
SUBSTITUTE HOUSE BILL 1756

State of Washington

67th Legislature

2022 Regular Session

By House Public Safety (originally sponsored by Representatives Peterson, Simmons, J. Johnson, Valdez, Bateman, Davis, Macri, Ramel, Santos, Senn, Thai, Pollet, Ormsby, Harris-Talley, and Frame)

READ FIRST TIME 01/25/22.

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 effective dates; 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.** (1) 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 devastating and lasting psychological impacts. Recent studies
11 have shown that persons placed in solitary confinement have higher
12 rates of medical concerns and a shorter life expectancy once released
13 to the community. Studies have also shown that persons released to
14 the community directly from solitary confinement have higher
15 recidivism rates. Further, solitary confinement is disproportionately
16 imposed upon Black, indigenous, and Hispanic people in state
17 correctional facilities.

18 (2) Therefore, the legislature finds that the use of solitary
19 confinement in state correctional facilities should be restricted to
20 ensure the safe and humane operation of these facilities, consistent

1 with the state and federal Constitutions, the laws and public
2 policies of this state, the mission of the correctional system,
3 evolving medical knowledge, and international human rights standards
4 that have recognized prolonged solitary confinement as torture.
5 Solitary confinement should only be used when necessary, and should
6 not be used against vulnerable populations or under conditions or for
7 time periods that foster psychological trauma, psychiatric disorders,
8 or serious, long-term damage to a person's brain. The standards
9 established in this act apply to all incarcerated persons in the
10 custody of the department of corrections.

11 **Sec. 3.** RCW 72.09.015 and 2020 c 319 s 2 are each amended to
12 read as follows:

13 The definitions in this section apply throughout this chapter.

14 (1) "Adult basic education" means education or instruction
15 designed to achieve general competence of skills in reading, writing,
16 and oral communication, including English as a second language and
17 preparation and testing services for obtaining a high school diploma
18 or a high school equivalency certificate as provided in RCW
19 28B.50.536.

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

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

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

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

37 (6) "Correctional facility" means a facility or institution
38 operated directly or by contract by the secretary for the purposes of

1 incarcerating adults in total or partial confinement, as defined in
2 RCW 9.94A.030.

3 (7) "County" means a county or combination of counties.

4 (8) "Department" means the department of corrections.

5 (9) "Earned early release" means earned release as authorized by
6 RCW 9.94A.729.

7 (10) "Evidence-based" means a program or practice that has had
8 multiple-site random controlled trials across heterogeneous
9 populations demonstrating that the program or practice is effective
10 in reducing recidivism for the population.

11 (11) "Extended family visit" means an authorized visit between an
12 inmate and a member of his or her immediate family that occurs in a
13 private visiting unit located at the correctional facility where the
14 inmate is confined.

15 (12) "Good conduct" means compliance with department rules and
16 policies.

17 (13) "Good performance" means successful completion of a program
18 required by the department, including an education, work, or other
19 program.

20 (14) "Immediate family" means the inmate's children,
21 stepchildren, grandchildren, great grandchildren, parents,
22 stepparents, grandparents, great grandparents, siblings, aunts,
23 uncles, and a person legally married to or in a state registered
24 domestic partnership with an inmate. "Immediate family" includes the
25 immediate family of an inmate who was adopted as a child or an adult,
26 but does not include an inmate adopted by another inmate.

27 (15) "Indigent inmate," "indigent," and "indigency" mean an
28 inmate who has less than a twenty-five dollar balance of disposable
29 income in his or her institutional account on the day a request is
30 made to utilize funds and during the thirty days previous to the
31 request.

32 (16) "Individual reentry plan" means the plan to prepare an
33 offender for release into the community. It should be developed
34 collaboratively between the department and the offender and based on
35 an assessment of the offender using a standardized and comprehensive
36 tool to identify the offender's risks and needs. The individual
37 reentry plan describes actions that should occur to prepare
38 individual offenders for release from prison or jail, specifies the
39 supervision and services they will experience in the community, and
40 describes an offender's eventual discharge to aftercare upon

1 successful completion of supervision. An individual reentry plan is
2 updated throughout the period of an offender's incarceration and
3 supervision to be relevant to the offender's current needs and risks.

