
SENATE BILL 5135

State of Washington

68th Legislature

2023 Regular Session

By Senator C. Wilson

Prefiled 01/04/23.

1 AN ACT Relating to solitary confinement; amending RCW 72.09.015;
2 adding new sections to chapter 72.09 RCW; creating new sections;
3 providing an effective date; and providing expiration dates.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** This act may be known and cited as the
6 solitary confinement restriction act.

7 NEW SECTION. **Sec. 2.** The legislature finds that almost 600
8 adults continue to be held in solitary confinement in state
9 correctional facilities. Solitary confinement has been shown to
10 create significant and lasting psychological impacts. Therefore, the
11 legislature finds that the use of solitary confinement in state
12 correctional facilities should be restricted to ensure the safe and
13 humane operation of these facilities, consistent with the state and
14 federal Constitutions, the laws and public policies of this state,
15 the mission of the correctional system, evolving medical knowledge,
16 and international human rights standards. The standards established
17 in this act apply to all incarcerated persons in the custody of the
18 department of corrections.

19 The legislature also finds that people are held in similar
20 conditions in other facilities, including those operated by private

1 contractors for longer term detention. Due to the damage caused by
2 solitary confinement over long periods, these facilities present
3 similar risks to the safety and welfare of Washingtonians and
4 solitary confinement within such facilities should be similarly
5 restricted.

6 The legislature further finds that solitary confinement is
7 occurring in local jails, and that additional data is needed in order
8 to accurately assess the use of solitary confinement in these
9 settings and what reforms may be needed in the future.

10 **Sec. 3.** RCW 72.09.015 and 2022 c 254 s 2 are each amended to
11 read as follows:

12 The definitions in this section apply throughout this chapter.

13 (1) "Adult basic education" means education or instruction
14 designed to achieve general competence of skills in reading, writing,
15 and oral communication, including English as a second language and
16 preparation and testing services for obtaining a high school diploma
17 or a high school equivalency certificate as provided in RCW
18 28B.50.536.

19 (2) "Base level of correctional services" means the minimum level
20 of field services the department of corrections is required by
21 statute to provide for the supervision and monitoring of offenders.

22 (3) "Civil judgment for assault" means a civil judgment for
23 monetary damages awarded to a correctional officer or department
24 employee entered by a court of competent jurisdiction against an
25 inmate that is based on, or arises from, injury to the correctional
26 officer or department employee caused by the inmate while the
27 correctional officer or department employee was acting in the course
28 and scope of his or her employment.

29 (4) "Community custody" has the same meaning as that provided in
30 RCW 9.94A.030 and also includes community placement and community
31 supervision as defined in RCW 9.94B.020.

32 (5) "Contraband" means any object or communication the secretary
33 determines shall not be allowed to be: (a) Brought into; (b)
34 possessed while on the grounds of; or (c) sent from any institution
35 under the control of the secretary.

36 (6) "Correctional facility" means a facility or institution
37 operated directly or by contract by the secretary for the purposes of
38 incarcerating adults in total or partial confinement, as defined in
39 RCW 9.94A.030.

1 (7) "County" means a county or combination of counties.
2 (8) "Department" means the department of corrections.
3 (9) "Earned early release" means earned release as authorized by
4 RCW 9.94A.729.
5 (10) "Evidence-based" means a program or practice that has had
6 multiple-site random controlled trials across heterogeneous
7 populations demonstrating that the program or practice is effective
8 in reducing recidivism for the population.
9 (11) "Extended family visit" means an authorized visit between an
10 inmate and a member of his or her immediate family that occurs in a
11 private visiting unit located at the correctional facility where the
12 inmate is confined.
13 (12) "Good conduct" means compliance with department rules and
14 policies.
15 (13) "Good performance" means successful completion of a program
16 required by the department, including an education, work, or other
17 program.
18 (14) "Immediate family" means the inmate's children,
19 stepchildren, grandchildren, great grandchildren, parents,
20 stepparents, grandparents, great grandparents, siblings, aunts,
21 uncles, and a person legally married to or in a state registered
22 domestic partnership with an inmate. "Immediate family" includes the
23 immediate family of an inmate who was adopted as a child or an adult,
24 but does not include an inmate adopted by another inmate.
25 (15) "Indigent inmate," "indigent," and "indigency" mean an
26 inmate who has less than a \$25 balance of disposable income in his or
27 her institutional account on the day a request is made to utilize
28 funds and during the 30 days previous to the request.
29 (16) "Individual reentry plan" means the plan to prepare an
30 offender for release into the community. It should be developed
31 collaboratively between the department and the offender and based on
32 an assessment of the offender using a standardized and comprehensive
33 tool to identify the offender's risks and needs. The individual
34 reentry plan describes actions that should occur to prepare
35 individual offenders for release from prison or jail, specifies the
36 supervision and services they will experience in the community, and
37 describes an offender's eventual discharge to aftercare upon
38 successful completion of supervision. An individual reentry plan is
39 updated throughout the period of an offender's incarceration and
40 supervision to be relevant to the offender's current needs and risks.

