



Jail Health Services Division

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Law & Justice Committee
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Today's Presentation

Overview of JHS

JHS Services, Staffing & Structure

Efforts & Opportunities in Care

Psychiatric Wait Times, ADA, MOUD

Social Services

Overview & Reentry Services

Medicaid Waiver Reentry Demonstration

Status Update & Next Steps

Q & A

Basics about Jail Health Services

JHS OVERVIEW





JAIL HEALTH SERVICES

IS A DIVISION OF
PUBLIC HEALTH –
SEATTLE & KING
COUNTY

JHS Vision:

*Opening Doors to healthier,
happier lives*

Public Health – Seattle & King County

Health, well-being, and racial equity – every day for everyone in King County.



About Jail Health Services...

JHS is the responsible health authority for King County Correctional Facility (KCCF) and the Maleng Regional Justice Center (MRJC). JHS operates 24 hours a day, 7 days a week to ensure our patients are provided with quality health care and services that are timely and accessible.

JHS also provides diversion and court services outside of the jail facilities.

Link: kingcounty.gov/jail-health

Our Mission:

To assess and stabilize serious health problems for the detained population of KCCF and MRJC with a focus on transition from jail.

Our Services:

- Diversion Program & Court Therapeutic Services
- Medical, Mental Health, & Dental Care/Services
- Medication Management & In-House Pharmacy
- Routine Care and Health Housing
- Health Information Management Services
- Coordinated Discharge/Community Referrals



STANDARDS AND REQUIREMENTS



National Commission on Correctional Health Care (NCCHC) Accreditation

The King County Correctional Facility is required to be accredited, which is achieved through NCCHC. On-site surveys/audits are conducted every 3 years. A new set of standards were released that are effective in 2026. The next survey is expected this year. JHS leads compliance with these audits.

