

Data Brief: Behavioral Health Crisis Interactions in 2022 by King County Crisis Response Zone

March 2024

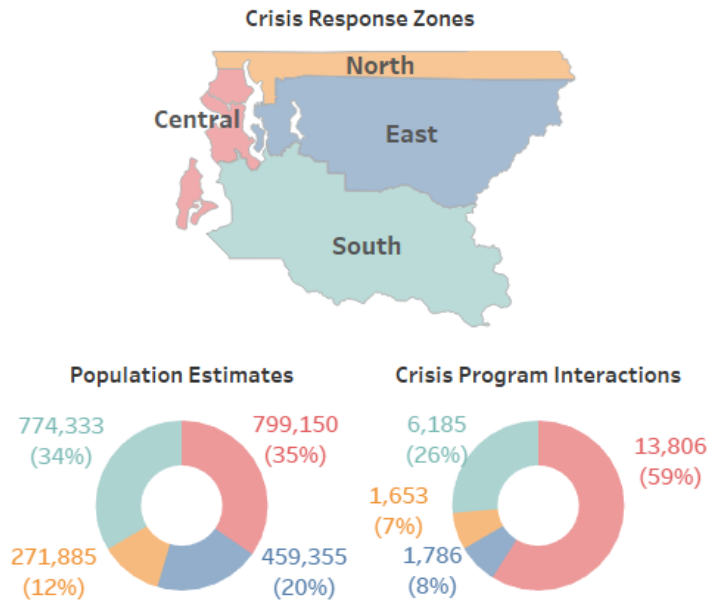
This data brief reports information about the geographic and demographic characteristics of the four crisis response zones within King County and their crisis program interactions in 2022.

The key takeaways are:

- Most crisis encounters occur in the central zone
- People use accessible services like the crisis line extensively
- Designated crisis responders (DCRs) are overutilized
- Demographic subpopulations may face barriers to accessing behavioral health care

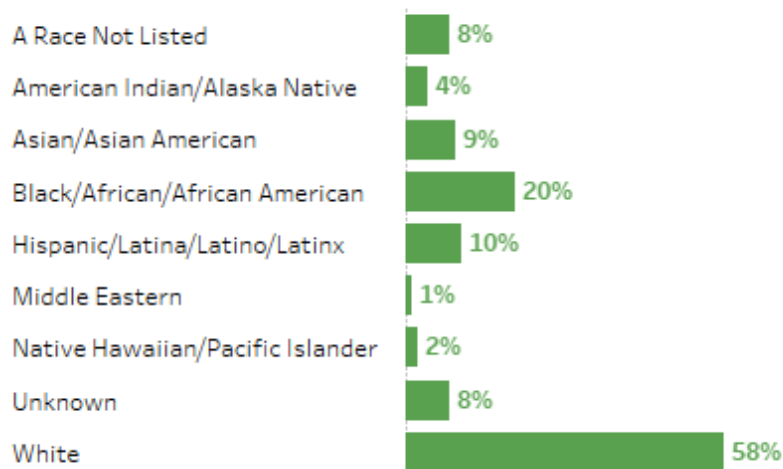
Of the 10,278 individuals who received a crisis service (excluding crisis calls), 60% had a DCR investigation. The frequent use of DCRs during in-person crisis interactions highlights the need for more crisis care options that provide care in a less restrictive setting.

Population Estimates and Crisis Program Interactions by Crisis Response Zone, 2022



See full brief for details about data sources and interpretation notes.

Race/Ethnicity of Individuals Interacting with Crisis System, 2022



Race/ethnicity data is calculated inclusively; see full brief for details about data sources, methodology, and interpretation notes.

Demographic populations can be both over- and under-served in crisis settings, both of which may point to barriers in access to appropriate care. For example, individuals identifying as Black, African, or African American represented 20% of people receiving crisis services, which is about 2.5 times *greater* than the percent of people in the King County population who identify as Black, African, or African American. In contrast, people identifying as Asian or Asian American represented 9% of individuals receiving crisis services, which is about 2.5 times *lower* than the percent of people in the King County population who identify as Asian or Asian American. Please review the rest of this brief for additional information.

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Background

King County voters approved a nine-year property tax levy in April 2023 called the Crisis Care Centers (CCC) Levy. The Levy will raise proceeds from 2024 to 2032 to transform the region's behavioral health crisis response system by creating a network of five crisis care centers, restoring mental health residential treatment capacity, and strengthening the community behavioral health workforce.