1 (17) "Inmate" (~~means~~) and "incarcerated person" mean a person
2 committed to the custody of the department, including but not limited
3 to persons residing in a correctional institution or facility and
4 persons released from such facility on furlough, work release, or
5 community custody, and persons received from another state, state
6 agency, county, federally recognized tribe, or federal jurisdiction.

7 (18) "Labor" means the period of time before a birth during which
8 contractions are of sufficient frequency, intensity, and duration to
9 bring about effacement and progressive dilation of the cervix.

10 (19) "Physical restraint" means the use of any bodily force or
11 physical intervention to control an offender or limit an offender's
12 freedom of movement in a way that does not involve a mechanical
13 restraint. Physical restraint does not include momentary periods of
14 minimal physical restriction by direct person-to-person contact,
15 without the aid of mechanical restraint, accomplished with limited
16 force and designed to:

17 (a) Prevent an offender from completing an act that would result
18 in potential bodily harm to self or others or damage property;

19 (b) Remove a disruptive offender who is unwilling to leave the
20 area voluntarily; or

21 (c) Guide an offender from one location to another.

22 (20) "Postpartum recovery" means (a) the entire period a woman or
23 youth is in the hospital, birthing center, or clinic after giving
24 birth and (b) an additional time period, if any, a treating physician
25 determines is necessary for healing after the woman or youth leaves
26 the hospital, birthing center, or clinic.

27 (21) "Privilege" means any goods or services, education or work
28 programs, or earned early release days, the receipt of which are
29 directly linked to an inmate's (a) good conduct; and (b) good
30 performance. Privileges do not include any goods or services the
31 department is required to provide under the state or federal
32 Constitution or under state or federal law.

33 (22) "Promising practice" means a practice that presents, based
34 on preliminary information, potential for becoming a research-based
35 or consensus-based practice.

36 (23) "Research-based" means a program or practice that has some
37 research demonstrating effectiveness, but that does not yet meet the
38 standard of evidence-based practices.

39 (24) "Restraints" means anything used to control the movement of
40 a person's body or limbs and includes:

1 (a) Physical restraint; or

2 (b) Mechanical device including but not limited to: Metal
3 handcuffs, plastic ties, ankle restraints, leather cuffs, other
4 hospital-type restraints, tasers, or batons.

5 (25) "Secretary" means the secretary of corrections or his or her
6 designee.

7 (26) "Significant expansion" includes any expansion into a new
8 product line or service to the class I business that results from an
9 increase in benefits provided by the department, including a decrease
10 in labor costs, rent, or utility rates (for water, sewer,
11 electricity, and disposal), an increase in work program space, tax
12 advantages, or other overhead costs.

13 (27) (a) "Superintendent" means the superintendent of a
14 correctional facility under the jurisdiction of the Washington state
15 department of corrections, or his or her designee.

16 (b) For purposes of sections 4 through 9 of this act, the
17 superintendent's designee may only be the secretary, the deputy
18 secretary, the chief of staff, or the assistant secretary of the
19 prisons division.

20 (28) "Transportation" means the conveying, by any means, of an
21 incarcerated pregnant woman or youth from the correctional facility
22 to another location from the moment she leaves the correctional
23 facility to the time of arrival at the other location, and includes
24 the escorting of the pregnant incarcerated woman or youth from the
25 correctional facility to a transport vehicle and from the vehicle to
26 the other location.

