

Washington State Department of Corrections

Working Together for Safer Communities

PL - EE Solitary Confinement

2025-27 BUDGET

Point of Contact:
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AGENCY REC SUM TEXT

The Department of Corrections (DOC) has initiated the Solitary Confinement Transformation Project at three of its seven facilities with Restrictive Housing. The DOC requests funding to expand this project to the remaining facilities. The goal is to reduce the use of solitary confinement in Washington State Prisons by 90% over five years and to sustain those reductions into the future by implementing the recommendations outlined in the Solitary Confinement Transformation Project (SCTP) comprehensive plan, as prepared by agency staff, consultants, expert advisors, and advocates.

FISCAL DETAILS

Operating Expenditures	FY2026	FY2027	FY2028	FY2029
Fund 001-1	\$2,947,000	\$2,979,000	\$3,045,000	\$3,072,000
Total Expenditures	\$2,947,000	\$2,979,000	\$3,045,000	\$3,072,000
Biennium Totals	\$5,926,000		\$6,117,000	
Staffing	FY2026	FY2027	FY2028	FY2029
FTEs	14.0	14.0	14.1	14.1
Average Annual	14.0		14.1	
Object of Expenditure	FY2026	FY2027	FY2028	FY2029
OBJ A	\$1,131,000	\$1,172,000	\$1,213,000	\$1,213,000
OBJ B	\$411,000	\$418,000	\$426,000	\$426,000
OBJ C	\$1,016,000	\$1,040,000	\$1,065,000	\$1,092,000
OBJ E	\$111,000	\$98,000	\$98,000	\$98,000
OBJ G	\$35,000	\$41,000	\$41,000	\$41,000
OBJ J	\$64,000	\$25,000	\$11,000	\$11,000
OBJ T	\$179,000	\$185,000	\$191,000	\$191,000

MISSION To improve public safety by positively changing lives | **VISION** Working together for safer communities



OUR COMMITMENT

To operate a safe and humane corrections system and partner with others to transform lives for a better Washington.

GOALS

Safe and Humane Communities | EDIR Culture | Healthy and Engaged Workforce | Successful Transitions

PACKAGE DESCRIPTION

Solitary Confinement is measured and defined as an operational status or condition in restrictive housing. Restrictive housing is a housing assignment to enhanced security buildings with single-occupancy cells to separate individuals from general population because the presence of those individuals in solitary confinement is deemed to present an imminent danger to self, others, or facility security where the individual is confined to a single-occupancy cell for more than 20 hours a day without meaningful human contact, out-of-cell activities, or opportunities to congregate. Experiences of incarcerated individuals in solitary confinement units often include minimal contact with others, reduced access to natural light, limited artificial lighting, minimal access to programming, classes, reading materials, or radio and television, and restrictions on visits from friends and family. Each individual needs to be escorted individually by two custody officers and given recreational and programming time in a solitary area to maintain safety for both the officer and individual.

On January 1, 2023, the Department held 13,467 people in custody.¹ On the same date, 687 individuals, 5.1% of the prison population, were housed under solitary confinement conditions in Administrative Segregation Units, IMUs, and high-security mental health units.²

The potential risks of solitary confinement are well-known, with particularly pronounced potential for harm to specific vulnerable populations. In 2021, the Vera Institute of Justice released a comprehensive and integrated *Evidence Brief*³ describing the potential negative impacts of solitary confinement. These include physical damage and the development of health problems, and potential consequences for mental health and general well-being. Solitary confinement is associated with increased risk for self-directed violence and suicide, and social deprivation can lead to slowed brain activity and neurological damage. Additionally, solitary confinement disproportionately affects incarcerated people who are Black, Indigenous and People of Color (BIPOC), Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, and Others (LGBTQ+) populations, those living with mental illness, and those with disabilities. Moreover, group-level research consistently shows that solitary confinement as a tool does not decrease institutional misconduct or violence, including assaults on staff, nor does it decrease the risk of recidivism; in fact, it may increase that risk in certain cases.