The Levy's paramount purpose is to establish and operate a regional network of five crisis care centers in King County. Crisis care centers are a new type of behavioral health facility that will provide same day, walk-in access to specialized behavioral health urgent care and crisis services. Crisis care center requirements are described in King County Ordinance 19572 and the proposed CCC Levy Implementation Plan.^{1,2}

Purpose of Data Brief

Ordinance 19572 defines four regions within King County called crisis response zones. The purpose of this data brief is to report information about the geographic and demographic characteristics of each of the four crisis response zones. An additional purpose of this brief is to report the distribution of people who received behavioral health crisis services managed by the King County Department of Community and Human Services, Behavioral Health and Recovery Division (BHRD) by crisis response zone.³

Crisis Response Zones

Crisis response zone boundaries are depicted in Figure 1, and the cities and unincorporated regions of King County located within each zone are listed in Figure 2. The purpose of crisis response zones is to promote access to crisis care centers by geographically distributing centers across King County. Crisis response zones do not restrict who can access crisis care centers. A person seeking services, or a first responder seeking to transport a person to receive services, can access a crisis care center in any zone.

¹ King County Ordinance 19572 [\[LINK\]](#)

² The proposed CCC Levy Implementation Plan was transmitted by the King County Executive to the King County Council on December 29, 2023 [\[LINK\]](#). The plan will go into effect after the Council votes to adopt it.

³ The King County Department of Community and Human Services' Behavioral Health and Recovery Division (BHRD) is responsible for managing and funding behavioral health services and programs for King County residents enrolled in Medicaid and other people with low incomes. BHRD also administers King County's publicly funded behavioral health crisis system, which is the primary source of care for people experiencing mental health or substance use crises. Approximately 70,000 County residents annually receive services through BHRD programs. BHRD primarily contracts with community behavioral health agencies to provide a full continuum of services. In some cases, like involuntary commitment services, BHRD-employed staff provide services directly.

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Figure 1: Map of Crisis Response Zones

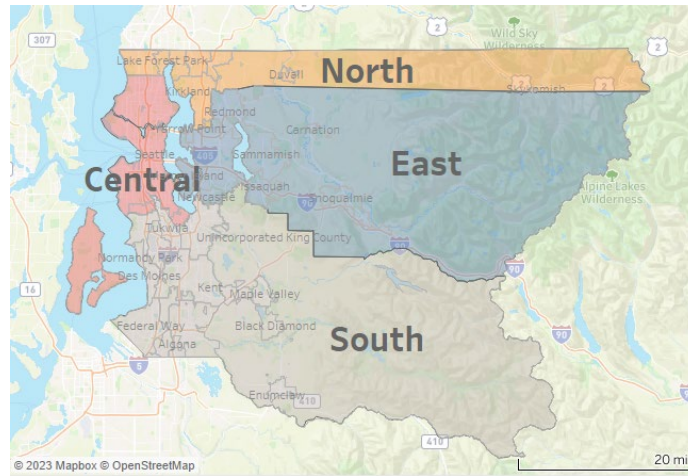


Figure 2. King County Local Jurisdictions Located Within Each Crisis Response Zone (CRZ)

Central CRZ	North CRZ	East CRZ	South CRZ
Seattle	Bothell	Beaux Arts	Algona
Unincorporated areas within King County Council District 2	Duvall	Bellevue	Auburn
Unincorporated areas within King County Council District 8	Kenmore	Carnation	Black Diamond
	Kirkland	Clyde Hill	Burien
	Lake Forest Park	Hunts Point	Covington
	Shoreline	Issaquah	Des Moines
	Skykomish	Medina	Enumclaw
	Woodinville	Mercer Island	Federal Way
	Unincorporated areas within King County Council District 3 that are north or northeast of Redmond	Newcastle	Kent
		North Bend	Maple Valley
		Redmond	Milton
		Sammamish	Normandy Park
		Snoqualmie	Pacific
		Yarrow Point	Renton
		Unincorporated areas within King County Council District 3 that are east or southeast of Redmond	SeaTac
		Unincorporated areas within King County Council District 6	Tukwila
			Unincorporated areas within King County Council District 5
			Unincorporated areas within King County Council District 7
			Unincorporated areas within King County Council District 9

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Data Interpretation Notes

In reading and interpreting the data in this brief, readers are asked to consider the following:

