

**Use of the West Wing of the King County Correctional Facility
to Provide Alternatives to Secure Detention Services**

July 2025



King County

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I. Proviso Text

Ordinance 19861, Section 54, Department of Adult and Juvenile Detention, P2¹

Of this appropriation, \$100,000 shall not be expended or encumbered until the executive transmits a plan for use of the west wing of the King County Correctional Facility as an area to provide alternatives to secure detention services and a motion that should approve the plan, and a motion acknowledging receipt of the plan is passed by the council. The motion should reference the subject matter, the proviso's ordinance, ordinance section, and proviso number in both the title and body of the motion.

The plan shall include, but not be limited to:

A. A discussion of the feasibility and advantages of using all or a portion of the west wing of the King County Correctional Facility and other facilities to provide a "side door" alternative space to bring people with behavior health needs arrested for non-violent misdemeanor offenses, as an alternative to booking them into jail, including consideration of whether the space should be secure, and the feasibility of co-locating the facility with the homeless shelter currently occupying the west wing;

B. A discussion, in collaboration with the behavioral health and recovery division, of the types of services that could be provided on-site, including assessments, therapy, medication assisted treatment, and case management, and how those services might be administered through existing or new alternatives to detention and diversion programs, and consideration of whether currently available on-site services and case management at the site could be used as a shared resource for the homeless shelter and "side door";

C. Projection of the number of people likely to be served by the "side door" and the capital and operating resources that would be needed to implement the plan.

D. Identification of potential funding sources to implement the plan, including use of the \$2,000,000 expenditure reserve in the Mental Illness and Drug Dependency Fund set aside for supporting changes to the future use of the west wing; and

E. Identification of the timeline and next steps to implement the plan.

The executive should electronically file the plan, and a motion required by this proviso by June 30, 2025, with the clerk of the council, who shall retain an electronic copy and provide an electronic copy to all councilmembers, the council chief of staff, and the lead staff for the law and justice or its successor.

¹ Ordinance 19861, Section 54, DAJD, P2, p26-27 [LINK](#)

II. Executive Summary

This document was developed in response to Ordinance 19861, Section 54, P2. The Proviso calls for a plan for use of the west wing of the King County Correctional Facility as an area to provide alternatives to secure detention services.

The Department of Adult and Juvenile Detention (DAJD) operates two adult secure detention facilities: the King County Correctional Facility (KCCF) in Seattle, and the Maleng Regional Justice Center (MRJC) in Kent. As of April 1, 2025, KCCF housed approximately 56 percent of all residents (804), while the MRJC housed the other 44 percent (642). KCCF is also DAJD's primary intake location, where 90 percent of the 14,092 adult bookings took place in 2024.

KCCF is a building with an 11-floor main tower, and a seven-floor western tower referred to as the west wing (WW). The WW is an integrated part of KCCF. All floors above the first floor are occupied and used by DAJD. The second and third floors remain in use as resident housing and supports the department's management of its population and operations with resident workers.² Following a \$2 million renovation which included security modifications, the first floor of the WW was turned over to DCHS to operate a homeless shelter.

The first floor of the WW space is used for as a contracted homeless shelter and as office space used by contracted staff and Jail Health Services (JHS) Release Planning. The shelter operates under contract of the King County Regional Homelessness Authority with the Downtown Emergency Service Center (DESC), a nonprofit organization. The shelter focuses on helping those with the greatest and most acute needs. Services provided include behavioral health treatment, housing counseling, and employment services. DESC specifically reaches out to people who have been living unsheltered for long periods of time and/or to those with mental health or substance use needs. The shelter can accommodate up to 40 people and generally operates at 95 percent of capacity, or roughly 38 beds, year-round. In 2024, 127 unique persons were served, for a total of 14,640 bed nights and an average length of stay (ALOS) of 154 days. Performance measures are required under contract and have been consistently met.

Office of Performance, Strategy, and Budget (PSB) staff convened individual and group stakeholder discussions to develop this Proviso response with representatives from DAJD, DCHS, the King County Sheriff's Office (KCSO), Prosecuting Attorney's Office (PAO), Department of Public Defense (DPD), Seattle Police Department (SPD), the Seattle Mayor's Office, State Department of Corrections (DOC), the courts, and diversion programs. In these discussions, many partners expressed concerns about making the side door a locked, or involuntary program; dislocating the functioning shelter beds or JHS Release and Coordinated Discharge services on the first floor of the WW; and concerns about the amount of time and funding it would take to replace this capacity at a different location. Partners emphasized the importance of utilizing existing, available diversion programs, such as the King County Crisis Solution Center, and encouraged more focus on existing programs. In addition, new alternative treatment and shelter options that serve individuals with acute behavioral health needs are or will soon be available, such as DESC's Opioid Recovery & Care Center (ORCA) Center and Stability Through Access and Resources (STAR) Center, and a Crisis Care Center in the Central Zone covering Seattle and Vashon.

² Resident workers are incarcerated persons who perform a number of tasks which support operations within the secure perimeter of DAJD adult detention facilities, such as resident meal preparation or laundry (under the supervision of DAJD staff) and cleaning of common areas outside of housing units.

As considered for this report, the side door program would be a non-secure alternative to booking to jail where law enforcement could divert amenable persons with low level, nonviolent offenses. The side door space would be operated by a licensed behavioral health agency that would receive and assess immediate needs and as appropriate, provide up to five nights of shelter and coordinated case management including transporting the individual to the facility best prepared to address identified needs.