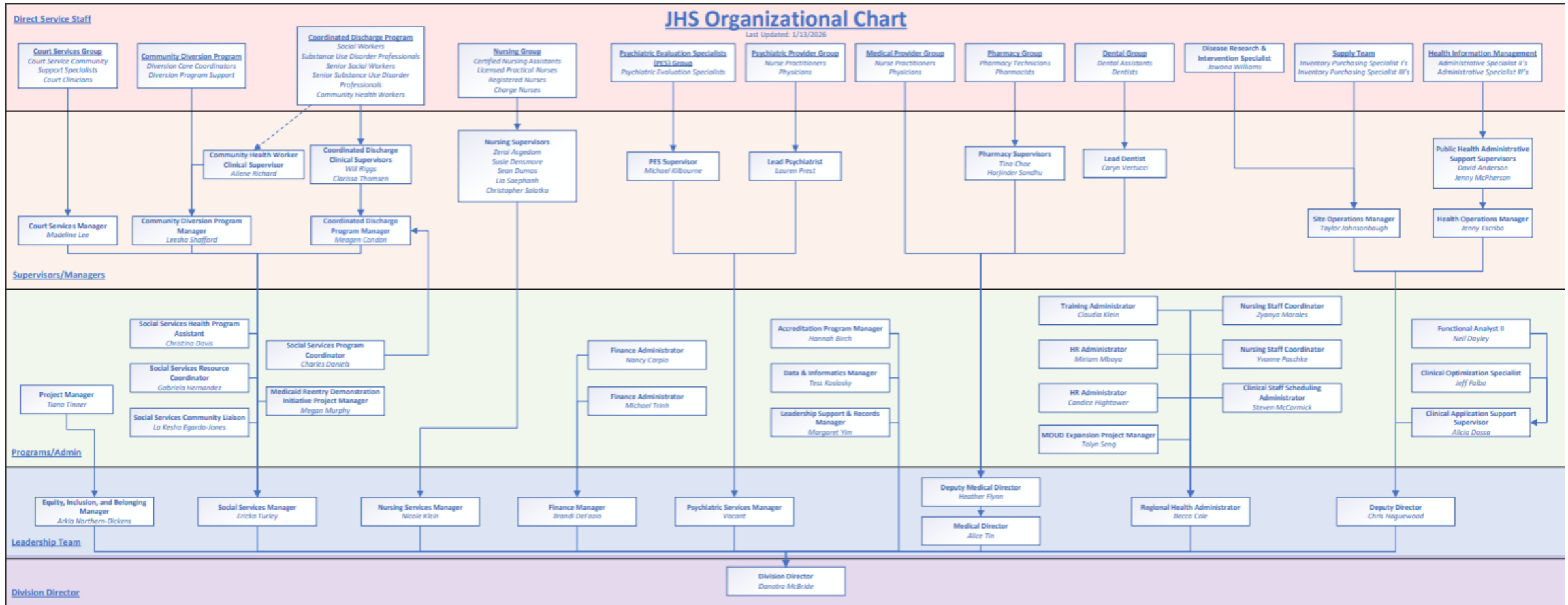


Prison Rape Elimination Act (PREA)

As a set of County Jails, the King County Correctional Facility and Maleng Regional Justice Center are required to adhere with the federal PREA standards. Surveys are conducted every 3 years. The Department of Adult & Juvenile Detention (DAJD) leads compliance with these audits.

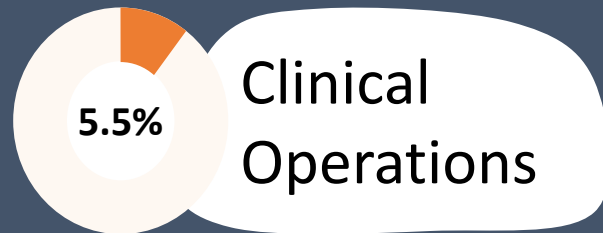
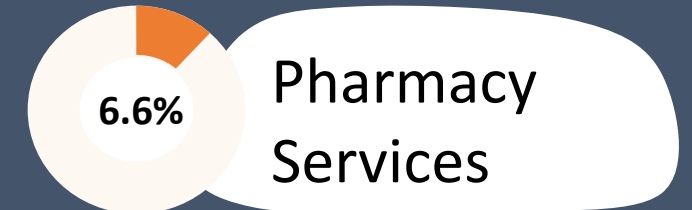
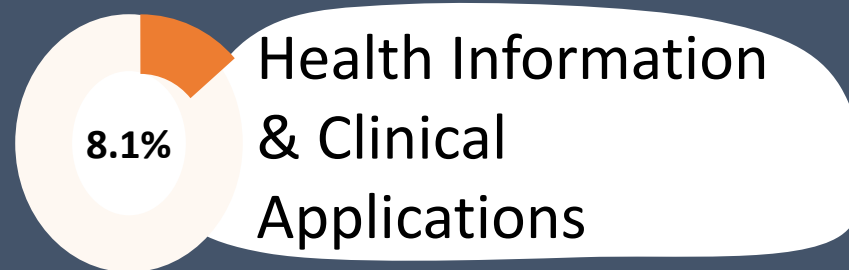
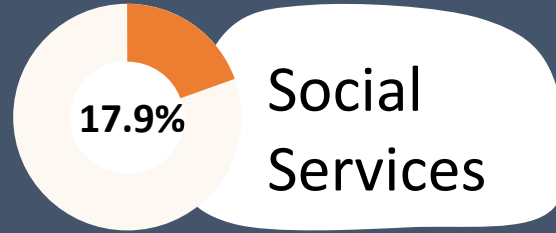
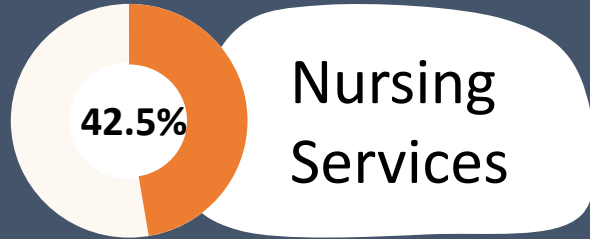
Those We Serve