27 (29) "Unfair competition" means any net competitive advantage
28 that a business may acquire as a result of a correctional industries
29 contract, including labor costs, rent, tax advantages, utility rates
30 (water, sewer, electricity, and disposal), and other overhead costs.
31 To determine net competitive advantage, the department of corrections
32 shall review and quantify any expenses unique to operating a for-
33 profit business inside a prison.

34 (30) "Vocational training" or "vocational education" means
35 "vocational education" as defined in RCW 72.62.020.

36 (31) "Washington business" means an in-state manufacturer or
37 service provider subject to chapter 82.04 RCW existing on June 10,
38 2004.

39 (32) "Work programs" means all classes of correctional industries
40 jobs authorized under RCW 72.09.100.

1 (33) "Qualified medical provider" means a physician, physician
2 assistant, advanced registered nurse practitioner, clinical nurse
3 specialist, or other comparably credentialed employee or contractor
4 employed to provide health care, or for mental health evaluations or
5 decisions, a state licensed psychiatrist or psychologist, a
6 registered nurse, or other comparably credentialed employee or
7 contractor employed to provide mental health care.

8 (34) "Less restrictive intervention" means a placement or
9 conditions of confinement, or both, in the current or an alternative
10 correctional facility or detention facility, under conditions less
11 restrictive of an incarcerated or detained person's movement,
12 privileges, activities, or social interactions than solitary
13 confinement.

14 (35) "Solitary confinement" means the confinement of an
15 incarcerated person or detained person alone in a cell or similarly
16 confined holding or living space for 20 hours or more per day under
17 circumstances other than a partial or facility-wide lockdown.

18 (36) "Vulnerable person" means any incarcerated person or
19 detained person who:

20 (a) Has a mental disorder, as defined in RCW 71.05.020, or where
21 there is evidence of a diagnosis of a serious mental illness, a
22 history of psychiatric hospitalization, or a history of disruptive or
23 self-injurious behavior including, but not limited to, serious and/or
24 repeated self-harm, that may be the result of a mental disorder or
25 condition;

26 (b) Has a developmental disability, as defined in RCW 71A.10.020;

27 (c) Has a serious medical condition that cannot effectively be
28 treated in solitary confinement;

29 (d) Is pregnant, in the postpartum period, or has recently
30 suffered a miscarriage or terminated a pregnancy;

31 (e) Has needs related to a physical disability that cannot be
32 accommodated in solitary confinement;

33 (f) Has a significant auditory or visual impairment; or

34 (g) Has a record of dementia, traumatic brain injury, or other
35 cognitive condition that makes the person more vulnerable to the
36 harms of isolation.

37 (37) "Long-term private detention facility" and "detention
38 facility" mean a private detention facility as defined in RCW
39 70.395.020 where individuals may be confined for time periods greater
40 than one year.

1 (38) "Detained person" means a person confined in a long-term
2 private detention facility.

3 NEW SECTION. Sec. 4. A new section is added to chapter 72.09
4 RCW to read as follows:

5 RESTRICTIONS ON SOLITARY CONFINEMENT. An incarcerated or detained
6 person may not be placed in solitary confinement except when
7 necessary for emergency purposes in section 5 of this act, medical
8 isolation in section 6 of this act, or when the incarcerated or
9 detained person voluntarily requests such confinement conditions in
10 section 7 of this act.

11 NEW SECTION. Sec. 5. A new section is added to chapter 72.09
12 RCW to read as follows:

13 (1) SOLITARY CONFINEMENT FOR EMERGENCY PURPOSES. An incarcerated
14 or detained person may be placed in solitary confinement for
15 emergency purposes if: The person has not been determined to be a
16 vulnerable person; the superintendent of the correctional facility or
17 the person in charge of the detention facility finds that there is
18 reasonable cause to believe that the solitary confinement is
19 necessary to reduce or protect against a substantial risk of
20 immediate serious harm to the person or another person, as evidenced
21 by recent threats or conduct; and the superintendent of the
22 correctional facility or the person in charge of the detention
23 facility finds that a less restrictive intervention would
24 insufficiently reduce this risk.

25 (2) INITIAL MEDICAL EVALUATION. (a)(i) Except as provided in
26 (a)(ii) of this subsection, a qualified medical provider shall
27 conduct a personal and comprehensive medical and mental health
28 examination of the incarcerated or detained person within 24 hours of
29 the person being placed in solitary confinement under this section.