This report explores the potential to renovate and repurpose storage space used by DESC for the first-floor shelter to create side door services. Currently, the secure-storage space is in use by DESC, necessary for clients and program staff. It provides space for client belongings, program supplies, client laundry, and overflow space that is used to accommodate pets and service animals. With renovation, this storage space could be repurposed to provide beds for up to 16 adult males for a 24/7 side door program. Because the storage space is essential for shelter operations, repurposing it while keeping the shelter would require finding alternative space for client storage and program supply or reducing the number of shelter beds.

By adding 12-16 single beds in the identified renovated and repurposed storage space on the first floor and assuming an average length of stay of five days, the space could potentially accommodate 600-800 admits per year at an estimated annual operating cost of \$1.5 million per year. For planning purposes, the Facilities Management Division of the Department of Executive Services (DES) provided an initial estimate of \$700,000 for renovations to WW space for the side door build out. This estimate does not include start up materials, furnishings or staff support infrastructure, or the cost to restructure the shelter's storage and laundry use. Reserved MIDD Behavioral Health Sales Tax funds could be used for initial capital and operating costs as long as the services focus on serving individuals behavioral health needs. Medicaid reimbursements are also anticipated to eligible services, though notably, Medicaid reimbursements do not fully cover the cost of providing services. Additional funding would be necessary over time.

During the development of this report, two subject areas were identified by stakeholders which require further analysis. The topics for further work are summarized below:

- *Legal/statutory feasibility analysis on developing and implementing an involuntary, secure side door program.* While this report notes that most stakeholders consulted for the Proviso response coalesced around creating a voluntary side door program, some interested parties hold that the side door program should be a locked facility implemented as secure alternative to jail. Further analysis is needed in this area to inform policy decisions around the side door program.
- *Consider the concentration of human services downtown Seattle and Pioneer Square.* Some stakeholders have noted that the area around KCCF in downtown Seattle/Pioneer Square neighborhood has a high concentration of human services. Given the existing constraints of the WW, its use as a shelter, and the potential additional services offered through a new Crisis Care Center on Capitol Hill, policymakers and stakeholders may wish to reexamine the concept of locating a side door program in the downtown Seattle Pioneer Square neighborhood.

Analysis on the two topics above directly impact development of a plan for use of the WW as an area to provide alternatives to secure detention services via a side door program. Consequently, this report does not include a specific timeline to implement a plan for the side door program.

This report identifies two areas for further work to inform policymaker decisions around developing and implementing a side door program: legal feasibility analysis for creating a secure alternative to jail and location of a side door program outside of the downtown Seattle/Pioneer Square area. These next steps should be undertaken in collaboration with stakeholders, the County Executive, and the King County Council.

III. Background

Department Overviews:

DAJD operates three secure detention facilities and community supervision programs for pre- and post-trial defendants throughout King County. The two adult secure detention divisions are the Seattle Division and the Kent Division. The Seattle Division operates the KCCF, and the Kent Division operates the secure detention portion of the MRJC. In 2024, the combined average daily population of both adult detention facilities was 1,407.

The mission of *DAJD* is to provide in-custody and community-based services that are data-informed, advance safety, lead system change, and promote equitable outcomes for the people served. The department's priorities include ensuring the safety and security of staff and residents, managing operational risks, strengthening community connections, promoting opportunities to humanize the people in the facilities and programs, and recruiting, developing, supporting, and retaining staff. *PSB* provides comprehensive planning, management, budgeting, and performance assessment for King County government. *PSB*'s work is guided by best practices in financial stewardship and performance management, which includes enhancing accountability and transparency, and integrating strategic planning, business planning, resource allocation, and continuous improvement into a systematic approach throughout the County.

DCHS provides equitable opportunities for people to be healthy, happy, and connected to community. *DCHS* envisions a welcoming community that is racially just, where the field of human services exists to undo and mitigate unfair structures. The department, along with a network of community providers and partners, plays a leading role in creating and coordinating the region's human services infrastructure. *DCHS* stewards the revenue from the Veterans, Seniors and Human Services Levy, the Best Starts for Kids levy, the MIDD behavioral health sales tax fund), the Health Through Housing sales tax, and the Puget Sound Taxpayer Accountability Account (PSTAA), along with other state and federally directed revenues.^{3, 4, 5, 6, 7}

Key Context: The KCCF is located downtown Seattle, occupying a square block between 5th and 6th Avenues and Jefferson and James Street. It is an integrated structure with a central "tower" and a subordinate, shorter wing of the building known as, "the west wing" (WW). The KCCF WW has seven floors adjoining the tower with eleven floors.

³ Veterans, Seniors, and Human Services Levy [\[LINK\]](#)

⁴ King County Best Starts for Kids initiative [\[LINK\]](#)

⁵ MIDD behavioral health sales tax fund (MIDD) [\[LINK\]](#)

⁶Health Through Housing sales tax [\[LINK\]](#)

⁷ Puget Sound Taxpayer Accountability Account [\[LINK\]](#)

The first floor of the WW was utilized by the DCHS to operate a shelter for unhoused individuals beginning in March 2019. The change in space use required substantial renovations, including upgrades to facility internal systems, new sinks and other plumbing fixtures, new fiber optic cables, paint, laundry, and other improvements, as well as removing security equipment and signage. Access to the elevator leading up to secure areas of the WW was restricted. The renovation was completed in 2019 at a cost of approximately \$2 million.

