

CITY OF SEATTLE

RESOLUTION 32085

A RESOLUTION supporting King County’s Crisis Care Centers Levy and urging Seattle voters to vote “Yes” on the passage of this levy on the April 25, 2023, special election ballot.

WHEREAS, the Behavioral Health and Recovery Division (BHRD) within King County’s Department of Community and Human Services (DCHS) manages public behavioral health services in King County, including Medicaid-funded services provided through the King County Integrated Care Network, the state-funded Behavioral Health Administrative Services Organization, and programs funded with revenue from the Mental Illness and Drug Dependency sales tax; and

WHEREAS, King County’s behavioral health crisis system relies heavily on phone support and outreach services, with very few options of places for persons to go to for immediate, life-saving care when in crisis; and

WHEREAS, as of September 2022, the Crisis Solutions Center, operated by Downtown Emergency Service Center and requiring mobile team, first responder, or hospital referral for entry, is the only voluntary behavioral health crisis facility for the entirety of King County, and no walk-in urgent care facility exists in King County; and

WHEREAS, a coalition of community leaders and behavioral health providers issued recommendations to Seattle and King County in an October 13, 2021 letter that included recommendations to “expand places for people in crisis to receive immediate support” and “expand crisis response and post-crisis follow up services”; and

WHEREAS, call volume to King County’s regional behavioral health crisis line increased by 25 percent between 2019 and 2021, from 82,523 calls in 2019 to 102,754 calls in 2021; and

1 WHEREAS, the number of persons per year who received community-based behavioral health
2 crisis response services in King County increased 146 percent between 2012 and 2021,
3 from 1,764 persons served in 2012 to 4,336 persons served in 2021; and

4 WHEREAS, referrals for mobile crisis outreach in King County grew 15 percent between 2019
5 and 2021, from 4,030 referrals in 2019 to 4,648 in 2021, and responsive to this need the
6 Council added \$1 million in ongoing City funding in 2021 to support a mobile crisis team
7 of mental health and substance use disorder professionals; and

8 WHEREAS, King County’s designated crisis responders conducted 14 percent more
9 investigations for involuntary behavioral health treatment in 2021, when they
10 investigated 9,189 cases, than in 2017 when they investigated 8,066 cases. There was a
11 ten percent increase in detentions or revocations for involuntary hospitalization during
12 that same period, from 4,387 in 2017 to 4,806 in 2021; and

13 WHEREAS, the wait time for a King County resident in behavioral crisis in a community setting
14 to be evaluated for involuntary behavioral health treatment tripled between January 2019
15 and June 2022, from four days to 12 days; and

16 WHEREAS, the U.S. Department of Health and Human Services reported that in August 2022,
17 the first full month that the new national 988 Suicide and Crisis Lifeline was operational,
18 the overall volume of calls, texts, and chats to the Lifeline increased by 152,000 contacts,
19 or 45 percent, compared to the number of contacts to the National Suicide Prevention
20 Lifeline in August 2021; and

21 WHEREAS, the federal Substance Abuse and Mental Health Services Administration’s
22 (SAMHSA’s) National Guidelines for Behavioral Health Crisis Care, and its vision for
23 the implementation of the new national 988 Suicide and Crisis Lifeline, call for the

1 development of safe places for persons in crisis to go for help as part of a robust
2 behavioral health crisis system; and

3 WHEREAS, in 2021, the Washington State Legislature passed Engrossed Second Substitute
4 House Bill 1477, which became Chapter 302, Laws of Washington 2021, to support
5 implementation of 988 in Washington, to further SAMHSA’s overall vision and build on
6 the crisis phone line change by expanding and transforming crisis services; and

7 WHEREAS, Revised Code of Washington (RCW) 71.24.025 defines crisis stabilization services
8 to mean services such as 23-hour crisis stabilization units based on the living room
9 model, crisis stabilization centers, short-term respite facilities, peer-operated respite
10 services, and behavioral health urgent care walk-in centers, including within the overall
11 crisis system components that operate like hospital emergency departments and accept all
12 walk-ins, and ambulance, fire, and police drop-offs. Chapter 302, Laws of Washington
13 2021 further expressed the state legislature’s intent to expand the behavioral health crisis
14 delivery system to include these components; and

15 WHEREAS, multiple behavioral health system needs assessments have identified the addition of
16 crisis facilities as top priorities to improve community-based crisis services in King
17 County. Such assessments include the 2016 recommendations of the Community
18 Alternatives to Boarding Task Force called for by Motion 14225, a Washington State
19 Office of Financial Management behavioral health capital funding prioritization and
20 feasibility study in 2018, and a Washington State Health Care Authority crisis triage and
21 stabilization capacity and gaps report in 2019; and

