King County

Department of Community and Human Services
Behavioral Health and Recovery Division

401 Fifth Avenue, Suite 400
Seattle, WA 98104

Phone: 206-263-9100

206-296-0583 (Reception)

206-205-1634 (Clinical Services

King County Behavioral Health Advisory Board (BHAB)

October 2, 2025- 11:30 am – 1:30 pm

Board Members Present: *David Sullivan, Dea Degrate, Jasmeet Singh, Kevin Host, Kristina Sawyckyj, Lyscha Marcynyszyn, Mustafa Mohammed, Nancy Dow, and Stacey Devenney.*

Board Members not Present: *Lucas Sherman*

Guest*: Anaya Bakshi, Ann Gorman, Candace Hunsucker, Christena Coutsoubos, Dan Floyd, Emily Johnson, Erin Reinhart, Heather Venegas, Idabelle Fosse, Kathleen Murphy, Laura Smith, Mark Cooke, Monica De Leon C., Rebecca Mendelsohn, Sabina Perry, Susan Mclaughlin, and Tasmin Rehamani.*

BHAB Board Meeting

The King County Behavioral Health Advisory Board meeting, including board members, staff, and the public, was called to order at 11:32 am.

Welcome & Introductions

Jasmeet Singh welcomed everyone.

- Community members and guests introduced themselves.
- Public Comment Sign-up: via Teams chat

Board Business

Approval of the Minutes for September 4, 2025.

Prepared By: Monica De Leon C- Board Liaison *Attested by: Kathleen Murphy*

Approved: 11/6/2025

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The board approved September 4, 2025, meeting minutes the amendment of correcting Parkland to Kirkland. September 4th Minutes were approved.

Governance

Administrative Items & agenda review

Jasmeet Singh welcomes everyone and reviews the meeting agenda.

Crisis Care Center Visit Update

Susan Mcluaghlin and Kathleen Murphy discuss the upcoming Crisis Care Center visit on October 17 and provides information on how to register and the necessary forms.

Legislative Update

Christina Coutsoubos provides an update on federal changes to Medicaid, including the impact of HR 1 on Washington state, expected enrollment losses, and specific provisions like the prohibition on Medicaid funds for Planned Parenthood. Christina discusses the state legislative priorities for 2026, including protecting access to behavioral health care, helping people retain or regain Medicaid coverage, and stabilizing the behavioral health workforce.

- She highlights the importance of community engagement and the need for state funding to support existing services and new initiatives.

Behavioral Health Legislative Forum and Public Engagement

Christina announces the Behavioral Health Legislative Forum on November 18, 2025, and encourages board members to attend and bring guests. She provides information on how to register, share the event on social media, and become an ambassador for the forum.

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Christina emphasizes the importance of a strong turnout to show state lawmakers the dedication to behavioral health and the need for legislative priorities.

Time for Q & A was provided.

Crisis Care Center Clinical Model Presentation

Jennifer Winslow, Crisis Care Center Strategic Planning Manager, presents an overview of the crisis care center clinical model.

- She explains the four key components of a crisis care center: behavioral health agency, site or facility, jurisdictional support, and community engagement.
- Jennifer discusses the crisis response zones in King County and the timeline for opening crisis care centers, including the first center expected to open in 2025.

24/7 Behavioral Health Urgent Care (BHUC)

- Jennifer describes the BHUC as a front door for behavioral health urgent care, providing same-day services for non-emergent behavioral health needs.
- She explains the triage criteria for clients, the intake evaluation process, and the services provided in the BHUC, including access to psychiatric providers, medication refills, and social services.
- Jennifer highlights the importance of discharge planning and the need for community engagement to ensure the BHUC meets the needs of the community.

23-Hour Observation Unit

- Jennifer explains the 23-hour observation unit as a place for guests with higher acuity symptoms, such as high risk of suicide or violence, to receive stabilization for up to 23 hours and 59 minutes.
- She describes the services provided in the observation unit, including psychiatric emergency services, peer engagement, and support for guest basic needs.

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- Jennifer emphasizes the importance of maintaining a therapeutic environment and the role of first responders in dropping off individuals at the crisis care center.

Crisis Stabilization Unit (CSU)

- Jennifer introduces the CSU as a voluntary, lower acuity 16-bed stabilization unit for guests with mental health and/or substance use needs.
- She explains the services provided in the CSU, including a safe and therapeutic environment for up to 14 days, and the criteria for accepting guests from the 23-hour observation unit.
- Jennifer highlights the importance of trauma-informed care and the need for community engagement to ensure the CSU meets the needs of the community.

Q&A and Closing Remarks

- Jennifer invites questions from the board members and addresses specific queries about the utilization of the BHUC, the diagnosis process, and the access to medical records.
- Susan Mclaughlin and Kelly Tongg provide additional information on the diagnosis process and the access to medical records through the Integrated Care Network.
- Jennifer concludes the presentation, thanking everyone for their participation and encouraging further questions and engagement during the tour of the crisis care center.

Clinical Model Overview and Services

Kelly Tongg explains the structured daily routine and access to evidence-based clinical and peer services in crisis care centers. The typical stay for individuals is between three to five days, with a maximum stay of up to 16 days. The CSU must establish and maintain a triage process to prioritize individuals and referrals from the 23-hour observation unit. Additional services include case management, crisis intervention, individual and group therapy, medication management, and peer support.

Components of the Clinical Model

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Kelly Tongg describes the three components: Urgent Care, Observation, and Crisis Stabilization. The youth Crisis Care Center is a referral pathway from Urgent Care and the 23-hour observation unit. Post-crisis follow-up includes culturally and linguistically appropriate services. The clinical model includes substance use services like detox management and access to opioid use disorder medications.

Access and Workforce Investments

- Individuals can access the CSU via walk-in or drop-off, regardless of insurance coverage.
- The importance of having a representative workforce is emphasized, with the levy supporting workforce investments.
- First responders, including mobile crisis, EMS, emergency personnel, and law enforcement, are involved in the process.
- The staff makeup includes certified peer specialists, clinical staff, behavioral health techs, care coordinators, and substance use disorder professionals.

Differences Between Crisis Care Centers and Crisis Solution Centers

- Kelly explains that CCCs have more levels of care and are more robust in treatment and intensity.
- CSCs were designed for law enforcement and first responders only, with more restrictive referral pathways.
- The future of CSCs is being reconsidered as CCCs are being established, with potential changes based on the needs of the community.
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Community Engagement and Site Selection

- Idabelle Fosse provides updates on the crisis care center in Capitol Hill, including community engagement and public comment opportunities.
- Around 60 to 70 community meetings have been held, with overwhelming support for the site.
- The King County Council will vote on whether to buy the building on October 7.
- If approved, renovations will begin in January, with the hope of opening the site by 2027.

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Mobile Crisis Response Teams and Community Work

- Idabelle Fosse mentions the ongoing community update meetings and the involvement of various community organizations.
- The next community update meeting will feature a presentation by de SC and Sound on mobile crisis response teams.
- The post-crisis follow-up request for proposals is being finalized, with announcements expected soon.
- Other requests for proposals related to the crisis care center levy work will be announced by the end of the year.

Public Comments:

- No public comment

Jasmeet requested a motion to adjourn the meeting at 1:28. Meeting is adjourned.

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