To facilitate the opening of the new shelter, DAJD workspace on the first floor of the WW that had been used for things like training, volunteers, and partners agencies were moved to the fourth floor. In 2020, in response to the COVID-19 global pandemic, and the need to distance jail residents from each other as much as possible to slow the spread of the disease, DAJD re-opened the second and third floors of the WW to resident housing. The second and third floors of the WW are dormitory style housing units, with eight dormitories on the second floor and six on the third connected by an open stairway. The third floor can only be accessed by stairs; there is no elevator leading to the third floor. The dorms on the second and third floors have a combined capacity of up to 224 residents when fully open and operational.

Currently, the first floor of the WW space is divided into two areas: King County Regional Homelessness Authority contracted homeless shelter on the larger east side of the space; and office space used by contracted staff and JHS Release Planning in the remaining areas. DAJD occupies floors two through four for resident housing, staff offices, community partner work and meeting space, training, and staff fitness and rest areas, as noted below.

DCHS Homeless Shelter (1st Floor) - Since inception, the shelter has been operated under contract with DESC.⁸ The contract with DESC is administered by the King County Regional Homelessness Authority, and DESC is required to provide performance measures to DCHS. The shelter serves an important role in reducing unsheltered homelessness for the 16,868 individuals experiencing homelessness in King County per the 2024 “Point-in-time Count” per King County Regional Homelessness Authority. The shelter can accommodate up to 40 people and generally operates at 95 percent of capacity, or roughly 38 beds, year-round. In 2024, 127 unique persons were served, for a total of 14,640 bed nights, with an average length of stay (ALOS) of 154 days. Based on the 2024 annual contract amount, the cost per available bed night was \$133.52. The 2025 contracting costs of operating the shelter are \$2.04 million and is funded solely by King County. Performance measures are required under contract and have been consistently met.

The shelter focuses on helping those with the greatest needs who traditionally have the most acute needs. Services provided include behavioral health treatment, housing counseling, and employment services. DESC specifically reaches out to people who have been on the streets the longest, and/or to those with mental health or substance use needs. The shelter designated as a “low barrier” shelter, meaning sobriety is not a behavioral expectation to stay, although consuming or possessing alcohol or other drugs on site is prohibited. Clients come and go at will but are required to utilize their bed at least four nights out of the week, and engage in activities, case management, and services, which may include medical and mental health wrap-around care.

JHS Release Planning (1st Floor) - Release planning and coordinated discharge services are offered by JHS staff currently occupying the first floor of the WW. JHS release planning and coordinated discharge staff serve an average of seven individuals per day but report an expected increase of up to 18 patients

⁸ <https://www.desc.org/>

per day by the end of 2025, as expanded hours are achieved under a new Coordinated Discharge initiative funded by the County's MIDD sales tax. The Office of Performance, Strategy and Budget is working closely with JHS to ensure adequate space is available for services and program needs.

DAJD Operations (2nd - 7th Floors) - All floors above the first floor of the WW are occupied by DAJD and necessary for operations. The second and third floors are resident housing, particularly for resident workers, and are essential to management of the population. As previously noted, the second and third floors have a combined capacity of up to 224 residents when fully open and operational. DAJD is in the midst of substantial facility work to retrofit the bunk beds in the WW to eliminate potential ligature tie-off points and therefore reduce the risk of suicide in these housing areas. The retrofitting is being completed dorm by dorm, meaning that at any one time, one or more dorms may be offline for facility work.

The fourth and fifth floors house DAJD administrative and operational functions, including training space for new employee training, and includes specially equipped defensive tactics training rooms. It also includes officer fitness, briefing, and rest/sleeping spaces. The fourth floor is home to operationally necessary workspaces for volunteers, trainers, JHS, and Washington State Department of Social and Health Services competency evaluators. The KCCF JHS operated health clinic and infirmary are located on floors six and seven, respectively.

Plan Methodology: Staff from PSB, DAJD, and DCHS contributed to the development of this report.

PSB engaged in multiple conversations with agencies and systems partners to gather information to inform the contents of this Proviso response. PSB conducted interviews in February and March 2025 with department leadership and subject matter experts from PSB, DAJD, DCHS and DESC, King County Sheriff's Office (KCSO), King County Prosecuting Attorney's Office (PAO), King County Department of Public Defense (DPD), the Seattle Police Department (SPD), Washington State Department of Corrections (DOC), Harborview, the City of Seattle Mayor's Office along with community providers and persons with lived experience.

On March 17, 2025, a group meeting was held with more than 30 interested parties, and included partners listed above, as well as representatives Superior Court's Involuntary Treatment Court, the Washington State Department of Corrections (DOC), Evergreen Treatment Service, and Law Enforcement Assisted Diversion (LEAD).

PSB and DCHS engaged with DESC to discuss community needs, and review the shelter contract, service delivery, and performance measures for the shelter.

