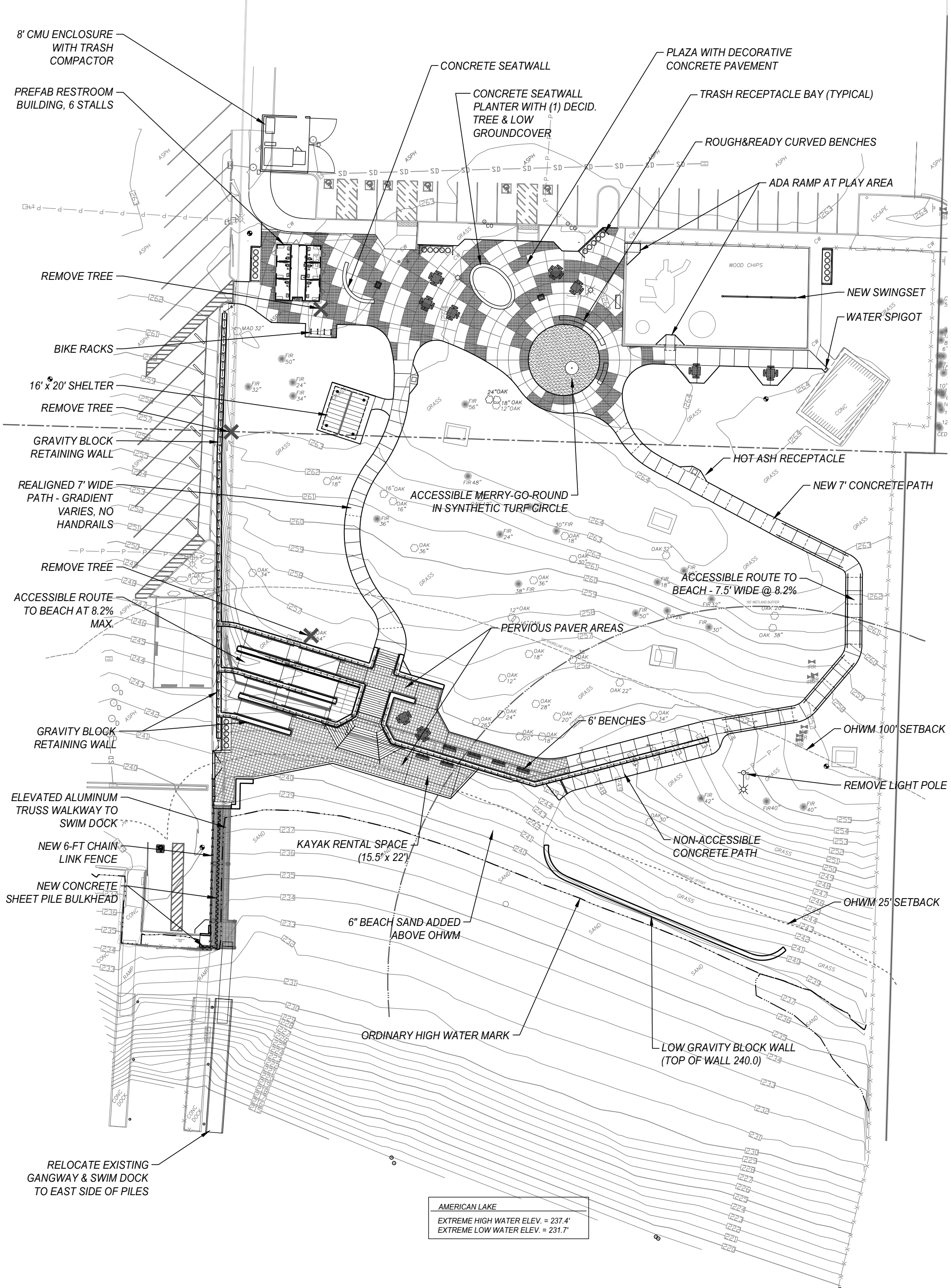


**American Lake Park Access Improvements Scope Summary 301.0027**

<b>Revenues</b>	<b>Total</b>
ALEA grant	\$500,000
WWRP grant	\$500,000
DOC grant	\$252,840
City General Funds	\$620,000
REET	\$500,000
<b>Total Funding</b>	<b>\$2,372,840</b>
<b>Additional Resources Anticipated</b>	<b>\$1,782,452.33</b>