Population Size	The average daily <i>secure</i> population (ADP) in 2025 was 1,412.
Bookings	2025 bookings: 17,564. Each new individual booked receives screening and evaluation services from JHS staff.
Length of Stay (LOS)	The median LOS is generally between one and three days, with more than half of residents staying for less than 72 hours, meaning the population is constantly turning over. JHS often doesn't know when someone is discharging from jail and these discharges can take place at anytime.
Special Populations	<u>General Jail Stats</u> (not unique to King County): Mental illness: an estimated 44% of residents of local jails have a mental illness, a rate more than double that of the general population. Substance Use Disorder (SUD): it is estimated that nearly two-thirds of jail residents experience an active SUD, compared with around 8% of the general adult population.
<small>(Sources: Data and reports - Adult and Juvenile Detention - King County, Washington'; DAJD Population Dashboard; About Criminal and Juvenile Justice & Behavioral Health SAMHSA, Access to opioid use disorder treatment in US jails: Prevalence and related factors – Recovery Research Institute,)</small>	



- Clinical and direct services staff are at the top of JHS' organizational chart.
- JHS is designed to meet the complex health needs of the jail population.

JHS DIVISION MAKEUP





EFFORTS & OPPORTUNITIES IN CARE

- Opportunities in Psychiatric Care - Wait Times
- Americans with Disabilities Act (ADA)
- Medications for Opioid Use Disorder (MOUD) Expansion



OPPORTUNITIES IN PSYCHIATRIC CARE

Gaps Identified:

- Lack of readily available wait time data, related order types, and efficient and effective scheduling processes; improvement of non-acute psychiatric appointment wait times

Current State:

- We now have a dashboard for wait times allowing the ability to make resource/staffing adjustments and can effectively schedule initial and follow up appointments
- Carefully assessing all related BH Audit recommendations and continuing work in the identified areas

Where We Are Headed:

- Develop new wait time standards and implement improvements to reduce wait times for non-acute psychiatric patients
- Establish a staffing plan to support updated wait time standards and services
- Conduct quality study to review equity in wait times, as well as other continuous improvement efforts
- Implementing remaining Behavioral Health Audit recommendations & improvements

ADA IMPROVEMENTS

Key JHS Areas Affected:

- Effective Communication
- Program Accessibility & Accommodations
- Medication Criteria
- ADA Coordination & Grievance Procedures
- Policies & Training
- Compliance & Reporting
- **MOUD Expansion is the biggest pending change:**
 - Provide all FDA-approved medications for Opioid Use Disorder