IV. Plan Requirements

- A. A discussion of the feasibility and advantages of using all or a portion of the west wing of the King County Correctional Facility and other facilities to provide a "side door" alternative space to bring people with behavior health needs arrested for non-violent misdemeanor offenses, as an alternative to booking them into jail, including consideration of whether the space should be secure, and the feasibility of co-locating the facility with the homeless shelter currently occupying the west wing;**

Feasibility Analysis of using all or a portion the West Wing for Side Door

Side Door Defined: This document considers the side door program as a non-secure alternative to booking to jail where law enforcement could divert amenable persons with low level, nonviolent offenses. The side door space would be operated by a licensed behavioral health agency that would receive and assess immediate needs and as appropriate, provide up to five nights of shelter and coordinated case management including transporting the individual to the facility best prepared to address identified needs. It would be a 24/7 non-secure alternative to jail booking.

Facility Overview: The WW is a fully integrated and important part of the overall jail system at KCCF, both operationally and architecturally. The feasibility of space use depends on whether the use is limited to the first floor, where investments have already been made in isolating the space from the rest of the secure facility, or whether it is intended to include additional floors.

The physical facility constraints are such that the WW cannot be detached from the rest of the jail building. The WW shares elevators, stairwells (including emergency evacuation stairwells), security electronics, and ingress and egress with the rest of the jail building. The infirmary and clinic are an integral part of the KCCF which sit on the top two floors of the WW and share all the core architectural functions of the secured area of the building, such as stairwells and elevators.

The non-secure shelter's use of the first floor is less problematic because the shelter only utilizes a single floor, requiring only horizontal access to the space. The first floor is segregated from the rest of the floors in the WW. If floors two, three, or four were to be used for a non-jail purpose, it would require vertical access to the building, which could not be segregated from jail use. For safety purposes, DAJD has strict access requirements and cannot allow incarcerated people to co-mingle with non-incarcerated people or uncleared staff. In an emergency situation, the only way out of the building for certain areas is through the WW. In addition, if the shelter continues to operate on the first floor, there is no alternative way to move people to the second, third, and fourth floors without transiting the first floor of the jail, through the shelter intake area. Finally, the third floor of the WW is only accessible by stairs, making it less accessible, and more challenging to segregate from the other floors for non-secure purposes.

Resident Worker Space: The second and third floors of the WW currently house resident workers. The open housing configuration provides greater freedom of movement, which helps incentivize voluntary participation in the resident worker program. To be a resident worker, the resident must be screened and determined to be low risk based on their incarceration history, charges, and other factors. As the population of the jail has shifted to include a higher percent of individuals with more serious charges, as well as those with more physical and behavioral challenges, a lower percentage of the population has been eligible to meet the criteria required to be a resident worker. It has become increasingly difficult to incentivize enough resident workers to support operations. Relocating these resident workers off the WW would likely mean the loss of an important incentive. Further, DAJD does not currently have other appropriate housing options for resident workers due to their work schedules. Resident workers report for their jobs at all hours of the day, and the WW is the only housing configuration in the KCCF where small units can be segregated such that residents can sleep at off hours from the schedule of the rest of the KCCF. Mingling resident workers with the rest of the KCCF population could impact workers struggling to get meaningful sleep while the rest of their units has lights on, and other residents were awake and moving around the housing units.

Floors Two and Three Facility Improvements: DAJD is in the midst of significant physical plant changes to the second and third floors to retrofit resident housing areas. This includes installation of new beds, tables and stools, in part pursuant to a 2024 settlement with the ACLU of Washington. These changes require fortification of walls. Jump barriers are also being installed on the third floor to further reduce the risk of harm to residents. The completed retrofit work is planned to cost between approximately \$2M and be finalized by Q4 2025.

Current DAJD WW Use: In addition to the resident housing space on floors two and three, laundry distribution occurs in this space. The fourth floor of the WW houses a number DAJD operations including space for program and administrative staff, resident library, training unit and classrooms, volunteer and religious programming office space, the employee gym, defensive tactics training room, and male and female officer sleeping spaces. Due to existing space constraints, there is no other location within the KCCF nor the MRJC footprint to relocate these services. In addition, it is not possible to move many of these functions outside the secure area, as they are relied on by corrections officers whose work is confined to the secure area (e.g. rest, fitness, and training areas must be accessible). Repurposing this space would displace DAJD staff and resident spaces, resulting in inefficiencies to day-to-day operations. There is also no other adequate available space for regular storage in the KCCF.

Adding additional services to any KCCF space other than the first floor of the WW would result in increased costs and a reduction to the number of shelter beds for those living unhoused. It would be disruptive to DAJD resident housing, day-to-day operations, and would eliminate necessary staff and training space. The provision of any behavioral health and medical services provided in total confinement (jail) cannot currently be billed to Medicaid and must be paid by the County.⁹ Additional analysis would be needed regarding potential labor implications in the event contracted provided services would overlap with current JHS services.

Ongoing DAJD staffing shortages, the anticipated historical increase in jail bed demand during the spring and summer months, along with the lack of ingress and egress for non-confined individuals to other WW floors are considerations for the use of those floors as side door space.

Repurposing Existing First Floor Space: Repurposing the existing shelter space would result in a loss of up to 40 shelter beds at a time when shelter bed capacity and availability is significantly less than the need in Seattle. Specifically, ending the contract would eliminate 40 shelter beds that have been meeting the needs of the community as evidenced by the 95 percent user rate and achievement of the performance expectations in the contract. It is a year-to-year contract and can be cancelled at the end of a calendar year. The next contract renewal date is December 31, 2025.