- **This data should be used with data from additional sources to assess the need for crisis services.** Since this data represents individuals who had an interaction with the BHRD crisis system in 2022, it omits people who were unable to access care, or may have had access to other services to avert a crisis. As a result, the number of crisis interactions indicate numbers of services provided but might not be reflective of crisis needs for certain groups or populations.
- **King County population** is the total estimate of King County residents in 2022, based on census data.
- **Crisis Program or Services Interactions (“Crisis Service Interactions”)** are defined as activities associated with programs or services along the behavioral health crisis continuum, including:

Crisis Service Interaction Type	Description of Crisis Programs
Regional Crisis Line Calls	Calls to the King County Regional Crisis Line (206-461-3222 or 1-866-427-4747), operated by Crisis Connections. Does not include calls to 988, Lifeline, or the Recovery Help Line. Data includes total calls answered plus calls abandoned. Number of calls by crisis response zones and number of people served are not available. Data source: Crisis Connections.
Designated Crisis Responder (DCR) Investigations	Designated Crisis Responders (DCRs) are mental health professionals who evaluate individuals (age 13 and older) in a behavioral health crisis, 24/7/365, for involuntary detention in psychiatric facilities, according to the Washington State Involuntary Treatment Act (ITA). Data include all crisis encounters where a DCR conducts an ITA investigation, regardless of whether the outcome is a detention.
Involuntary Psychiatric Hospitalization	As the result of an ITA investigation, an individual could be detained to psychiatric facilities if they meet conditions of detention (evidence of a behavioral health disorder, and evidence that the individual presents a likelihood of serious harm to self, others, property of others or is gravely disabled under the definition of the law). Data includes the total number of DCRs’ Investigations resulting in detention or revocation.
Next Day Appointments (NDAs)	Mental health providers reserve Next Day Appointment (NDA) slots, Monday-Friday, for referrals from Emergency Departments, DCRs, the Crisis Line and others, on behalf of adults (18 years and older) in a behavioral health crisis, who are not enrolled in outpatient services. Services include crisis intervention and stabilization and referral to ongoing care as appropriate. Data includes Mental Health Next Day Appointments (Substance Use Disorder NDAs began in 2023).
Mobile Crisis Team (MCT)	Mobile Crisis Teams (MCT) are teams of mental health clinicians who respond in-person, 24/7/365, in the field to assist adults (18 years and older) in mental health or substance use disorder crises. Referrals to MCTs come from police, fire, DCRs, or the Regional Crisis Line (if individuals are not enrolled in publicly funded behavioral health treatment). Data includes DESC’s Mobile Crisis Teams and South King County Mobile Crisis Teams programs.
Crisis Diversion Facility (CDF)	The Crisis Diversion Facility (CDF) is a 16-bed facility operated by DESC where individuals (18 years and older) in a behavioral health crisis can receive services, assessments, and case management for up to 72 hours. Referrals come from hospitals/emergency departments, police, fire, DCRs, and mobile crisis teams. CDF is located in Seattle, in the Central Crisis Response Zone.

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Crisis Service Interaction Type	Description of Crisis Programs
Children's Crisis Outreach Response System Outreach (CCORS)	The Children's Crisis Outreach Response System (CCORS) serves children/youth not already enrolled in outpatient system, and their families, when the functioning of the child and/or family is severely impacted due to emotional or behavioral problems. CCORS teams respond 24/7/365 and may provide ongoing stabilization services for up to eight weeks. Referrals may come from anyone and go through the Crisis Line. Data does not include CCORS Intensive Stabilization Services.
Crisis Intervention Service in an Outpatient Setting	Service encounters for crisis intervention services (CPT code H2011) in outpatient programs or settings, including Medicaid and MIDD-funded Mental Health Outpatient Benefits, Reaching Recovery, PACT, Standard Supportive Housing, and LINC.

- The number of crisis interactions do not represent the number of crisis events.⁴ The same crisis event may span several program and service interactions, since crisis care and stabilization may necessitate multiple facets of the system and multiple services.
- **Individuals Interacting with a Crisis Program or Service** are defined as anyone who has received services from one of the previously mentioned behavioral health crisis programs. The same individual could have multiple crises over a year or have multiple interactions with crisis programs and services. Additionally, the number of individuals interacting with a crisis program also do not represent the number of individuals experiencing a crisis.
- The number of crisis interactions and individuals associated with each crisis response zone are defined based on individuals' mailing addresses, and not based on where the crisis interactions happened.
- People experiencing homelessness or housing instability could have mailing zip codes associated with a shelter where they were staying, where a service took place, or other potential addresses. Available data are not able to distinguish what type of address is used in these cases.