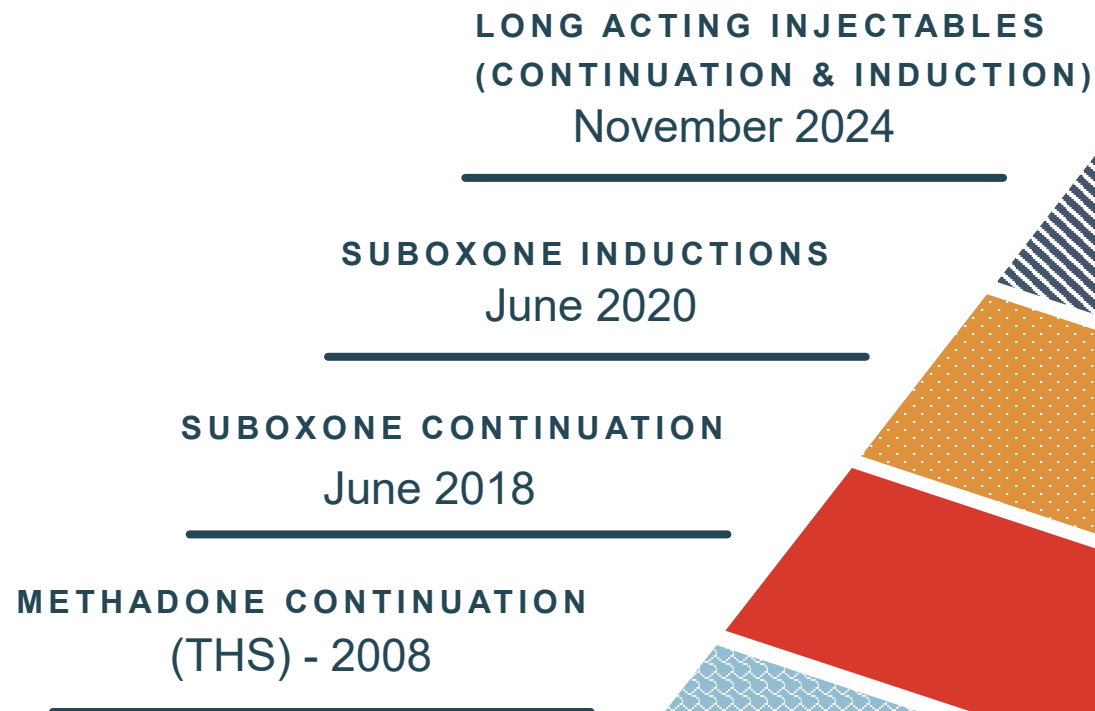


MOUD Expansion

Milestones Over Time

*It is estimated that (generally)
nearly two-thirds of jail
residents experience an active
Substance Use Disorder**

*Source: Access to opioid use disorder treatment in US jails:
Prevalence and related factors – Recovery Research Institute

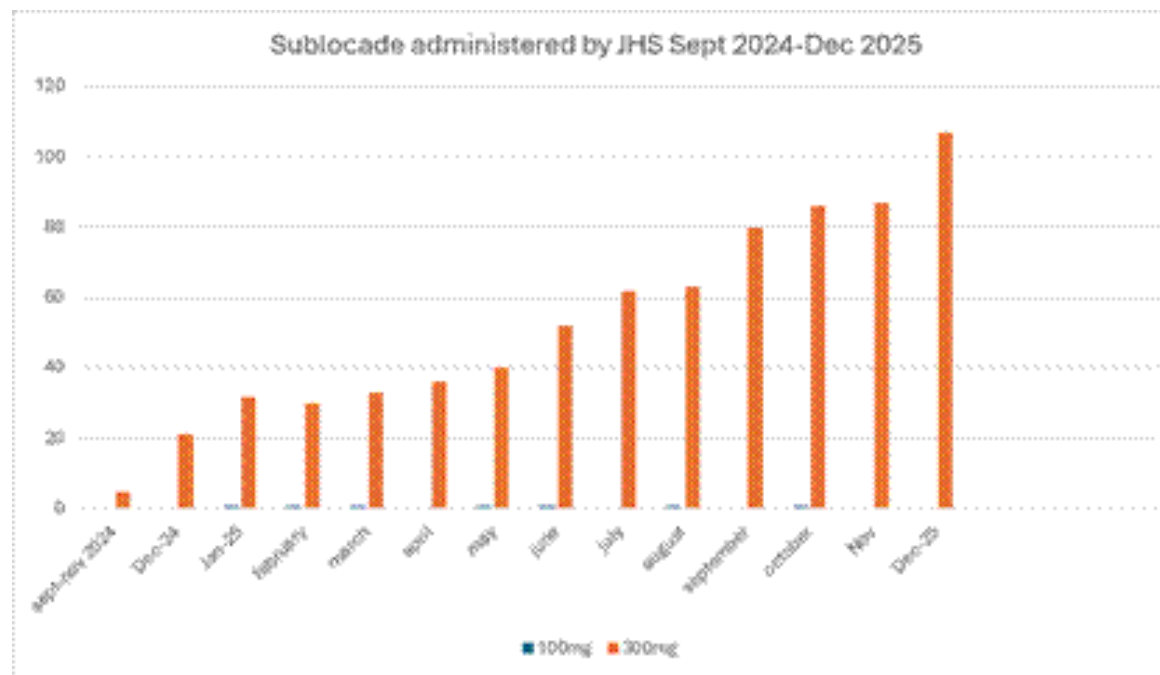




JHS MOUD Data

MOUD CENSUS as of 01/12/2026						
FACILITY	Continuations	Inductions	LAI Continuations	LAI Inductions	Withdrawal Only	TODAY'S TOTALS
KCCF	17	45	3	33	0	98
MRJC	29	66	4	50	0	149
TOTALS	46	111	7	83	0	247

Long-Acting Injectables	
Month/Year	Volume
Sept-Nov 2024	5
Dec 2024	21
Jan 2025	33
Feb 2025	31
Mar 2025	34
Apr 2025	36
May 2025	41
June 2025	53
July 2025	62
Aug 2025	64
Sept 2025	80
Oct 2025	87
Nov 2025	87
Dec 2025	107