Because the first floor of the WW is currently utilized as a shelter, repurposing the space for side door services would require reinvesting in further capital improvement expenditures to the space that was recently rebuilt in 2019. The County would need to replace furnishings purchased by DESC and require technology improvements for wi-fi access.

Stakeholder Feedback: Discussions with representatives from PSB, DAJD, DCHS, KCSO, PAO, DPD, SPD and Seattle Mayor's Office, DOC, the courts, and diversion programs (stakeholders), indicated no interest in dislocating or losing the existing shelter beds, or losing the space for JHS release and

⁹ JHS participation in a potential Medicaid 1115 Waiver analysis is underway which may impact this rule in the future.

coordinated discharge services both of which are housed on first floor of the WW. Nor was there an expressed desire to expand services to other WW floors, and disrupt the space needed for DAJD and its partners.

Advantages of WW for Side Door

Location: The central location of the KCCF is a primary advantage in considering the use of the WW as a location for the provision of services and alternatives to detention. It is close to both County and City of Seattle services and a number of transit options, and close to I-5 making it relatively easy to access. The location is also ideal in circumstances where a participant can be referred to the space from first appearance hearings conducted at the jail. At the time of the writing of this report, the Executive is considering the siting of a Crisis Care Center in the Central Zone that is similarly centrally located.

In a follow-up to the March 17th meeting, PSB staff had a preliminary conversation with the DOC Office of Community Corrections about potentially contracting with King County for community-based jail booking diversion options for community corrections violators who are primarily struggling with behavioral health issues. DOC indicated interest in contracting with King County if its clients could also be diverted to the WW space, rather than being confined in a state prison for a short period of time. Because King County eliminated its contract with DOC at the beginning of the pandemic, a new agreement would need to be negotiated if King County was interested in pursuing this kind of a partnership. Additional analysis is needed to understand the implications of expanding side door use to DOC for King County, including implementing a full cost recovery model.

Existing Programs and Services: Stakeholder discussions included emphasis on utilizing existing available and planned behavioral health crisis diversion programs and whether the County's focus should be on better utilizing those programs. They also raised the questions of and why and how the WW location would be different from those programs and services. Discussions included the following points:

- King County residents benefit from increased service options for individuals who could be charged with non-violent, misdemeanor offenses especially when the individual's activities are related to behavioral health conditions. Expanding services provided in the WW could address some of this need. However, side door services may be duplicative of other facilities expected to open soon, including the ORCA Center and STAR Center operated by DESC and the Crisis Care Center for the Seattle/Central Zone.
- Law enforcement should be encouraged to consider a greater use of RCW 10.31.110 as an alternative to arrest, to transport persons in need to a crisis stabilization unit or crisis relief center, refer to a designated crisis responder for evaluation and initial detention and /or refer the individual, upon agreement, to voluntary participation in outpatient treatment. The enhanced WW services could help facilitate such utilization by law enforcement.
- Given that the WW is currently contracted to provide shelter and behavioral health services, enhancing the space to increase capacity for the diverted population and amending the DESC existing contract could potentially yield economies of scale for the current contractor (DESC), and King County. Further analysis is needed to identify specific economies of scale opportunities.

Secure vs. Non-Secure Consideration

Most stakeholders coalesced around the concept that the side door facility should be a non-locked (or non-secure) site. Legal concerns were raised by some stakeholders about a using a locked site for individuals who were not being held in custody because individuals remanded for involuntary services at a locked site would either need to be detained for involuntary treatment or booked in the jail for cause.

This is an area that requires further analysis, with cascading impacts on space, staffing, programs, and costs. Notably, a locked side door facility in the WW would require staffing by DAJD corrections staff, resulting in higher operational costs.

Some raised the concern of using a locked space in the WW would expand the use of secure detention and would work against the goals of diversion from jail and alternatives to secure detention. Stakeholders noted that research that shows confinement does not help persons in crisis and often exacerbates behavioral health issues and can lead to negative outcomes.¹⁰ Confinement is associated with increased mental health problems and is ineffective in stabilizing persons in crisis. Rather, evidence-based crisis stabilization and community support services are recommended to help those in need.^{11, 12}

Feasibility of co-locating services with the shelter currently occupying the West Wing

Facility limitations for existing useable space in the current first floor shelter footprint do not allow for co-locating of the shelter with side door services while assuring adequate service and separation of the populations served by each function. As reported by DESC, the shelter beds operate at 95 percent capacity. While one or two beds may be available at any one time, consistent with the National Registry of Evidence Based Practices, the mixing of the shelter population and persons in acute crisis is not a best practice. DESC reports that shelter clients do not have sobriety requirements and bringing persons in crisis into a shared space is contraindicated.

It is feasible for the existing storage space to be renovated for use as a non-secured space. It could serve up to 16 adult males for the provision of voluntary side door type services. Though the storage space is essential for shelter clients and operations DESC is open to exploring storage alternatives.

B. A discussion, in collaboration with the behavioral health and recovery division, of the types of services that could be provided on-site, including assessments, therapy, medication assisted treatment, and case management, and how those services might be administered through existing or new alternatives to detention and diversion programs, and consideration of whether currently available on-site services and case management at the site could be used as a shared resource for the homeless shelter and "side door";

Types of Services

The side door option that would expand the footprint and capacity of the shelter space that currently occupies the first floor of the WW is outlined in this and subsequent subsections of this report. The side door option in expanded space would coordinate with and support existing crisis services in the County rather than expanding to the upper floors of the WW or eliminating the DESC shelter.

