

City of Redmond

15670 NE 85th Street Redmond, WA

Memorandum

Date: 10/21/2025 Meeting of : Committee of the Whole - Pu	ublic Safety and Human S	Services	File No. CM 25-554 Type: Committee Memo			
TO: Committee of the Whole - Public Safe FROM: Mayor Angela Birney DEPARTMENT DIRECTOR CONTACT(S):	ety and Human Services					
Planning and Community Development	Carol Helland 425		425-556-2107			
Police	Chief Lowe 42		125-556-2529			
Fire	Chief Sheppard	4	125-556-2201			
DEPARTMENT STAFF:			_			
	Seraphie Allen	Deputy Dire	ector			
Planning and Community Development	Brooke Buckingham	Human Serv	vices Manager			
Planning and Community Development	Tisza Rutherford	Program Ad	dministrator			
Police	Brian Coats	Deputy Dire	ector			
Fire	Jim Whitney	Deputy Dire	Deputy Director			
Fire	Diana Powell	Program Coordinator				
TITLE: 2025 Thrive Update DVERVIEW STATEMENT: Staff from the City's Homeless Outreach Program and Mobile Integrated Health (MIH) Program will provide an overview of their recent activities and accomplishments, as well as highlight the newly launched Thrive Dashboard. Redmond Police Department will share a brief update on the status of the Mental Health Professional position and Alternative Response programming. Since the last report, the THRIVE team has continued developing and implementing the Community Health Program to strengthen coordination, referrals, and service delivery. Based on time constraints, this will be a brief update, and we will come back with a year-end THRIVE report in the first or second quarter of 2026. Additional Background Information/Description of Proposal Attached						
REQUESTED ACTION:						
☑ Receive Information	☐ Provide Direction	☐ Appr	rove			
REQUEST RATIONALE:						
Relevant Plans/Policies:						

Community Strategic Plan

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 Required: N/A Council Request: N/A Other Key Facts: Thrive partners will provide regular in 	nformational u	pdates to keep (Council informed.
OUTCOMES: The City's Thrive Program brings together pucrisis response, and support services, further			
COMMUNITY/STAKEHOLDER OUTREACH AN	ID INVOLVEME	<u>:NT</u> :	
 Timeline (previous or planned): N/A Outreach Methods and Results: N/A Feedback Summary: N/A 			
BUDGET IMPACT:			
Total Cost: N/A			
Approved in current biennial budget:	⊠ Yes	□ No	□ N/A
Budget Offer Number: The individual programs that comprise the Th	hrive program f	fall under their r	espective budgets.
Budget Priority : Vibrant and Connected, Safe and Resilient			
Other budget impacts or additional costs: <i>If yes, explain</i> : N/A	☐ Yes	□ No	⊠ N/A
Funding source(s): N/A			
Budget/Funding Constraints: N/A			
☐ Additional budget details attached			

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COUNCIL REVIEW:

Previous Contact(s)

Date	Meeting	Requested Action
	Item has not been presented to Council	N/A

Proposed Upcoming Contact(s)

Date	Meeting	Requested Action
N/A	None proposed at this time	N/A

Time Constraints:

N/A

ANTICIPATED RESULT IF NOT APPROVED:

N/A

ATTACHMENTS:

None