30 (ii) A person who has been involved in an altercation or use of
31 force must be examined by a qualified medical provider prior to being
32 placed in solitary confinement.

33 (b) The comprehensive medical and mental health examination must
34 include an assessment as to whether the person is a vulnerable person
35 and whether the person's age or circumstance makes them particularly
36 vulnerable to the harm of isolation, such that the person should be
37 considered a vulnerable person. The examining qualified medical
38 provider shall immediately report to the superintendent of the

1 correctional facility or the person in charge of the detention
2 facility if he or she makes any finding indicating that the person is
3 vulnerable or that for any other reason continued placement in
4 solitary confinement would be a risk to the person's health.

5 (c) A report of the qualified medical provider's conclusions
6 based on the examination must be provided to the superintendent of
7 the correctional facility and the secretary, or, if the person is
8 detained in a detention facility, to the person in charge of the
9 facility, as soon as possible and no later than the next business
10 day.

11 (3) (a) 24-HOUR LIMIT. Except for extended solitary confinement as
12 provided in (b) of this subsection, a person may not be held in
13 solitary confinement for emergency purposes under this section for
14 more than 24 consecutive hours and for more than 72 cumulative hours
15 in any 30-day period.

16 (b) EXTENDED SOLITARY CONFINEMENT AND ONGOING REVIEW. An
17 incarcerated or detained person may not be placed in extended
18 solitary confinement for more than 15 consecutive days and for more
19 than 45 cumulative days during a single fiscal year. For a person in
20 extended solitary confinement:

21 (i) A qualified medical provider shall, every seven days, conduct
22 a mental health and physical health status examination of the person,
23 in a confidential setting outside of the cell unless doing so would
24 present a substantial threat to security or safety or the person
25 refuses to leave the cell. These examinations must be more frequent
26 if indicated by the person's documented clinical needs pertaining to
27 his or her identified health or health care concerns; and

28 (ii) The department or the detention facility shall provide the
29 incarcerated or detained person with timely, fair, and meaningful
30 opportunities to contest the extended solitary confinement,
31 including: An initial hearing within 72 hours of placement, unless
32 emergency circumstances require a continuance which may be up to an
33 additional 48 hours; the right to appear at the hearing; the right to
34 request assistance at the hearing by a lay advisor or other person of
35 the incarcerated or detained person's choosing, including but not
36 limited to other incarcerated or detained individuals when such
37 individuals do not present an individualized and specific risk if
38 permitted to participate, outside advocates, or retained counsel; an
39 independent hearing officer; a written statement of reasons for the

1 decision made at the hearing; and a written statement on how to
2 appeal a hearing determination.

3 (4) VULNERABLE PERSONS. If the incarcerated or detained person is
4 determined to be a vulnerable person during the initial examination
5 under subsection (2) of this section or any status examination under
6 subsection (3)(b) of this section, then the person must not be placed
7 in solitary confinement or must be removed from solitary confinement
8 and, if necessary, transferred to an appropriate residential
9 treatment unit, medical unit, or other appropriate or specialized
10 unit designated by the secretary or the person in charge of the
11 detention facility. If the person is identified as a vulnerable
12 person due to having a mental disorder or developmental disability,
13 as identified in RCW 72.09.015, the person may also be screened by a
14 qualified medical provider for transfer to the least restrictive
15 appropriate short-term care or psychiatric facility designated by the
16 department of social and health services and transferred to such
17 facility if the requirements in RCW 72.68.031 have been met.

18 NEW SECTION. **Sec. 6.** A new section is added to chapter 72.09
19 RCW to read as follows:

20 SOLITARY CONFINEMENT FOR MEDICAL ISOLATION. (1) An incarcerated
21 or detained person may be placed in solitary confinement for medical
22 isolation if the facility medical director determines, based on a
23 personal examination, that such confinement is necessary for medical
24 reasons, which may include, but are not limited to, responding to a
25 medical or mental health emergency, and no less restrictive
26 intervention is sufficient to protect health and safety. Conditions
27 of solitary confinement under this section must be the least
28 restrictive possible and must be in compliance with prevailing public
29 health guidance including, but not limited to, guidance from the
30 United States centers for disease control and prevention and the
31 Washington state department of health.