In response to these risks, the department initiated the Solitary Confinement Transformation Project (SCTP) which included a partnership between agency staff, consultants, expert advisors, and advocates to conduct a thorough discovery, assessment, analysis, and program planning effort with the goal of reducing solitary confinement by 90 percent over the next five years. This report was released on October 18, 2023.

If the SCTP comprehensive plan is funded, DOC will operate a model that not only comes into compliance with current standards but exceeds any documented standards, such as those promulgated by the American

¹ Agency Fact Card for December 2022.

² Data Request received from Connor Saxe, Research and Data Analytics, Washington State Department of Corrections, 8/23/2023.

³ James, K. & Vanko, E. (2021). The impacts of solitary confinement. Evidence Brief. Retrieved 7/25/2023 from: <https://www.vera.org/publications/the-impacts-of-solitary-confinement>.

Correctional Association or the United Nations Standard Minimum Rules for the Treatment of Prisoners (i.e., the Nelson Mandela Rules). Washington State will set a new precedent for correctional practice that prioritizes safety of staff, rehabilitation of its incarcerated population, and responsibly takes its place among the most humane correctional systems in the world. Secretary Strange and DOC leadership are focused squarely on doing so, while not compromising staff safety. The safety of everyone who works and lives in institutions is a mandatory standard for prison operations and a precondition for the welfare and development of both staff and incarcerated individuals. This means that enhancing staff safety, wellness, training, and career opportunities, worthwhile for its own sake, is required so that staff may play their key roles in achieving humane standards and opening opportunities for the incarcerated. Systemwide interventions must be contingent upon sufficient levels of staffing, including officers, supervisors, mental health professionals, medical professionals, program staff, and administrative staff. A “one size fits all” solution is neither fair nor effective for a diverse set of individuals with complex needs who are separated from others for various reasons, presenting a mixture of risks and needs. Prioritizing staff safety also means affording correctional officers the ability to use all tools legally at their disposal but requiring solitary confinement to be used only in documented exigent circumstances. Addressing the use of solitary confinement as a practice; reducing the length of stay in solitary confinement; changing conditions of confinement for those who must remain in restrictive housing; and returning people to general population who are less likely to engage in disruptive behaviors, are all critical efforts towards safe and humane prison operations that rely less on solitary confinement.

This plan incorporates more than a decade of work by the DOC to reduce reliance on solitary confinement, building on the foundation of engagement by collaborators from local groups like Disability Rights Washington, Office of the Corrections Ombuds, and the American Civil Liberties Union of Washington, along with the University of Washington, the University of California, the Vera Institute of Justice, and other national experts. The results of that work to date include advancements in correctional practices relative to other state Departments of Correction, including eradication of disciplinary detention, opening of residential alternatives to solitary confinement for those with serious mental illness, and elimination of total isolation conditions for those who engage in infractions within restrictive housing settings. Current resources, including custody staff, facilitators and mental health staff, are stretched beyond capacity. All available physical plant locations are also being utilized to their full potential.

Solution

The Department of Corrections (DOC) requests funding to reduce the use of solitary confinement in Washington State Prisons by 90% over five years and to sustain those reductions into the future by:

- Increasing correctional, mental health, and program staffing and related training;
 - Expanding risk-reducing, out-of-cell programming;
 - Increasing options and alternatives to placement in solitary confinement conditions;
 - Increasing step-down units for gradual re-entry back into general population; and
 - Increasing meaningful and congregate opportunities for out-of-cell time through operational changes and a series of capital project feasibility studies.
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The proposed requirements, as set forth in the SCTP plan, will have an impact on the year-over-year prevalence of solitary confinement conditions while safely and humanely managing those in custody. As such, this plan assumes an iterative approach to implementation, adjusting resource needs and allocations in response to declining numbers of individuals incarcerated in solitary confinement.

Program Management & Governance

The DOC works closely with external program management and change management experts from Integrated Solutions Group (ISG) to establish overarching governance for the plan that would be measured and monitored via a customized version of the Prosci Project Change Triangle Model for evaluating the health of the project and creating action plans for moving the project forward. ISG will support project management, stakeholder needs and impact assessments, change management planning, stakeholder engagements, change communications, training, and key performance indicator tracking efforts.