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

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

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

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

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

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

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

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

36 (22) "Promising practice" means a practice that presents, based
37 on preliminary information, potential for becoming a research-based
38 or consensus-based practice.

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

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

6 (a) Physical restraint; or

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

10 (25) "Secretary" means the secretary of corrections or his or her
11 designee.

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

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

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

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

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

37 (31) "Washington business" means an in-state manufacturer or
38 service provider subject to chapter 82.04 RCW existing on June 10,
39 2004.

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

3 (33) "Qualified medical provider" means a physician, physician
4 assistant, advanced registered nurse practitioner, clinical nurse
5 specialist, or other comparably credentialed employee or contractor
6 employed to provide health care, or for mental health evaluations or
7 decisions, a state-licensed psychiatrist or psychologist, a
8 registered nurse with a specialty in psychiatric nursing, or other
9 comparably credentialed employee or contractor employed to provide
10 mental health care.

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

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

20 (36) "Vulnerable person" means any incarcerated person who:

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

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

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

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

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

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

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

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

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

6 NEW SECTION. **Sec. 5.** A new section is added to chapter 72.09
7 RCW to read as follows:

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

18 (2) INITIAL MEDICAL EVALUATION. A qualified medical provider
19 shall conduct a personal and comprehensive medical and mental health
20 examination of the incarcerated person prior to the incarcerated
21 person being placed in solitary confinement under this section,
22 unless there is reasonable cause to believe that such advance
23 evaluation would create a substantial threat to security or safety,
24 in which case the qualified medical provider shall conduct the
25 evaluation within one hour of the person being placed in solitary
26 confinement. The examination must include an assessment as to whether
27 the incarcerated person is a vulnerable person and whether the
28 person's age or circumstance makes them particularly vulnerable to
29 the harm of isolation, such that the person should be considered a
30 vulnerable person. A report of the evaluations must be immediately
31 provided to the superintendent and the secretary.

32 (3) (a) 24-HOUR LIMIT. Except for extended solitary confinement as
33 provided in (b) of this subsection, an incarcerated person may not be
34 held in solitary confinement for emergency purposes under this
35 section for more than 24 consecutive hours and for more than 72
36 cumulative hours in any 30-day period.

37 (b) EXTENDED SOLITARY CONFINEMENT AND ONGOING REVIEW. An
38 incarcerated person may not be placed in extended solitary
39 confinement for more than 15 consecutive days and for more than 45

1 cumulative days during a single fiscal year. For an incarcerated
2 person in extended solitary confinement:

3 (i) A qualified medical provider shall conduct a daily mental
4 health and physical health status examination of the incarcerated
5 person, in a confidential setting outside of the cell unless doing so
6 would present a substantial threat to security or safety; and

7 (ii) The department shall provide the incarcerated person with
8 timely, fair, and meaningful opportunities to contest the extended
9 solitary confinement, including: An initial hearing within 72 hours
10 of placement; the right to appear at the hearing; the right to
11 request assistance at the hearing by a lay advisor or other person of
12 the incarcerated person's choosing, including but not limited to
13 other incarcerated individuals, outside advocates, or retained
14 counsel; an independent hearing officer; a written statement of
15 reasons for the decision made at the hearing; and a written statement
16 on how to appeal a hearing determination.

17 (4) VULNERABLE PERSONS. If the incarcerated person is determined
18 to be a vulnerable person during the initial examination under
19 subsection (2) of this section or any status examination under
20 subsection (3)(b) of this section, then the incarcerated person must
21 be removed from solitary confinement and, if necessary, transferred
22 to an appropriate residential treatment unit, medical unit, or other
23 appropriate or specialized unit designated by the secretary. If the
24 incarcerated person is identified as a vulnerable person due to
25 having a mental disorder or developmental disability, as identified
26 in RCW 72.09.015, the incarcerated person may also be screened by a
27 qualified medical provider for transfer to the least restrictive
28 appropriate short-term care or psychiatric facility designated by the
29 department of social and health services pursuant to RCW 72.68.031.