32 (2) For any person placed in solitary confinement under this
33 section, an in-person clinical assessment must be conducted at
34 clinically appropriate intervals as determined by a qualified medical
35 provider, provided such assessments occur no less frequently than
36 every 12 hours. A person in solitary confinement under this section
37 must be placed in a general population living unit, a residential
38 treatment unit, a close observation unit, or a medical unit
39 designated by the secretary, as deemed clinically appropriate by the

1 attending qualified medical provider in consultation with the
2 facility medical director.

3 (3) A person may not be placed in solitary confinement under this
4 section for more than 15 consecutive days and for more than 45
5 cumulative days during a single fiscal year, unless a qualified
6 medical provider determines that additional time is necessary: To
7 prevent the spread of a disease and continued medical isolation is
8 consistent with applicable United States centers for disease control
9 and prevention or Washington state department of health guidelines;
10 to facilitate the provision of medical treatment to the person; or
11 for some other clearly stated medical purpose. If additional time is
12 deemed necessary, the medical provider shall document specific
13 reasons why the isolation is required and why less restrictive
14 interventions are insufficient to accomplish the safety of
15 incarcerated or detained persons in the facility. Such notice must be
16 forwarded to the facility medical director and superintendent of the
17 correctional facility or person in charge of the detention facility
18 for consideration and final approval.

19 NEW SECTION. **Sec. 7.** A new section is added to chapter 72.09
20 RCW to read as follows:

21 VOLUNTARY SOLITARY CONFINEMENT. (1) An incarcerated or detained
22 person may be voluntarily placed in solitary confinement if: The
23 person has capacity to make an informed decision about placement in
24 solitary confinement; there is reasonable cause to believe that
25 solitary confinement is necessary to prevent reasonably foreseeable
26 harm; and the person voluntarily requests such confinement
27 conditions.

28 (2) A person may be placed in solitary confinement under this
29 section only if the person provides informed consent. Whenever
30 possible, a person's request for placement in solitary confinement
31 must be in the form of a written request. If an incarcerated or
32 detained person initiates an informed request for solitary
33 confinement under this section, the correctional or detention
34 facility must document the request and has the burden of establishing
35 a basis for refusing the request. The department or the detention
36 facility shall maintain a written record of any request provided
37 under this section. Prior to declining a request or removing a person
38 who previously requested solitary confinement under this section, the
39 department or the detention facility shall provide the incarcerated

1 or detained person with a timely, fair, and meaningful opportunity to
2 contest the decision. A person in solitary confinement under this
3 section may revoke his or her request to such confinement conditions,
4 in which case the correctional or detention facility must document
5 the request and the person must be transferred to a less restrictive
6 intervention or other appropriate setting within 15 days.

7 (3) LESS RESTRICTIVE INTERVENTION. The department or the
8 detention facility shall make a less restrictive intervention
9 available to any incarcerated or detained person requesting solitary
10 confinement who meets the standard under subsection (1) of this
11 section, which may include provision of accommodations in the general
12 population, a transfer to the general population of another
13 institution or to a unit designated for persons who face similar
14 threats, or other specialized housing, as appropriate. A transfer to
15 an out-of-state facility is not a less restrictive intervention under
16 this section unless such a transfer is requested by the incarcerated
17 or detained person. The department or the detention facility shall
18 notify the incarcerated or detained person of the available less
19 restrictive intervention when receiving any request under subsection
20 (1) of this section and shall formulate an individualized
21 intervention plan that addresses the support or services the person
22 may need to move to a less restrictive intervention.

23 (4) A person who has requested solitary confinement under this
24 section must be assessed by a qualified medical provider every 90
25 days. If the qualified medical provider finds that continued
26 placement in solitary confinement would be detrimental to the health
27 or well-being of the person, the person must be transferred to a less
28 restrictive intervention.

29 NEW SECTION. **Sec. 8.** A new section is added to chapter 72.09
30 RCW to read as follows:

31 CONDITIONS OF SOLITARY CONFINEMENT. (1) The department and long-
32 term private detention facilities shall maximize the amount of time
33 that any incarcerated or detained person held in solitary confinement
34 spends outside of the cell by providing outdoor and indoor
35 recreation, education, clinically appropriate treatment therapies,
36 and skill-building activities. Cells or other holding or living
37 spaces used for solitary confinement must be properly ventilated,
38 appropriately lit according to the time of day, temperature-

1 monitored, clean, and equipped with properly functioning sanitary
2 fixtures.