ISG and Falcon Inc.'s (Falcon) subject matter experts (SMEs) will continue to support the Organizational Change Management strategy, providing experienced perspectives, eliciting critical material from DOC's own subject matter experts, and informing a plan that facilitates sustained change. Additional contract funds will be necessary to provide:

- Project Management: Coordinating, tracking, and scheduling activities as well as develop an initial program toolkit with an initial plan.
- Stakeholder Engagement: Support continued internal and external stakeholder engagement as well as triaging requirements and plan adaption. ISG and Falcon will also support legislative, budget, and capital workshops on the plan.
- Organization Change Strategy and Execution: Lead change workshops with both internal and external stakeholders, engagement of site change plan development with DOC leadership, identify and standup the agency's change network, and finalize the vision, values, and KPI governance.

Procedures and Programs

This includes Enhance Programming, Improve Bedspace Alignment, Incident Response & RH Alternatives, Clinical Alternatives to AdSeg, Incentive-Based IMU Programs, Forensic Assessment Team, and Confidential Contracts.

Enhance Programming

For a minimum of four (4) hours out-of-cell for every incarcerated person, the quality of out-of-cell time is at least as important as the number of hours. Funding is requested for manualized programs and associated training; required supplemental staffing; necessary equipment and technology (i.e., chairs, tables, tablets, computers); alignment of policy and procedure to the enhanced programming model; and to develop capital projects that create the physical spaces needed for program delivery. To implement the evidence-based programming, additional staff are required, including Correctional Specialist 2 as program facilitators, and Correctional Specialist 3 as supervisors. Additional administrative and quality assurance support will also be provided to coordinate schedules and track data. Assumptions include specific groups being co-facilitated, such as those in the IMU, and group size will not exceed ten (10) incarcerated individuals. Staffing increases will be phased and coordinated with requirements for correctional officers and capital projects over the 5-year period.

Falcon has already collaborated with the manufacturers of Moral Reconciliation Therapy (MRT), Breaking Free from Substance Abuse (tablet-based), and the University of Cincinnati Corrections Institute's Cognitive Behavioral Interventions (UCCI-CBI). Additionally, Stand-Alone Skills Training from Dialectical Behavior Therapy (DBT) and SAMHSA's Anger Management for Substance Use Disorder and Mental Health Clients have been proposed, budgeted, staffed, and expected to supplement the existing programming. Falcon will continue to support the implementation of these evidence-based and evidence-informed practices as they roll out in general population and in restrictive housing.

Improve Bedspace Alignment

The DOC has taken important steps in the right direction to improve this alignment through the Best Bed Project, and this project is required to continue to regularly realign supply and demand at various classification levels. Contract funding is requested to support additional subject matter expertise and organizational change management strategy, providing experienced perspectives, eliciting critical material from DOC's own subject matter experts, and informing a plan that facilitates sustained change.

Incident Response & RH Alternatives

To reach the 90% benchmark, the DOC will review existing and eligible infractions for placement in Administrative Segregation and disposition to the IMU, develop training and oversight of facility Crisis Intervention Teams (CIT), and formalizing rapid reviews of those who are placed in Administrative Segregation. Resources required to accomplish these requirements include training staff at the headquarters level for crisis intervention teams, additional hearing officers and special investigative services staff to increase efficiency toward disposition, and quality assurance staff for data collection and tracking. Contract funding is requested for subject matter expertise and advisory consultation by experts who have developed and implemented these programs.

Clinical Alternatives to Administrative Segregation (AdSeg)

Individuals who are identified as having a Serious Mental Illness (SMI) will not be placed in solitary confinement conditions unless specifically ordered by a healthcare professional as the least restrictive means of addressing imminent risk (i.e., Close Observation Areas (COA), Inpatient Units, etc.) and alternatives to solitary confinement will be utilized for this population. Expanding access to care requires additional staff, and in concert with further development of the Patient Centered Medical Home model, this need must be revisited regularly during implementation. In this model, mental health staffing expands along with access to medical services, specifically Medications for Opioid Use Disorder (MOUD). Contract funding is requested for subject matter experts to support, coach, and develop this care model in partnership with DOC leaders.