In discussion with Behavioral Health and Recovery Division of DCHS, the types of services that are best suited for diversion may be eligible for Medicaid and provided on-site, through a contracted, licensed

¹⁰ Petersilla, Joan (2003) *When Prisoners Come Home*. New York: Oxford Press

¹¹ Vera Institute of Justice. (2021). *Beyond Jails: Community-Based Strategies for Public Safety*. New York City. <https://www.vera.org/beyond-jails-community-based-strategies-for-public-safety>

¹² Quandt, K.R. (2021, May 13). Incarceration Can Lead to Lasting Damage to Mental Health. *Prison Policy Initiative*. <https://www.prisonpolicy.org/blog/2021/05/13/mentalhealthimpacts/>

behavioral health provider. These services that could be covered under Medicaid include behavioral health assessments, individual/group therapy, medication assisted treatment, and case management.¹³

Conversations with DESC indicate DESC interest in continuing to provide the existing shelter services and are open to further conversations about adding additional services and beds if additional services are added to the WW footprint. Otherwise, further analysis is needed to determine whether a new contractor could accommodate the additional occupants and services.

Administration of Services through Existing or New Alternatives to Detention

A function of the case management services and individual assessments, provided by the side door contractor, would be to work with law enforcement, referral sources and other local providers to triage participants and provide. Such services also include direct, a warm handoff and transport to one of the many existing spaces and services in King County that would be best prepared to address the behavioral health needs of the proposed side door population, based on availability. These functions are similar to those of the planned Crisis Care Centers described above.

Below are service options available for this population.

The King County Crisis Solution Center was originally designed as an alternative to jail booking for persons in crisis. The facility is comprised of two programs: The Crisis Diversion Facility (CDF) and Crisis Diversion Interim Services (CDIS). Law enforcement doesn't need a referral to do a drop off at the Crisis Solution Center.

- **The Crisis Diversion Facility (CDF)** program accepts referrals from first responders including KCSO, SPD, and all other local city law enforcement agencies in King County. In addition, local fire department medical response units, County Designated Crisis Responders (DCRs), Hospital emergency departments (EDs), King County Emergency Service Patrol and Seattle Community Assisted Response and Engagement (CARE) may also make referrals. The CDF provides crisis stabilization services, with a capacity of 16 stabilization beds, for up to 72 hours of service. The CDF maintains a minimum 4:1 client to staff ratio and has 24 x 7 access to medical staff. In 2024, an average of 11 beds were occupied at any one time.
- **Crisis Diversion Interim Service** accepts referrals only from the CDF and maintains capacity for 30 interim respite beds with a maximum length of stay of 14 days.

The Crisis Solution Center has reported that law enforcement is currently underutilizing existing crisis diversion programs. It provides three days of services, followed by 14 days of voluntary stay-stabilization.

The Crisis Care Centers Initiative, approved by King County voters in April 2023, began in 2024 to create a countywide network of five crisis care centers (CCCs).¹⁴ They are intended to be a service entry point

¹³ Services provided at the current WW shelter include behavioral health treatment, housing counseling, and employment services, and case management services which may include medical and mental health wrap-around care. Medication for opioid use disorder (MOUD) is not provided.

¹⁴ <https://kingcounty.gov/en/dept/dchs/human-social-services/community-funded-initiatives/crisis-care-centers-levy>

for individuals and family members seeking behavioral health treatment and for law enforcement and other first responders as a diversion from emergency rooms and jail. These centers are envisioned to restore and expand mental health residential treatment beds and strengthen the community behavioral health workforce.

The nine-year levy also aims to promote continuity of care by linking 988, mobile crisis teams, and other behavioral health resources to support people's recovery. Persons in crisis including those with low-level criminal behavior are appropriate referrals. Post-crisis follow up can include additional support for up to 90 days in community with a link with behavioral health outpatient providers. Connections Health Solutions has been selected to operate the CCC for the North Crisis Response Zone at its facility in Kirkland. The CCCs will provide walk-in, behavioral health and urgent care. The Executive is currently considering a potential site for the Central Response Zone (Seattle) in the Capitol Hill neighborhood that could open as early as 2027.

King County Sheriff's Office Therapeutic Response Team is a progressive approach to law enforcement public safety which integrates mental health professionals with specially trained KCSO deputies to form co-responder teams with responsibilities that include de-escalation, crisis intervention, service referrals, and support for treatment processes.¹⁵

King County Designated Crisis Responders are called to meet with persons in a behavioral Health crisis at any location to evaluate the individual for involuntary treatment under RCW 71.05.153. Depending on the crisis, a person can be detained for up to 120 hours. Before being detained, typically individuals must be transported to a local emergency department for medical clearance with the support of law enforcement and the local ambulance service. Law enforcement involvement is authorized by RCW 71.05.153, but ambulance providers often require it as a precursor for providing transportation services. Once medical clearance is established by the local emergency department the remaining of the 120 hours could be served at an Evaluation & Treatment or Secure Withdrawal Management and Stabilization facility.