22 WHEREAS, King County is losing mental health residential treatment capacity that is essential
23 for persons who need more intensive supports to live safely in the community due to

1 rising operating costs and aging facilities that need repair or replacement. As of August
2 2022, King County had a total of 244 mental health residential beds for the entire county,
3 down 111 beds, or nearly one third, from the capacity in 2018 of 355 beds; and

4 WHEREAS, as of July 2022, King County residents who need mental health residential services
5 must wait an average of 44 days before they are able to be placed in a residential facility;
6 and

7 WHEREAS, data from the U.S. Centers for Disease Control and Prevention, the U.S. Census
8 Bureau and the Kaiser Family Foundation show that about three in ten adults in the
9 United States reported symptoms of anxiety or depressive disorder in June 2022, up from
10 one in ten adults who reported these symptoms in 2019; and

11 WHEREAS, the National Council for Mental Wellbeing's 2022 access to care survey found that
12 43 percent of U.S. adults who say they need mental health or substance use care did not
13 receive that care, and they face numerous barriers to accessing and receiving needed
14 treatment; and

15 WHEREAS, according to the Washington State Department of Social and Health Services, the
16 number of Medicaid enrollees in King County with an identified mental health need
17 increased by approximately 34 percent for adults and nine percent for youth between
18 2019 and 2021; and

19 WHEREAS, Seattle Public Schools and the students who attend these schools have identified
20 significant unmet need for mental health care for youth; and

21 WHEREAS, Seattle is a hub of regional mass transit thus generally more accessible by youth
22 than other locations within King County; and

1 WHEREAS, the Washington State Department of Social and Health Services reports that in
2 2021, among those enrolled in Medicaid in King County, nearly half of adults and over a
3 third of youth with an identified mental health need did not receive treatment; and

4 WHEREAS, SAMHSA’s National Guidelines for Behavioral Health Crisis Care recommend
5 including peers with lived experience of mental health conditions or substance use
6 disorders on crisis response teams. Those guidelines also feature the living room model
7 as an example of crisis service delivery innovation featuring peers; and

8 WHEREAS, the 2021 King County nonprofit wage and benefits survey showed that many
9 nonprofit employees delivering critical services earn wages at levels that make it difficult
10 to sustain a career doing community-based work in this region; and

11 WHEREAS, a 2021 King County survey of member organizations of the King County Integrated
12 Care Network found that job vacancies at these community behavioral health agencies
13 were at least double what they were in 2019. Providers cited professionals’ ability to earn
14 more in medical systems or private practice, and the high cost of living in the King
15 County region, as the top reasons their workers were leaving community behavioral
16 health care; and

17 WHEREAS, on January 31, 2023, the King County Council passed Ordinance 2022-0399,
18 concerning funding for mental health and substance use disorder services and providing
19 for the submission of a property tax levy (the “Crisis Care Centers Levy”) in excess of
20 the levy limitation contained in chapter 84.55 RCW; and

21 WHEREAS, if approved, Crisis Care Centers Levy proceeds would fund regional behavioral
22 health services and capital facilities, including the establishment and operation of a
23 regional network of behavioral health crisis care centers; the preservation, expansion, and

1 maintenance of residential treatment facilities; the provision of behavioral health
2 workforce supports, mobile crisis care, and post-discharge stabilization; and the
3 administration, coordination, implementation, and evaluation of levy activities; and

4 WHEREAS, investments made with Crisis Care Centers Levy proceeds will positively affect the
5 lives of Seattle residents who have been impacted by the limited availability of walk-in
6 crisis care and stabilization support and of community-based residential treatment for
7 people with mental health needs, and the investments will both create incentives for the
8 retention of community-based health care providers in their current positions and grow
9 the pipeline for this workforce through apprenticeships, access to training and education,
10 and wrap-around supports; and

11 WHEREAS, after notice in accordance with RCW 42.17A.555 and Seattle Municipal Code
12 Section 2.04.300, persons in favor of the Crisis Care Centers Levy and those opposed to
13 it have been given an equal opportunity to share their views in an open public meeting;

14 NOW, THEREFORE,

15 **BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF SEATTLE, THE**
16 **MAYOR CONCURRING, THAT:**

17 Section 1. The Mayor and Seattle City Council support King County’s Crisis Care
18 Centers Levy and urge Seattle voters to vote “Yes” on its passage in the April 25, 2023 special
19 election.

20 Section 2. The Mayor and Seattle City Council support the location in Seattle of a future
21 crisis care center, funded by King County’s Crisis Care Levy, that will serve youth younger than
22 19.