WCCW Solitary Reduction

Contract funding is requested to assign a gender-responsive subject matter expert will to understand the complex needs of incarcerated women living with serious mental illness and create a gender-responsive approach to reductions in solitary confinement at WCCW.

Incentive-based IMU programs

Individuals in IMUs will have access to evidence-based programming, inside and outside of the cell. These programs will be taken into consideration during individualized assessments and reviews that inform privileges and movement toward less restrictive settings, as well the opportunity to step down in the intensity of mechanical restraints used. Contract funding is requested for subject matter expertise and advisory consultation, providing experienced perspectives, eliciting critical material from the DOC's own subject matter experts, and informing a plan that facilitates sustained change.

Confidential Clinical Contracts

Funding is requested for clinical supervision and management of clinical processes and encounters. Contract funding is requested for advisory consultation by national subject matter experts familiar with best practices and innovative approaches to increasing the availability of clinical services in settings of confinement.

Staff Development

Increase Correctional Officers and Support Staffing

To meet the requirements for additional time out-of-cell, including for recreation, programming, and increased availability of confidential interviews, additional correctional officers are required for escorts and supervision of incarcerated individuals. The DOC will require a phased increase in staffing of Corrections & Custody Officer 2 and Corrections & Custody Officer 3 positions, along with administrative support for that level of onboarding

and management. Additionally, consideration was given to training backfill at each facility, given the demands of routine training and the expanded training requirements associated with this plan. Phasing of the plan implicates successful funding and implementation of other requirements, such as capital projects making additional recreation and programming spaces available, and the phasing of staffing will map on to those inter-dependent requirements.

Funding is requested for the addition of Correctional Officers and supervisors to support additional time-out-of-cell, escort to appointments, and provide escort and supervision during additional recreation time. Additionally, DOC positions requested include hearing officers, investigators, and counselors, all focused on improving the efficiency of case dispositions.

Contract funding is requested for subject matter expertise around training and best practices, providing solutions for a diverse set of individuals that are disproportionately affected such as BIPOC, LGBTQ+, those with mental illness, and/or disabilities, presenting a mixture of risks and needs along with organizational change management, providing experienced perspectives, eliciting critical material from the DOC’s own subject matter experts, and informing a plan that facilitates sustained change.

As the department achieves and sustains a 90% reduction in the use of solitary confinement, the agency assumes an indetermined reduction to the restrictive housing population as a result of initiatives to reduce the placement of individuals, specifically for those of populations that have been historically disproportionately affected, into restrictive housing settings, and expand alternative and step-down housing options. The department is committed to evaluating this population reduction over time and any corresponding staffing reductions will be captured in future supplemental budget adjustments.

ASSUMPTIONS AND CALCULATIONS

The below table provided more detail of the Staff Development:

Staffing Development Phase-in Per Facility*									
Job Class Title	Range	Step	FTE	Salary	Benefits	Ongoing Costs*	One-Time Costs**	Total	
CORRECTIONS & CUSTODY OFFICER 2 - TEAMSTERS	48	M	7.8	\$ 644,709	\$ 257,244	\$ 82,260	\$ 50,695	\$ 1,034,908	
OFFICE ASSISTANT 3 - TEAMSTERS	36	M	1.0	\$ 61,439	\$ 24,994	\$ 10,546	\$ 6,499	\$ 103,478	
INVESTIGATOR 3 - TEAMSTERS	62	M	1.0	\$ 116,725	\$ 34,298	\$ 10,546	\$ 6,499	\$ 168,069	
PSYCHOLOGY ASSOCIATE- TEAMSTERS	66	M	2.0	\$ 257,837	\$ 86,182	\$ 23,180	\$ 14,300	\$ 381,499	
CORRECTIONS & CUSTODY OFFICER 2 - TEAMSTERS - OVERTIME	48	M	0.4	\$ 49,593	\$ 8,345			\$ 57,938	
Indirect Support Costs			1.7					\$ 178,753	
			Total	12.2	1,130,303	411,063	126,532	77,994	1,924,645

*Exact needs per facility may vary,

**Total ongoing costs include staff training, office supplies, durable goods, leased personal computers (including one (1) monitor), travel, IT equipment and software.