The ORCA Center, a new DESC service, will be opening in fall 2025 in the DESC Morrison space, which is located in downtown Seattle, across from the King County Courthouse, just a few blocks from the KCCF.¹⁶ Funding will come from multiple sources, including King County, and will serve persons with opiate overdoses with a 24-hour model of care for induction, and referral to services. Referrals can come from first responders. Twelve Medicaid funded beds will be available for persons enrolled in Medicaid.

The DESC's STAR Center (Stability Through Access and Resources) provides time limited, 24/7, behavioral health-focused non-congregate shelter. Participants may access services on a case-by-case basis for the amount of time necessary to achieve stabilization. Services focus on unsheltered adults facing significant untreated and undertreated challenges related to mental health and substance use disorders. The center will be located at Third Avenue and Cherry Street in downtown Seattle and will provide accommodation for up to 85 people nightly.

¹⁵ <https://kingcounty.gov/en/dept/sheriff/courts-jails-legal-system/sheriff-services/therapeutic-response-unit>

¹⁶ <https://www.desc.org/orca-center-will-provide-quick-stabilization-and-resources-following-overdose/>

The Sobering Center provides a safe space for people to sleep off the effects of acute alcohol or drug intoxication or opiate overdose.¹⁷ DCHS is securing a permanent location for a new sobering center in Seattle's SODO neighborhood. Expected to open in early 2026, this center will be available 24/7 to meet the growing needs of our community and connect more people to treatment, lifesaving interventions, and a path to recovery. It will be operated by Pioneer Human Services and be able to serve up to 40 people at a time.

C. Projection of the number of people likely to be served by the "side door" and the capital and operating resources that would be needed to implement the plan.

PSB staff estimates that by adding 12-16 additional single beds in the renovated storage space on the first floor of the WW, with an average length of stay of five days, it is anticipated the side door services could accommodate 600-800 admits per year. The five-day stay estimate is based on the assumption that participants would be referred to other programs and services outside of the WW. Longer lengths of stay would reduce the numbers served.

Commensurate with the existing DESC contracted shelter services for 40 beds costing \$1.1M annually, PSB estimates an annual operating cost for additional beds and required service coordination and case management with community-based providers would be \$1.5 million per year. According the BHRD, programmatic costs would increase with services such as withdrawal management or administration of medications for opioid use disorder. Detailed side door programmatic design would inform and potentially increase these costs.

For initial planning purposes only, King County Facilities Management Division of the Department of Executive Services provided a rough order of magnitude estimate of \$700,000 for enhancements to the WW storage space for this work. This estimate does not include start up materials, furnishings or staff support infrastructure, or storage and laundry replacement.

D. Identification of potential funding sources to implement the plan, including use of the \$2,000,000 expenditure reserve in the Mental Illness and Drug Dependency Fund set aside for supporting changes to the future use of the west wing; and

The 2025 financial plan for the MIDD Fund currently includes a \$2 million reserve that is set aside to support the future use of the WW. See Appendix A. Expenditures of MIDD revenue must align with the broad spending restrictions of the MIDD sales tax, which is for programs and services for people living with or at risk of behavioral health conditions. This reserve is subject to an Expenditure Restriction in the Adopted 2025 Annual Budget (Ordinance 19861) limiting this \$2 million of the MIDD fund to "... solely support changes to the west wing..."

PSB estimates that most of the build out, start up, and first year of contracting costs of a 16-bed, first floor WW side door program could be funded by the \$2 million reserved in the MIDD Fund. Leveraging Medicaid reimbursement for services would also help fund programming costs.¹⁸ However, because Medicaid funding does not cover the full cost of providing services, it is likely additional revenue would

¹⁷ <https://www.desc.org/star-center/>

¹⁸ DCHS notes that when a behavioral health bed isn't being used, local funding covers the gap between Medicaid and the total cost to operate.

be needed to sustain the program over time. Final design of side door programming will determine costs and revenue options.

E. Identification of the timeline and next steps to implement

During the development of this report, two subject areas were identified by stakeholders which require further analysis. Analysis on the two topics directly impact development of a plan for use of the WW as an area to provide alternatives to secure detention services via a side door program. Because these two areas need further analysis, it is not possible to include a specific timeline to implement a plan for the side door program in this Proviso response.

The topics for further work identified as next steps are summarized below:

- *Legal/statutory feasibility analysis on developing and implementing an involuntary, secure side door program.* While this report notes that most stakeholders consulted for the Proviso response coalesced around creating a voluntary side door program, some interested parties maintain that the side door program should be explored a locked facility implemented as secure alternative to jail.

The decision to implement a secure facility sited at the KCCF has cascading impacts, including such items as the potential to increase construction and ongoing operating costs and the potential need to relocate the non-secure shelter program.

Further analysis is needed in this area to inform policy decisions around secure v. non-secure side door program.

- *Consider the concentration of human services downtown Seattle and Pioneer Square.* Some stakeholders have noted that the area around KCCF in downtown Seattle/Pioneer Square neighborhood has a high concentration of human services. Given the existing space constraints of the WW, its current use as a shelter, and the potential additional services offered through a new Crisis Care Center on Capitol Hill along with other new programs and forthcoming services, policymakers and stakeholders may wish to examine the concept of locating a side door program in the downtown Seattle Pioneer Square neighborhood.