⁴ **Crisis Events** are defined as an instance where an individual self-identifies that they are experiencing a mental health (MH) or substance use disorder (SUD) condition that is unmanageable or impairing functioning, and the individual is at risk of harming themselves (e.g., overdose, suicide) or others, or is experiencing a MH or SUD episode that necessitates emergency response. Crisis events may extend over multiple hours or days. They are not reported in this brief.

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King County Population

Data Highlights

- The largest zones, by square mileage, are the South and East zones. The Central and South zones have the largest total population. The Central zone has the highest population density.
- The distribution of different populations by race/ethnicity varies by crisis response zone:
 - The East zone has a higher concentration of Asian/Asian American residents.
 - The Central and South zones have a higher concentration of Black/ African / African American residents.
 - The South zone also has a higher concentration of Hispanic / Latina / Latino / Latinx residents.
 - The North zone has a higher concentration of White residents.
- The distribution of different populations by age varies by crisis response zone:
 - The Central zone has the highest concentration of adults aged 25 to 34 years old, but a lower concentration of youth (0-17 years old).
 - The East and South zones have the highest concentration of youth (0-17 years old). The East zone, however, has a lower concentration of young adults (18 – 24 years old).

Table 1: King County Population (2022 Estimate)

Crisis Response Zone	Central	East	North	South	Unknown	Total
Area (square miles)	133.53 (6%)	835.55 (39%)	279.57 (13%)	904.85 (42%)	N/A	2,153.49
Total population	799,150 (34%)	459,355 (20%)	271,885 (12%)	774,333 (33%)	15,320 (1%)	2,320,044
Population density (people/square miles)	5,985	550	973	856	N/A	1,078
Gender Identity⁵						
Female	49%	50%	50%	50%	52%	50%
Male	51%	50%	50%	50%	48%	50%

⁵ Gender Identity categories are only available in Female and Male, due to the limited data availability of census population and crisis response zone estimations.

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Crisis Response Zone	Central	East	North	South	Unknown	Total
Exclusive Race/Ethnicity⁶						
American Indian / Alaska Native	<0.5%	<0.5%	<0.5%	1%	1%	1%
Asian / Asian American	18%	34%	16%	18%	27%	21%
Black / African / African American	8%	2%	3%	10%	9%	7%
Hispanic / Latina / Latino / Latinx	11%	7%	10%	14%	16%	11%
Multiple Races	7%	5%	6%	7%	8%	6%
Native Hawaiian / Pacific Islander	<0.5%	<0.5%	<0.5%	2%	1%	1%
White	56%	51%	64%	48%	38%	53%
Age Groups (years)						
0-17	15%	24%	21%	23%	13%	20%
18-24	10%	5%	7%	8%	49%	8%
25-34	23%	16%	15%	15%	14%	18%
35-44	17%	17%	16%	15%	7%	16%
45-54	11%	13%	14%	14%	5%	13%
55-64	11%	11%	13%	11%	4%	11%
65+	14%	14%	15%	14%	7%	14%

Data Notes – Table 1

Percentages are calculated down (by crisis response zone). Total percentages may not sum up to 100 due to rounding.

Data Source: King County population estimates are provided using the combination of:

- The Population Interim Estimates model developed by the Seattle-King County Public Health - Assessment, Policy Development and Evaluation (APDE) Unit. This model combines population estimates from the Office of Financial Management (OFM) with Census 2020 PL 94-171 data.
- The localscape parcel data for crisis response zones developed by the King County Geographic Information System team.

⁶ Race and Ethnicity categories are exclusive, meaning each King County resident is only represented in one group. Individuals who identify with more than one Race and Ethnicity category are grouped into "Multiple Races." Individuals identify as Middle Eastern and North African are likely included in the White category.

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Crisis Program or Service Interactions

Data Highlights

- This data represents the number(s) of times when an individual accessed a King County crisis service or program. The data represented here do not represent unique crisis events. The same crisis event may span several program and service interactions since crisis care and stabilization may necessitate multiple facets of the system and multiple services.
- The Regional Crisis Line has the highest number of interactions, followed by Designated Crisis Responders (DCRs) investigation. The Regional Crisis Line is one of the most accessible programs, while DCR investigations for ITA are on the more restrictive end of programs.