***Total one-time costs include workstation and chair.

Indirect Costs

The DOC requests funding for the indirect costs of agency administration, which includes 1.7 FTEs and \$179,000 in FY2026, 1.8 FTEs and \$184,000 in FY2027, and ongoing, for the purpose of supporting Payroll, Human Resources, Information Technology, and other expenses associated with the hiring and employment of staff to implement this legislation. The approved agency indirect rate and associated cost of administration are calculated based on the salaries and benefits of staff conducting back office administrative functions, divided by all remaining salaries and benefits.

For more detail on these Assumptions and Calculations, please see attachment: PL-EE Solitary Confinement – Assumptions and Calculations

HISTORICAL FUNDING

Available funding for this current program in the 2025-27 biennium is:

FY2026

- *FTE = 39.1 FTE*
- *Total Funds = \$8,125,000*
- *New General Fund = \$2.947 million*

FY2027

- *FTE = 39.1 FTE*
- *Total Funds = \$8,125,000*
- *New General Fund = \$2.979 million*

STRATEGIC AND PERFORMANCE OUTCOMES

This request aligns with the following Results Washington Goals and Outcome Measures:

- **Increasing Access to Living Wage Jobs**
 - Education – In 2013, the median weekly earnings of U.S. workers with a high school diploma was \$179 more than those without a high school diploma. The median weekly earnings of workers with a bachelor’s degree were \$457 more than those with a high school diploma. Workers with a professional degree had the highest median weekly earnings.
 - Training, education, and apprenticeships in high-wage fields – The state’s community and technical colleges have worked to increase the number of STEM degrees awarded. Since 2012, STEM degrees awarded have grown by 55 percent. Gov. Inslee launched Career Connect Washington to increase apprenticeships and other career-
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connected learning opportunities to give students real-world experience with specific employers, career tracks, or industries. Data from existing apprenticeship programs show that nine months after leaving college, 94 percent of students who finished apprenticeship programs in 2014-15 were employed, with a median wage of \$34 per hour.

- Employment – Securing employment is an important step, and work experience is positively linked to wages.
- Electrify transportation system - Transportation contributes 43% of overall carbon emissions in the state. By increasing the number of electric vehicles, ferries, and buses, we can dramatically decrease our carbon emissions.
- Improve building efficiency - Retrofitting old buildings and updating standards for the new ones is one of the most cost-effective ways to improve our state's carbon footprint.
- Reduce state government emissions - The state government is committed to reducing our carbon emissions. To make that happen, we have established robust targets and are working to do our part to reverse climate change.

- **Healthy and Safe Communities**

- Supporting Successful Reentry

- Housing & Essential Needs: Currently 8.5 percent of adults released are self-reporting as homeless. In addition to housing, access to food and other basic needs is necessary for stability during reentry.
 - Healthcare & Treatment: Proper healthcare for physical and mental health needs is necessary for stability post-release.
 - Education: Increasing an individual's educational attainment is a leading indicator for successful reentry and reduced recidivism.
 - Employment: Currently 40 percent of eligible individuals are employed within six months of release. Research has found that the stigma associated with incarceration is a major barrier to employment.
 - Social Connections: Families, friends, and mentors can be important sources of support during incarceration and the transition back into the community.