REENTRY

- Reentry Opportunities
- Medicaid Waiver Reentry Demonstration Initiative



OPPORTUNITIES IN REENTRY

Gap 1: Limited System-Level Visibility

- JHS is often mistaken as “part of the jail,” not a health authority
- Not consistently considered as a leader or partner in countywide reentry policy
- Leads to misalignment at system level between funders, legal partners, and community organizations

Gap 2: Fragmented Referral Pathways

- No standardized, countywide referral routes from jail to community services
- Pronounced lack of community resources for individuals leaving jail (housing, access to treatment)
- Reliance on individual staff relationships rather than a consistent referral path
- Creates inconsistent access to housing, treatment, and benefits

Gap 3: Misunderstandings About Scope & Capacity

- Social Services staff spend significant time clarifying JHS care model or roles when coordinating care and building relationships
- Limits efficiency and slows down coordinated care transitions

REENTRY INITIATIVES UNDERWAY

Community Engagement Initiative

- Direct partnership with community, peers, and lived-experience leaders
- Clarifies JHS's role and builds shared understanding
- Ensures reentry models reflect community priorities

Coordinated Discharge Expansion

- Strengthens warm handoffs to medical, behavioral health, and social services
- Improves referral consistency and follow-through
- Expands capacity to connect people to benefits, appointments, and treatment

Reentry Demonstration Initiative (1115 Waiver)

- Builds **system-level pathways** from jail to community care
- Creates durable, cross-agency processes
- Reduces fragmentation and strengthens continuity of care

Reentry Demonstration Initiative

What is this Initiative?

- Healthcare and supportive services up to 90 days pre-release for all Apple Health eligible individuals
- Medicaid reimbursement for JHS

What are the Initiative goals?

- Reduce recidivism and overdoses
- Lower emergency visits and hospitalizations
- Support recovery and treat infectious diseases

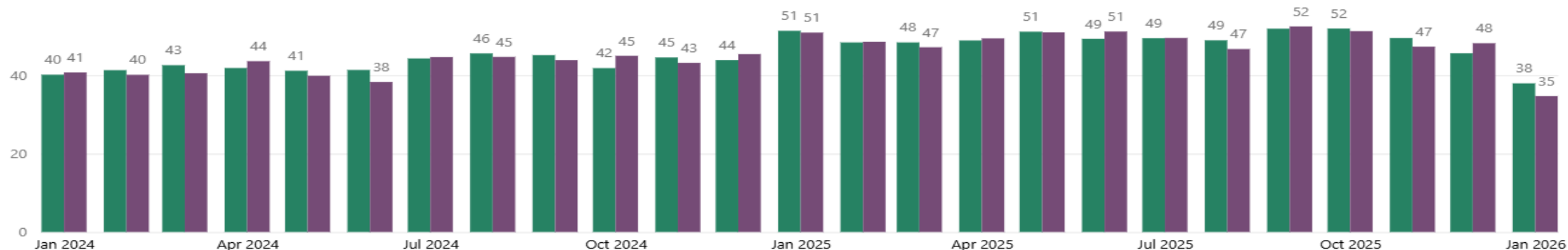


Reentry Demonstration Initiative

[Microsoft Power BI](#) (link to DAJD data)

Average daily bookings and releases

● Bookings ● Releases



Scale of the
Population

- **Bookings & Releases** per day (2024-25 below)
- **Average Length of Stay**
 - ~50% release in 0-3 days
 - ~90% released in 1st 90 days (past 3 years)
- **Average Daily Population (ADP):** ~1,400 in 2025

REENTRY DEMONSTRATION INITIATIVE

King County's Approach

- ✓ One King County
- ✓ Partnership: City and Community
- ✓ Healthcare reform/policy work
- ✓ Alignment with existing operations and current projects

Strategic Connections

- ✓ Breaking the cycle
- ✓ ADA improvements
- ✓ MOUD expansion
- ✓ JHS Behavioral Health audit

REENTRY DEMONSTRATION INITIATIVE TIMELINE: 2026



Public Health welcomes Councilmember collaboration

- Tour the jail
- Meet with Jail Health Services
- Join the Reentry Initiative Steering Committee



Q & A





Contact Us

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