Table 2: Crisis Program or Service Interactions by Crisis Response Zone (2022)

Crisis Response Zone ⁷	Central	East	North	South	Out of KC/WA	Unknown	Total
Regional Crisis Line Call Volume	NA	NA	NA	NA	NA	NA	96,993
Designated Crisis Responder Investigations	4,690 (52%)	651 (7%)	463 (5%)	2,156 (24%)	730 (8%)	363 (4%)	9,053 (100%)
Involuntary Psychiatric Hospitalization	2,493 (51%)	369 (8%)	272 (6%)	1,153 (23%)	449 (9%)	182 (4%)	4,918 (101%)
Next Day Appointments	357 (46%)	66 (8%)	58 (7%)	281 (36%)	20 (3%)	2 (0%)	784 (100%)
Mobile Crisis Team Encounters	1,863 (75%)	121 (5%)	77 (3%)	361 (14%)	75 (3%)	1 (0%)	2,498 (100%)
Crisis Diversion Facility Stay	807 (73%)	31 (3%)	33 (3%)	168 (15%)	66 (6%)	5 (0%)	1,110 (100%)
Children's Crisis Outreach Response System Outreach	249 (31%)	143 (18%)	80 (10%)	299 (38%)	24 (3%)	0 (0%)	795 (100%)
Crisis Intervention Service in an Outpatient Setting	3,347 (52%)	405 (6%)	670 (10%)	1,767 (28%)	229 (4%)	0 (0%)	6,418 (100%)
Total Program or Service Interactions (excluding crisis calls)	13,806 (54%)	1,786 (7%)	1,653 (6%)	6,185 (24%)	1,593 (6%)	553 (2%)	25,576 (99%)

Data Notes – Table 2

Percentages calculated across (by program type). Total percentages may not sum up to 100 due to rounding. For NDA, MCT, CCORS, and CDF, we count unique authorizations in King County Behavioral Health Data System with at least one service encounter, with the first encounter being in 2022.

Data Source: King County Behavioral Health Data System, unless otherwise noted.

⁷ Crisis response zones assigned based on individuals' mailing addresses, not where services are provided.

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Individuals Interacting with a Crisis Program or Service

Data Highlights

- The number of individuals interacting with a crisis program do not represent the number of crisis events or crisis interactions. The same individual could have multiple crises over a year or have multiple interactions with crisis programs and services. The number(s) below are de-duplicated individuals within each program or service.
- There were 10,278 individuals who received at least one service provided by the King County crisis system in 2022, excluding the Regional Crisis Call Line. Around 60 percent of them had at least one ITA investigation conducted by DCRs.
- Half of individuals interacting with the King County Crisis System had addresses in the Central zone, especially for DCR investigations and MCT. While this number is disproportionately greater than the concentration of the King County population in the Central zone, there are some caveats in the interpretation of this data. People experiencing homelessness may have mailing zip codes associated with shelters where they are living or where their crisis assessment took place.
- The Crisis Diversion Facility (CDF) is located in Seattle. Most of the individuals received services from CDF also have mailing addresses in the Central zone.
- Eight percent of individuals interacting with King County Crisis System had addresses outside of King County.

Table 3: Individuals Interacting with Crisis Programs or Services (2022)

Crisis Response Zone	Central	East	North	South	Out of KC/WA	Unknown	Total
Designated Crisis Responder Investigations	49%	7%	6%	23%	10%	5%	6,057 (100%)
Involuntary Psychiatric Hospitalization	48%	8%	6%	23%	11%	5%	3,747 (100%)
Next Day Appointments	45%	8%	7%	36%	3%	0%	780 (100%)
Mobile Crisis Team Encounters	74%	4%	3%	15%	4%	0%	1,920 (100%)
Crisis Diversion Facility Stay	73%	3%	2%	14%	7%	0%	809 (100%)
Children’s Crisis Outreach Response System Outreach	31%	17%	10%	38%	3%	0%	750 (100%)
Crisis Intervention Service in an Outpatient Setting	49%	7%	8%	32%	4%	0%	2,149 (100%)
Unique individuals interacting with a crisis program	5,218 (51%)	782 (8%)	620 (6%)	2,546 (25%)	785 (8%)	327 (3%)	10,278 (101%)

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Data Notes – Table 3

Percentages calculated across (by program type). Total percentages may not sum up to 100 due to rounding. The total number of individuals in each program is greater than the de-duplicated number of unique individuals across programs because individuals may have had an interaction with more than one service or program. Crisis response zones assigned based on individuals' mailing addresses, not where services are provided. This table excludes crisis calls.