- Increasing Access to Living Wage Jobs

- Preventing Substance Abuse and Improving Recovery

- Prevention programs – Research shows that prevention programs involving families, schools, communities, and the media are effective for preventing or reducing drug use and addiction. When young people perceive drugs as harmful, they tend to decrease their drug use.
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- Identification of need – Tools to screen and test for substance abuse and related behaviors are important to providing appropriate and timely interventions.
 - Medical care and behavioral therapy – Research shows that combining addiction treatment medicines with behavioral therapy results in the best chance of success for most individuals.
 - Taking Action to End the Opioid Crisis
 - Preventing substance use disorder.
 - Expanding access to effective treatment and recovery support.
 - Saving people’s lives by reversing overdoses.
 - Shaping policy and program development using data & evidence.
 - Improving Behavioral Health
 - Prevention - Keeping children and teens healthy and safe while reducing the costs of substance abuse to communities is our highest priority. Our prevention and intervention goals are to delay and prevent the misuse of alcohol, tobacco, and other drugs, reduce the negative consequences of substance use, and prevent and reduce alcohol and other drug dependency.
 - Treatment:
 - Substance use disorder - Patterns of substance use can cause or aggravate various issues. This includes problems at school, mental health-related issues, family stress, and poor peer relationships. By reducing the instances of youth substance use we can also reduce the likelihood of these long-term negative impacts.
 - Mental Health - Mental health is important to overall health. Mental disorders are chronic health conditions that can impact someone throughout their life. Early diagnosis and treatment are key to understanding how to treat the disorders and reduce the impact on home, school, and forming friendships.
 - Recovery options - Recovery is defined by the Substance Abuse and Mental Health Services Administration (SAMHSA) as "a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential." With effective treatments and support services, people can and do recover from addiction and mental health disorders.
 - Reducing Homelessness
 - Housing affordability – A growing mismatch exists between housing costs and household income. Fifty-one percent of renters statewide have become “cost-burdened,” spending more than 30 percent of household income on housing.
 - Shortage of affordable housing – By 2019, more than 780,000 households are projected to earn less than 50 percent of the Area Median Income with only about 442,000 housing units affordable at that income level. This creates a shortfall of nearly 338,000 housing units, which is a 43 percent gap.
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- Behavioral health support – More than 3,000 individuals were considered chronically homeless in the 2017 point-in-time count. Chronically homeless is defined as having a physical disability, which in most cases is a severe and persistent mental illness, and experiencing homelessness for a minimum time.
 - **Efficient, Effective, and Accountable Government**
 - Increasing Employee Engagement
 - Relationships - Humans want to feel respected and connected at work. In 2017, 86 percent of the state's employee survey respondents reported that their supervisor treats them with dignity and respect.
 - Autonomy – Employees desire freedom and discretion in their jobs. In 2017, 62 percent of the state's employee survey respondents reported that they have the opportunity to give input on decisions affecting their work.
 - Mastery – People expect to learn new skills and develop expertise at work. In 2017, 63 percent of the state's employee survey respondents reported that they have opportunities at work to learn and grow.
 - Purpose – Meaningful work contributes to a person's sense of purpose. In 2017, 82 percent of the state's employee survey respondents reported that they know how their work contributes to the goals of their agency. Miya Cruz from the Department of Corrections shares how a sense of purpose makes her work meaningful.

This request supports the following goals, objectives, approaches/strategies, and outcome measures in DOCs 2023-25 Strategic Plan:

- **Safe and Humane Systems**
 - Cultivate a human-centered approach to our work that delivers on trauma-informed practices, safe, fair, and humane living and working conditions, and supports a culture that reduces risk and increases positive opportunities for both justice-involved individuals and staff.
 - **EDIR Culture**
 - Eliminate disparities by implementing our pro-equity, anti-racism framework, and reinforcing a culture where every person is welcomed and feels they belong.
 - **Healthy and Engaged Workforce**
 - Foster a supportive work environment that promotes wellness and combats corrections fatigue.
 - **Successful Transitions**
 - Provide personalized support to justice-involved individuals, including the knowledge, skills, and abilities to successfully reenter their communities and thrive as better neighbors.
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By committing to these strategic goals, the Department of Corrections will achieve our ultimate goal of Correctional Excellence.

Other Collateral Connections

As identified in the attachment: **PL-EE Solitary Confinement Stakeholder Impact Statement**, this decision package responds to the DOC's Solitary Confinement Transformation Plan to reduce the use of solitary confinement in Washington State Prisons by 90% over five years.

IT ADDENDUM

Does this decision package include funding for any IT-related costs, including hardware, software, services (including cloud-based services), contracts or IT staff?

Yes No