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

32 SOLITARY CONFINEMENT FOR MEDICAL ISOLATION. (1) An incarcerated
33 person may be placed in solitary confinement for medical isolation if
34 a qualified medical provider determines, based on a personal
35 examination, that such confinement is necessary for medical reasons,
36 which may include, but are not limited to, responding to a medical or
37 mental health emergency or preventing the spread of a communicable
38 disease.

1 (2) For any incarcerated person placed in solitary confinement
2 under this section, an in-person clinical review must be conducted at
3 least every six hours and as clinically indicated. An incarcerated
4 person in solitary confinement under this section must be placed in a
5 residential treatment unit, a close observation unit, or a medical
6 unit, designated by the secretary.

7 (3) An incarcerated person may not be placed in solitary
8 confinement under this section for more than 15 consecutive days and
9 for more than 45 cumulative days during a single fiscal year, unless
10 a qualified medical provider determines that additional time is
11 necessary: To prevent the spread of a communicable disease; to
12 facilitate the provision of medical treatment to the incarcerated
13 person; or for some other clearly stated medical purpose. If
14 additional time is deemed necessary, the medical provider shall
15 document specific reasons why the isolation is required and why less
16 restrictive interventions are insufficient to accomplish the safety
17 of incarcerated persons in the facility. Such notice will be
18 forwarded to the facility superintendent for consideration and final
19 approval.

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

22 VOLUNTARY SOLITARY CONFINEMENT. (1) An incarcerated person may be
23 placed in solitary confinement if: The person is not a vulnerable
24 person; the person has capacity to make an informed decision about
25 placement in solitary confinement; there is reasonable cause to
26 believe that solitary confinement is necessary to prevent reasonably
27 foreseeable harm; and the incarcerated person voluntarily requests
28 such confinement conditions.

29 (2) An incarcerated person may be placed in solitary confinement
30 under this section only if the person provides informed, written
31 consent. If an incarcerated person initiates an informed, written
32 request for solitary confinement under this section, the correctional
33 facility has the burden of establishing a basis for refusing the
34 request. The department shall maintain a written record of any
35 request provided under this section. Prior to declining a request or
36 removing an incarcerated person who previously requested solitary
37 confinement under this section, the department shall provide the
38 incarcerated person with a timely, fair, and meaningful opportunity
39 to contest the decision. An incarcerated person in solitary

1 confinement under this section may revoke his or her request to such
2 confinement conditions by providing informed, written notice, in
3 which case the incarcerated person must be transferred to a less
4 restrictive intervention or other appropriate setting.

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

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

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

28 CONDITIONS OF SOLITARY CONFINEMENT. (1) The department shall
29 maximize the amount of time that an incarcerated person held in
30 solitary confinement spends outside of the cell by providing outdoor
31 and indoor recreation, education, clinically appropriate treatment
32 therapies, and skill-building activities. Cells or other holding or
33 living spaces used for solitary confinement must be properly
34 ventilated, appropriately lit according to the time of day,
35 temperature-monitored, clean, and equipped with properly functioning
36 sanitary fixtures.

37 (2) The department may not deny an incarcerated person held in
38 solitary confinement access to food, water, or any other basic

1 necessity, or access to appropriate medical care, including emergency
2 medical care.

3 (3) The department may not deny an incarcerated person held in
4 solitary confinement access to the telephone, personal communication
5 or media devices, reading materials, or personal hygiene items unless
6 an individualized assessment determines that limitation of such items
7 is directly necessary for the safety of the incarcerated person or
8 others. The department may use restraints upon an incarcerated person
9 in solitary confinement to facilitate movement or programming if an
10 individualized assessment determines such restraint is directly
11 necessary for the safety of the incarcerated person or others.

12 (4) The department may not directly release an incarcerated
13 person from solitary confinement to the community, unless it is
14 necessary for the safety of the incarcerated person, staff, other
15 incarcerated persons, or the public.