<b>Grant Scope *2019</b>	<b>Grant Costs Summary</b>	<b>Current Costs Summary</b>	<b>Comments</b>
Site Prep	\$115,200.00	\$304,844.10	
Restroom	\$400,000.00	\$603,368.50	cost increase inflation/ 6 single use stalls
Bulkhead	\$66,000.00	\$210,265.00	concrete sheet pile
Retaining Walls	\$50,000.00	\$644,855.75	*expanded to support ADA ramp & replace existing aging wall at shoreline
Plaza	\$19,000.00	\$220,868.00	expanded to support gathering area,
ADA access	\$148,500.00	\$165,469.70	
Shelter	\$65,000.00	\$39,904.00	
Utilities	\$51,200.00	\$159,201.35	\$90,726 electrical \$25,190 stormwater \$13,200 trenching/locates \$10,753 water \$19,002 restroom (sewer/roof drain)
Site Furnishings	\$28,000.00	\$47,655.00	hot ash bins, 25 trash cans, seating for play areas, bike rack, 5 picnic tables in plaza, 2 picnic waterfront
Landscaping	\$19,500.00	\$57,557.50	includes estimated mitigation
Fencing/ Barriers	\$39,500.00	\$34,930.50	
Viewpoint	\$21,600.00	\$6,333.25	
Paths Circulation	\$9,600.00	\$32,185.45	current scope includes pervious pavers
Sign/ Kiosk	\$88,000.00		*entry sign pending design 301.0034 \$30K
<b>Additional Scope Items</b>			
Waterward Improvements		\$192,222.25	beach pavers, swim float relocate, beach aggregate
Play Areas		\$82,336.00	accessible ramps & paths, accessible merry-go-round, replace swings, artificial turf accessible zone
Parking lot Improvements		\$19,948.50	landscaping, striping for restroom path
Dumpster Enclosure & Compactor		\$128,742.20	bid as add alternate
Irrigation around ex shelter		\$11,000.00	
Existing Shelter Utilities		\$34,334.65	
<b>Construction Subtotal</b>	<b>\$1,121,100.00</b>	<b>\$2,996,021.70</b>	
Design & Engineering	\$230,820.00	\$360,265.20	contract amend for updated scope (\$47,179) Total reflects original contract + amendment
Permits + Cultural Resources	\$33,000.00	\$50,000.00	estimation + includes mitigation
10% WSST	\$112,110.00	\$299,602.17	
15% Contingency	\$168,165.00	\$449,403.26	
<b>Total Project Cost</b>	<b>\$1,665,195.00</b>	<b>\$4,155,292.33</b>	

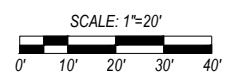




AMERICAN LAKE  
 EXTREME HIGH WATER ELEV. = 237.4'  
 EXTREME LOW WATER ELEV. = 231.7'

# American Lake Park Waterfront Access Upgrades Site Plan

REMOVAL OF 3 TREES REQUIRED.