3 (2) The department and any long-term private detention facility
4 may not deny an incarcerated or detained person held in solitary
5 confinement access to food, water, or any other basic necessity, or
6 access to appropriate medical care, including emergency medical care.

7 (3) The department and any long-term private detention facility
8 may not deny an incarcerated or detained person held in solitary
9 confinement access to the telephone, personal communication or media
10 devices, reading materials, or personal hygiene items unless an
11 individualized assessment determines that limitation of such items is
12 directly necessary for the safety of the person or others. The
13 department and any long-term private detention facilities may use
14 restraints upon a person in solitary confinement to facilitate
15 movement or programming if an individualized assessment determines
16 such restraint is directly necessary for the safety of the
17 incarcerated or detained person or others.

18 (4) The department and any long-term private detention facility
19 may not directly release an incarcerated or detained person from
20 solitary confinement to the community, unless it is necessary for the
21 safety of the person, staff, other incarcerated or detained persons,
22 or the public, or in circumstances in which the person requires an
23 immediate release due to resentencing.

24 (5) The department and any long-term private detention facility
25 may not place an incarcerated or detained person in solitary
26 confinement based on the person's race, creed, color, national
27 origin, nationality, ancestry, age, marital status, domestic
28 partnership or civil union status, affectional or sexual orientation,
29 genetic information, pregnancy or breastfeeding status, sex, gender
30 identity or expression, disability, or atypical hereditary cellular
31 or blood trait.

32 NEW SECTION. **Sec. 9.** A new section is added to chapter 72.09
33 RCW to read as follows:

34 SOLITARY CONFINEMENT POLICIES AND PROCEDURES. (1) By April 1,
35 2024, the department and all long-term private detention facilities
36 shall review the status of each incarcerated or detained person in
37 solitary confinement. The department and detention facilities shall
38 develop a plan to transition those incarcerated or detained persons
39 to less restrictive interventions or other appropriate settings. Any

1 person who has been in solitary confinement for longer than 120 days
2 in the prior 12 months as of July 1, 2024, must have a trauma-
3 informed, culturally appropriate individualized intervention plan to
4 facilitate a transition to a less restrictive intervention, which may
5 include an evaluation for possible single cell placement, access to
6 and treatment by medical and mental health providers, peer supports,
7 substance abuse programming, restorative justice programming,
8 behavioral programming, or other individualized interventions or
9 accommodations.

10 (2) By January 1, 2024, the secretary shall adopt any rules or
11 policies necessary to implement sections 4 through 8 of this act,
12 including for the purposes of:

13 (a) Establishing less restrictive interventions to solitary
14 confinement, including means of separating or protecting incarcerated
15 persons without use of solitary confinement;

16 (b) Establishing that restrictions on religious, mail, and
17 telephone privileges, visit contacts, and outdoor and indoor
18 recreation may be imposed only after an individualized assessment
19 that determines restrictions are directly necessary for the safety of
20 the incarcerated person or others, and that there may not be
21 restrictions on access to food, basic necessities, or legal access;

22 (c) Requiring training of staff working with incarcerated persons
23 in solitary confinement and requiring that this training include:
24 Assistance from appropriate professionals to periodically train all
25 staff working with incarcerated persons in solitary confinement and
26 alternatives to such confinement; and the identification and response
27 to incarcerated persons in need of physical accommodations who have
28 been referred to solitary confinement;

29 (d) Requiring documentation of all decisions, procedures, and
30 reviews of incarcerated persons placed in solitary confinement;

31 (e) Requiring monitoring of compliance with all rules and
32 policies governing cells, units, and other places where incarcerated
33 persons are placed in solitary confinement;

34 (f) Establishing procedures for hearings under section 5(3)(b) of
35 this act; and

36 (g) Requiring posting on the official website of the department
37 monthly reports, beginning April 1, 2024, on the use of solitary
38 confinement, including: The rate of solitary confinement by category,
39 age, sex, gender identity, ethnicity, or incidence of a mental
40 disorder; the number of people released from solitary confinement

1 directly to the community; the mean and median period of solitary
2 confinement at each facility, including the population on the last
3 day of each quarter and a nonduplicative cumulative count of people
4 exposed to solitary confinement for each fiscal year; the incidence
5 of self-harm, suicide, and assault in any solitary confinement unit;
6 and the number of people held in medical isolation. Reports may not
7 include personally identifiable information regarding any
8 incarcerated person.