Data Source: King County Behavioral Health Data System, unless otherwise noted.

Demographics of Individuals Interacting with Crisis Systems

Data Highlights

- This data presents the demographics of individuals who have interacted with the current crisis system in 2022. Accordingly, disparities in populations interacting with the crisis system may be reflective of unaddressed need or disparities in access to care.
- Residents aged 17 or younger were 10% of individuals receiving BHRD crisis services in 2022. This number is disproportionately smaller when compared to the King County population at large (20%).
- Individuals identifying as Black / African / African American represented 20% of individuals receiving BHRD crisis services in 2022. This number is relatively higher when compared to the King County population. The representation of the Black / African / African American community in King County can vary, ranging from 7% when considering only those who identify as Black / African / African American as their sole race/ethnicity, to 13% if an individual who identifies as Black/African American was counted as multi-racial in county-wide population estimates.
- Individuals identifying as Asian/Asian American represented 9% of individuals receiving BHRD crisis services in 2022. This is relatively lower when compared to the King County population (21%).

Table 4: Demographics of Individuals Interacting with Crisis Programs or Services (2022)

Crisis Response Zone	Central	East	North	South	Out of KC/WA	Unknown	Total
Gender Identity⁸							
Female	41%	46%	53%	47%	45%	39%	44%
Intersex	<0.5%	1%	<0.5%	1%	<0.5%	<0.5%	1%
Male	56%	50%	44%	50%	52%	58%	53%
Transgender	2%	2%	1%	2%	3%	2%	2%
Unknown / Refused to Answer	<0.5%	1%	1%	<0.5%	<0.5	1%	<0.5%

⁸ The available options may not sufficiently represent how individuals self-identify and do not include an option for individuals who do not identify as one of the options listed, such as non-binary or gender non-conforming individuals. Note that the number of individuals who identify as transgender may be undercounted since individuals may self-identify as 'male' or 'female' irrespective of sex assigned at birth.

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Crisis Response Zone	Central	East	North	South	Out of KC/WA	Unknown	Total
Race/Ethnicity – Inclusive⁹							
American Indian / Alaska Native	5%	2%	3%	5%	4%	3%	4%
Asian / Asian American	8%	13%	8%	10%	6%	5%	9%
Black / African / African American	23%	12%	11%	22%	16%	12%	20%
Hispanic / Latina / Latino / Latinx	9%	9%	11%	13%	8%	10%	10%
Middle Eastern	<0.5%	1%	1%	<0.5%	<0.5%	1%	1%
Native Hawaiian / Pacific Islander	2%	1%	1%	2%	2%	1%	2%
White	57%	63%	72%	54%	65%	49%	58%
Unknown / Not Reported	6%	8%	4%	5%	8%	25%	8%
A Race Not Listed	7%	8%	8%	13%	6%	5%	8%
Age Groups (years)							
0-17	6%	19%	15%	14%	5%	2%	10%
18-24	12%	14%	13%	16%	15%	13%	13%
25-34	25%	21%	22%	23%	31%	28%	25%
35-44	23%	16%	16%	18%	19%	16%	20%
45-54	14%	11%	11%	12%	11%	13%	13%
55-64	12%	9%	12%	10%	10%	9%	11%
65+	8%	9%	9%	7%	9%	7%	8%
Unknown	<0.5%	<0.5%	<0.5%	<0.5%	<0.5%	11%	<0.5%
Unique individuals interacting with a crisis program	5,218 (51%)	782 (8%)	620 (6%)	2,546 (25%)	785 (8%)	327 (3%)	10,278 (101%)

⁹ The total percentage may sum to greater than 100, as individuals who identify with more than one race or ethnicity are counted in every option selected, avoiding undercounting identities or creating an artificial "multi-racial" category. While race and Hispanic ethnicity are collected separately, we display them as one field given that most individuals in the King County Behavioral Health Data System who identify as Hispanic have unknown race data. These categories group detailed "Ethnicity" and "Hispanic Origin" responses.

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Data Notes – Table 4

Percentages calculated down (by crisis response zone). Total percentages may not sum up to 100 due to rounding. King County Behavioral Health system demographic data is self-reported but entered into the system by service providers. The response options available are standardized and determined by the Washington State Health Care Authority. If providers do not have or do not collect information, it appears as "Unknown." Crisis response zones assigned based on individuals' mailing addresses, not where services are provided. This table excludes crisis calls.

Data Source: King County Behavioral Health system, unless otherwise noted.

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