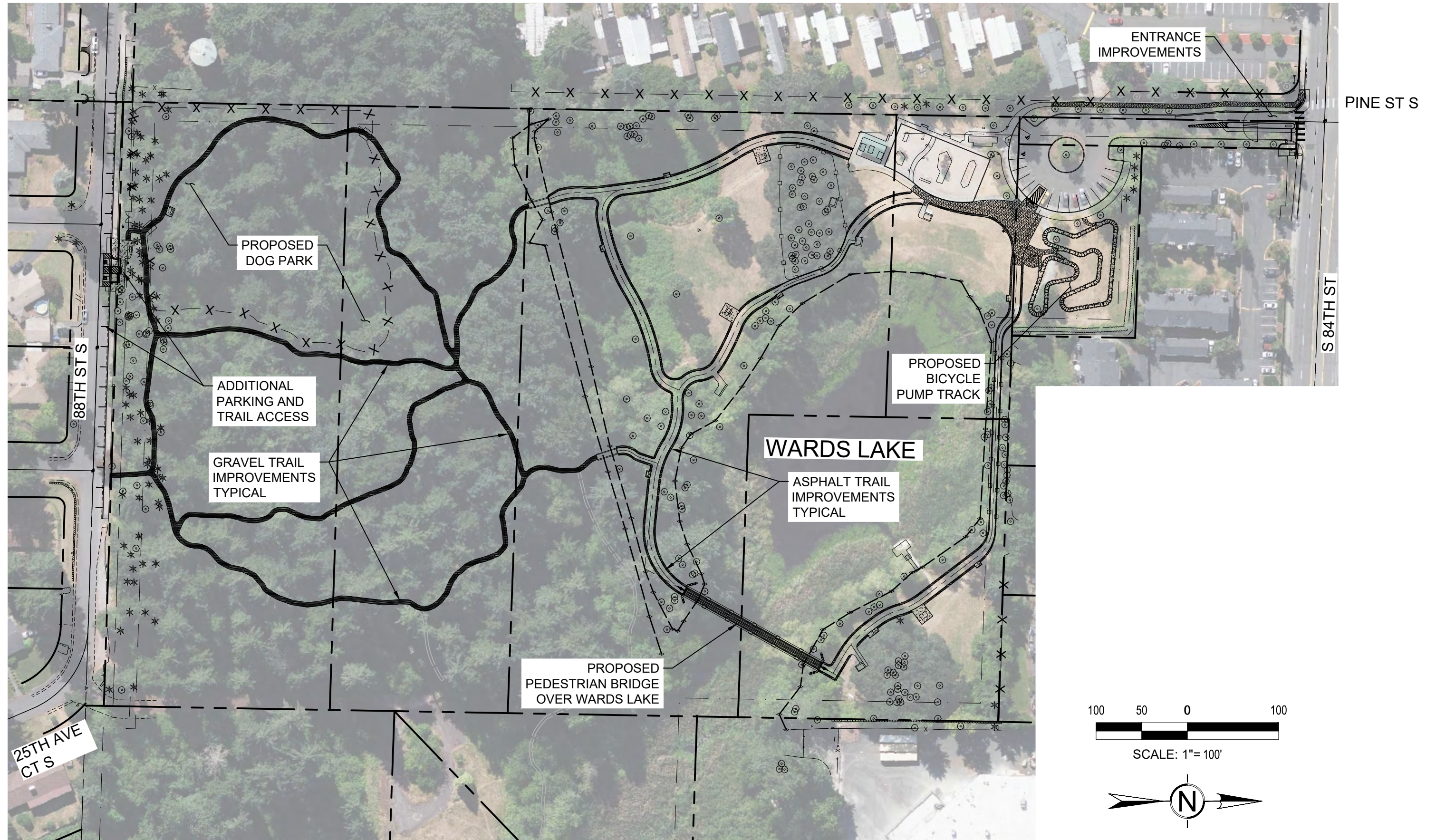


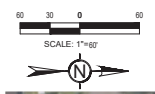
**Wards Lake Park Phase I Scope Summary 301.0020**

<b>Revenues</b>	<b>Total</b>
LWCF grant	\$1,000,000
WWRP grant	\$500,000
YAF grant	\$350,000
DOC grant	\$252,840
REET	\$182,500
SWM	\$56,277
General Funds	\$132,500
<b>Total Funding</b>	<b>\$2,474,117</b>
<b>Additional Resources Anticipated</b>	<b>\$1,436,912</b>

<b>2019 Grant Scope Summary</b>	<b>Projected Grant Costs</b>	<b>Current Costs Summary</b>	<b>Comments</b>
Site Prep	\$304,080.00	\$474,952.00	
Dog Park	\$49,400.00	\$34,668.00	
Pump Track	\$352,521.00	\$462,754.00	
Bridge	\$433,550.00	\$683,345.00	
Landscaping	\$88,400.00	\$383,467.00	
Habitat Improvement	\$103,424.00	\$43,014.00	
Fencing	\$66,300.00	\$214,813.00	
Signs/ Kiosks	\$132,096.00	\$2,568.00	
Circulation Paths	\$48,600.00	\$214,479.00	10' wide accessible routes
Site Furnishings	\$48,200.00	\$51,360.00	
Trails	\$124,891.00	\$124,548.00	
Utilities (Stormwater)	\$10,800.00	\$197,479.00	water + stormwater
<b>Subtotal Construction</b>	<b>\$1,762,262.00</b>	<b>\$2,887,447.00</b>	*projected costs include 7% cost escalation
Permits	\$16,000.00	\$18,677.00	
Cultural Resources	\$18,800.00	\$20,000.00	
A+E	\$163,368.00	\$407,416.00	base contract \$386K+\$21,066 amend 1
10% Construction Contingency	\$334,829.78	\$288,744.70	
WSST	\$176,226.20	\$288,744.70	
<b>Total Project Cost</b>	<b>\$2,471,485.98</b>	<b>\$3,911,029.40</b>	

# OVERALL SITE PLAN EXHIBIT





- LEGEND**
- Park Boundary
  - - - Phase 2
  - ① 10' Wide Nature Walk Trail
  - ② Playground, Shelters, & Restroom
  - ③ Expanded Parking Lot
  - ④ Plaza Trail Access Node
  - ⑤ ROW Improvements (curb, gutter, sidewalk)
  - ⑥ 5' Wide Pedestrian Access Trail
  - ⑦ BMX Track w/ Vegetated Buffer
  - ⑧ Entry Plaza and Playground
  - ⑨ Parking Lot
  - ⑩ New Park Entry & Sign

City of Lakewood  
 Wards Lake Park  
**PHASE 2 IMPROVEMENTS**  
 May 3, 2022