9 (3) Prior to April 1, 2024, long-term private detention
10 facilities must implement policies modeled off of the rules adopted
11 by the department under this section.

12 NEW SECTION. **Sec. 10.** (1) Beginning August 1, 2023, a governing
13 unit of a city or county operating one or more jails shall compile on
14 a monthly basis through July 31, 2024, the following information with
15 respect to each jail operated by the governing unit:

16 (a) The number of times solitary confinement was used;

17 (b) The circumstances leading to the use of solitary confinement;

18 and

19 (c) For each instance of solitary confinement:

20 (i) Whether the imposition of solitary confinement was the result
21 of a disciplinary segregation, administrative segregation, or
22 protective custody;

23 (ii) The length of time the individual remained in solitary
24 confinement;

25 (iii) Whether a supervisory review of the solitary confinement
26 occurred and was documented;

27 (iv) For disciplinary segregation, whether a due process hearing
28 was conducted and the results;

29 (v) Whether a medical assessment or review and a mental health
30 assessment or review were conducted and documented; and

31 (vi) Whether the affected person was afforded meaningful access
32 to education, programming, and ordinary necessities such as
33 medication, meals, and reading material during the term of solitary
34 confinement.

35 (2) Information collected under subsection (1) of this section
36 must be compiled into a monthly report and submitted to the
37 Washington association of sheriffs and police chiefs.

38 (3) For the purposes of this section, "solitary confinement"
39 means confinement of an incarcerated person alone in a cell or

1 similarly confined holding or living space for 20 hours or more per
2 day under circumstances other than a partial or facility-wide
3 lockdown.

4 (4) This section expires December 31, 2024.

5 NEW SECTION. **Sec. 11.** (1) Subject to the availability of
6 amounts appropriated for this specific purpose, the Washington
7 association of sheriffs and police chiefs shall collect, on a monthly
8 basis, the information submitted under section 10 of this act. The
9 collected information must be compiled into a report summarizing the
10 information by county and type of facility. An initial report must be
11 submitted, in compliance with RCW 43.01.036, to the governor and the
12 appropriate committees of the legislature by December 1, 2023. A
13 final report must be submitted, in compliance with RCW 43.01.036, to
14 the governor and the appropriate committees of the legislature by
15 December 1, 2024.

16 (2) This section expires December 31, 2024.

17 NEW SECTION. **Sec. 12.** (1) The department of corrections shall:

18 (a) Develop a staffing needs assessment, detailing the number of
19 personnel that will be needed to provide adequate security for all
20 incarcerated persons, correctional officers and other staff, and
21 outside visitors, when the restrictions on solitary confinement are
22 imposed under this act;

23 (b) Develop a corrections capital facilities master plan that
24 outlines the capital investments needed to accommodate the objectives
25 of this act, while providing for the health and safety of all
26 incarcerated persons, correctional officers and other staff, and
27 outside visitors, when the restrictions on solitary confinement are
28 imposed under this act;

29 (c) Provide a profile of currently incarcerated persons who are
30 or have been housed in restrictive housing during the 2023-2025
31 fiscal biennium, including information regarding their underlying
32 offenses and any sanctions imposed during their incarceration, and
33 the amount of time they have remaining in total confinement;

34 (d) Document any attempted suicides by individuals in restrictive
35 housing over the past ten years and the reason, if known; and

36 (e) Provide an inventory of currently incarcerated persons who
37 are or have been housed in restrictive housing and who have been

1 transferred or have been considered for transfer to an out-of-state
2 correctional facility.

3 (2) The department of corrections must compile the information
4 detailed in subsection (1) of this section into a report which must
5 be submitted, in compliance with RCW 43.01.036, to the governor and
6 the appropriate committees of the legislature by December 1, 2023.

7 (3) This section expires December 31, 2024.

8 NEW SECTION. **Sec. 13.** If any provision of this act or its
9 application to any person or circumstance is held invalid, the
10 remainder of the act or the application of the provision to other
11 persons or circumstances is not affected.

12 NEW SECTION. **Sec. 14.** The secretary of the department of
13 corrections may adopt rules to implement this act.

14 NEW SECTION. **Sec. 15.** Sections 1 through 8 of this act take
15 effect July 1, 2024.

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