These next steps should be undertaken in collaboration with stakeholders, the County Executive, and the King County Council.

V. Conclusion

The creation of a 16-bed, non-secure, 24/7 side door alternative to jail booking could provide voluntary diversion pathway for individuals with behavioral health needs engaging in non-violent misdemeanor-level behaviors may be feasible on the first floor of the WW.

While this program could be supported by reserved MIDD funding and also by Medicaid reimbursements, additional funding would likely be needed since Medicaid funds do not cover the full cost of providing services, and future reductions of Medicaid funding are expected. At the same time,

the County and its partners offer several existing and anticipated future services supporting a voluntary diversion pathway for individuals with behavioral health needs that could be more effectively utilized.

This report identifies two areas for further work to inform policymaker decisions around developing and implementing a side door program: legal feasibility analysis for creating a secure alternative to jail and location of a side door program outside of the downtown Seattle/Pioneer Square area. Decisions on these matters impact facility design and costs along with staffing, programmatic, and operational costs. These next steps should be undertaken in collaboration with stakeholders, the County Executive, and the King County Council.

VI. Appendix A MIDD Financial Plan

MIDD Monitoring /1135 Financial Plan April 2025

Category	2023-2024 Revised Budget	2023-2024 Actuals	2025 Actual	2025 Adopted	2025 Estimated	2026-2027 Projected	2028-2029 Projected
Beginning Fund Balance	57,330,129	57,330,129	47,804,488	47,158,736	47,804,448	22,276,625	5,981,327
Revenues							
Local Sales Tax	182,122,607	183,736,289	13,633,946	93,782,511	93,172,177	192,603,763	202,942,807
Other/Interest	5,000,000	5,295,785	375,965	769,143	1,050,000	1,758,421	859,200
General Fund Transfer						-	-
Total Revenues	187,122,607	189,032,074	14,009,911	94,551,654	94,222,177	194,362,184	203,802,007
Expenditures							
Salaries, Wages & Benefits	28,428,550	26,744,872	4,658,292	16,207,395	16,207,395	32,061,136	33,818,086
Supplies	257,134	133,898	10,994	141,019	141,019	294,447	314,617
Contracted Services	139,574,660	116,642,471	16,074,668	77,908,030	77,908,030	127,667,040	136,412,232
Intergovernmental Services	2,853,454	2,668,528	4,273,440	1,353,296	1,353,296	2,981,953	3,380,342
Interfund Transfers	43,880,202	36,642,812	3,302,856	25,448,460	25,448,460	53,136,418	56,776,263
Transfer to Behavioral Health Fund	15,500,000	15,500,000	1,990,588	7,191,800	7,191,800	15,016,488	16,045,118
Cascade Hall	3,800,000	225,134				-	-
Total Expenditures	234,294,000	198,557,715	30,310,838	128,250,000	128,250,000	231,157,482	246,746,658
Estimated Under expenditure	(5,200,000)			(8,500,000)	(8,500,000)	(20,500,000)	(22,000,000)
Other Fund Transactions							
Total Other Fund Transactions	-	-	-	-	-	-	-
Ending Fund Balance	15,358,736	47,804,488	31,503,561	21,960,390	22,276,625	5,981,327	(14,963,324)
Reserves							
Expenditure Reserve (60 days)	16,974,742	16,546,476	18,219,340	18,219,340	16,275,484	19,263,124	20,562,221
Future use of West Wing	2,000,000	2,000,000	2,000,000	2,000,000	2,000,000		
Sobering Center Allocation			2,800,000	2,800,000	2,800,000		
Out-year Capital RFP Reserve			5,000,000	5,000,000	5,000,000		
Cascade Hall Reserve	3,700,000	3,700,000	1,800,000	1,800,000	1,800,000		
Total Reserves	22,674,742	22,246,476	29,819,340	29,819,340	27,875,484	19,263,124	20,562,221
Reserve Shortfall	7,316,006	-	-	7,858,950	5,598,859	13,281,797	35,525,545
Ending Undesignated Fund Balance	-	25,558,012	1,684,221	-	-	-	-

Financial Plan Notes

All financial plans have the following assumptions, unless otherwise noted in below rows.

Out-year revenue and expenditure inflation assumptions are consistent with figures provided by PSB's BFPA guidance.

Revenue Notes:

Estimated and projected revenues reflect the updated revenue forecast per King County Office of Economic and Financial Analysis (OEFA) as of April 2025.

Expenditure Notes:

2023-2024 Estimated reflects updated planning assumptions.

2023-2024 Biennial-to-Date Actuals reflect revenues and expenses posted through 12/31/2024.

2025 Adopted reflects 12/2/2024 Council Adopted Budget.

2026-2027 Projected includes adjustments to back out one-time items.

Reserve Notes:

The Rainy Day Reserve represents 60 days of estimated expenditures.

Sobering Center Allocation reserves for out-year spending of the \$5.6M total allocated to the Sobering Center in the 2023-2024 2nd Omnibus.

Out-year Capital RFP Reserve is for out-year spending of the \$10M total allocated to community capital projects in the 2023-2024 2nd Omnibus.

Cascade Hall Reserve is for unspent funds for the Cascade Hall facility that will be needed for maintenance and repairs.

Last Updated 7/11/2025 by DCHS Staff using data from PBCS and BFPA assumptions. To correct versoin sent on June 5, 2025.