

**Public Health – Seattle & King County**  
**Jail Health Services Overview**  
**January 2026**

### **Organizational Structure**

[Jail Health Services](#) (JHS) is a division of Public Health, Seattle & King County (DPH). Services are provided both in and out of custody. In-custody services are provided within two adult jails operated by the King County Department of Adult and Juvenile Detention (DAJD): the King County Correctional Facility (KCCF) in Seattle, and the Maleng Regional Justice Center (MRJC) in Kent. Out-of-custody services are provided by the JHS Social Services team in various community locations for releasing jail residents and participants of legal system diversion programs. JHS is guided by the DPH mission and vision, collaborating with other divisions of DPH on a wide range of clinical and administrative issues, and benefitting from the Department's understanding of the complexity of health care operations and policy. JHS also works in partnership with DAJD to fulfill daily operations.

<b>DPH Mission:</b>	Identify and promote the conditions under which all people can live within healthy communities and can achieve optimum health.	<b>DPH Vision:</b>	Healthy people and healthy communities
<b>JHS Mission:</b>	To assess and stabilize serious health problems for the detained population of the King County Correctional Facility (KCCF) and the Maleng Regional Justice Center (MRJC), with a focus on transition from jail	<b>JHS Vision:</b>	Opening doors to healthier, happier lives

### **In-Custody Services**

An intake health review (receiving screening) is performed with all individuals booked into KCCF and MRJC to identify and respond to health needs during their incarceration. Additionally, a broad range of health services is available to all residents, including:

- ◆ Nursing health review/screening, monitoring, and treatment
- ◆ Acute medical care
- ◆ Infection control and wound care
- ◆ Chronic disease management
- ◆ Diagnostic testing and services (lab and x-ray)
- ◆ Pharmacy services and medication administration
- ◆ Alcohol and drug withdrawal management
- ◆ Substance Use Disorder (SUD) assessment and treatment, including medication assisted treatment
- ◆ HIV/sexually transmitted disease testing, counseling, and contact tracing

- ◆ Emergency care (via partnership with Harborview Medical Center and Valley Medical Center)
- ◆ Referral for specialty health care
- ◆ Women's health care including pregnancy care
- ◆ Mental health screening, case management, and crisis counseling
- ◆ Psychiatric treatment
- ◆ Emergency dental care
- ◆ Social work assessment, case management, and release planning
- ◆ Coordinated discharge services to provide continuity of care upon release, including warm handoffs to community-based providers

Specialized medical housing is provided in the jails as follows:

- ◆ Psychiatric Housing – for residents who meet diagnostic criteria and who are not stable enough to be housed in General Population housing. DAJD provides security and monitoring for residents at risk of suicide.
- ◆ Infirmary – for residents who need 24-hour skilled nursing care and/or help with activities of daily living

### **Out of Custody Services**

JHS performs needs assessments and provides referrals and warm handoffs to community-based providers in various programs. This includes diversion from the criminal legal system via the Community Diversion (pre-file) & Therapeutic Alternative Diversion (pre & post file) Programs. Another support service is our Court Clinician team that supports King County and City of Seattle Therapeutic Courts by providing clinical and treatment recommendations, while working alongside referred individuals to support early mental health stabilization through intensive care coordination. More information about these programs is available here:

[Therapeutic Courts and Collaborative Programs - King County, Washington.](#)

### **Selected Jail Statistics**

<b>Population Size</b>	<ul style="list-style-type: none"> <li>◆ The average daily <i>secure</i> population (ADP) in 2025 was 1,412.</li> <li>◆ Per facility, ADP per site was: KCCF – 791; MRJC - 622</li> <li>◆ In 2020, following the COVID-19 outbreak, the population was reduced significantly from about 1,950 to a low of about 1,300.</li> </ul>
<b>Bookings</b>	<ul style="list-style-type: none"> <li>◆ 2025 bookings: 17,564.</li> <li>◆ 2019 bookings (pre-pandemic): 32,832.</li> <li>◆ Each new individual booked receives screening and evaluation services from JHS staff.</li> </ul>
<b>Length of Stay</b>	<ul style="list-style-type: none"> <li>◆ The average length of stay (LOS) in 2025 was 32.7 days, an increase from 24.9 days in 2019.</li> <li>◆ LOS has increased for various reasons over the past few years, including fewer misdemeanor bookings due to booking restrictions, court</li> </ul>

	<p>backlogs, and delays in competency restoration at Western State Hospital for residents deemed incompetent to stand trial.</p> <ul style="list-style-type: none"> <li>◆ 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.</li> </ul>
<b>Special Populations</b>	<ul style="list-style-type: none"> <li>◆ Mental illness: an estimated 44% of residents of local jails have a mental illness, a rate more than double that of the general population.</li> <li>◆ 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.</li> </ul> <p>(Sources: <a href="#">About Criminal and Juvenile Justice &amp; Behavioral Health   SAMHSA</a>, <a href="#">Access to opioid use disorder treatment in US jails: Prevalence and related factors – Recovery Research Institute</a>.)</p>

**DAJD Data Sources** (note JHS only serves residents of *adult secure detention* when reviewing statistics):

[Data and reports - Adult and Juvenile Detention - King County, Washington](#)  
[DAJD Population Dashboard](#)

## **Mandates**

Almost all services provided by JHS are mandated and highly regulated:

- KCCF (the facility, not JHS) is required to be accredited by the [National Commission on Correctional Health Care \(NCCHC\)](#), pursuant to a 1998 King County lawsuit settlement (the [“Hammer” agreement](#)). The accreditation process affirms compliance with a set of 59 jail standards. The next survey is expected to take place in 2026, and the facility will be measured against new standards released in late 2025. JHS maintains the same levels of service quality at both KCCF and MRJC, even though MRJC is not accredited, with one exception. 14-day Health Assessments are not provided at the MRJC site.
- Health services for people in custody are mandated by state law [\(RCW 70.48.130\)](#) and courts have found that such services are required by the U.S. Constitution, under the [Civil Rights of Institutionalized Persons Act \(CRIPA\)](#). Case law exists which is commonly used to hold jails accountable to meet the health needs of jail residents ([Estelle v. Gamble, 429 U.S. 97 \(1976\)](#)).
- People with disabilities, including SUDs, have rights under the [Americans with Disabilities Act \(ADA\)](#) to receive accommodations and services (including treatment for their addiction) while in jail. King County is currently implementing reforms to comply with a 2025 [settlement agreement with the Department of Justice](#).
- Clinical services in the jails are regulated by state bodies such as the [Boards of Nursing and Pharmacy and the Medical and Dental Quality Assurance Committees](#). The [State Department of Health](#) licenses professional clinical staff.