16 (5) The department may not place an incarcerated person in
17 solitary confinement based on the incarcerated person's race, creed,
18 color, national origin, nationality, ancestry, age, marital status,
19 domestic partnership or civil union status, affectional or sexual
20 orientation, genetic information, pregnancy or breastfeeding status,
21 sex, gender identity or expression, disability, or atypical
22 hereditary cellular or blood trait.

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

25 SOLITARY CONFINEMENT POLICIES AND PROCEDURES. (1) By January 1,
26 2023, the department shall review the status of each incarcerated
27 person in solitary confinement. The department shall develop a plan
28 to transition those incarcerated persons to less restrictive
29 interventions or other appropriate settings. Any incarcerated person
30 who has been in solitary confinement for longer than 45 days as of
31 July 1, 2023, must have a trauma-informed, culturally appropriate
32 individualized intervention plan to facilitate a transition to a less
33 restrictive intervention, which may include an evaluation for
34 possible single cell placement, access to and treatment by medical
35 and mental health providers, peer supports, substance abuse
36 programming, restorative justice programming, behavioral programming,
37 or other individualized interventions or accommodations.

1 (2) By January 1, 2023, the secretary shall adopt any rules or
2 policies necessary to implement sections 4 through 8 of this act,
3 including for the purposes of:

4 (a) Establishing less restrictive interventions to solitary
5 confinement, including means of separating or protecting incarcerated
6 persons without use of solitary confinement;

7 (b) Establishing that restrictions on religious, mail, and
8 telephone privileges, visit contacts, and outdoor and indoor
9 recreation may be imposed only after an individualized assessment
10 that determines restrictions are directly necessary for the safety of
11 the incarcerated person or others, and that there may not be
12 restrictions on access to food, basic necessities, or legal access;

13 (c) Requiring training of staff working with incarcerated persons
14 in solitary confinement and requiring that this training include:
15 Assistance from appropriate professionals including, but not limited
16 to, professionals in the department of social and health services to
17 periodically train all staff working with incarcerated persons in
18 solitary confinement and alternatives to such confinement; and the
19 identification and response to incarcerated persons in need of
20 physical accommodations who have been referred to solitary
21 confinement;

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

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

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

29 (g) Requiring posting on the official website of the department
30 monthly reports, beginning July 1, 2023, on the use of solitary
31 confinement, including: The rate of solitary confinement by category,
32 age, sex, gender identity, ethnicity, or incidence of a mental
33 disorder; the number of people released from solitary confinement
34 directly to the community; the mean and median period of solitary
35 confinement at each facility, including the population on the last
36 day of each quarter and a nonduplicative cumulative count of people
37 exposed to solitary confinement for each fiscal year; the incidence
38 of self-harm, suicide, and assault in any solitary confinement unit;
39 and the number of people held in medical isolation. Reports may not

1 include personally identifiable information regarding any
2 incarcerated person.

3 NEW SECTION. **Sec. 10.** (1) A governing unit of a city or county
4 operating one or more jails shall compile on a monthly basis through
5 July 1, 2023, the following information with respect to each jail
6 operated by the governing unit:

7 (a) The number of times solitary confinement was used;
8 (b) The circumstances leading to the use of solitary confinement;
9 and

10 (c) For each instance of solitary confinement, the length of time
11 the individual remained in solitary confinement, whether a
12 supervisory review of the solitary confinement occurred and was
13 documented, whether a medical assessment or review and a mental
14 health assessment or review were conducted and documented, and
15 whether the affected person was afforded full access to education,
16 programming, and ordinary necessities such as medication, meals, and
17 reading material during the term of solitary confinement.

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

21 (3) For the purposes of this section, "solitary confinement"
22 means confinement of an incarcerated person alone in a cell or
23 similarly confined holding or living space for 17 hours or more per
24 day under circumstances other than a facility-wide lockdown.

25 (4) This section expires December 31, 2023.

26 NEW SECTION. **Sec. 11.** (1) Subject to the availability of
27 amounts appropriated for this specific purpose, the Washington
28 association of sheriffs and police chiefs shall collect, on a monthly
29 basis, the information submitted under section 10 of this act. The
30 collected information must be compiled into a report summarizing the
31 information by county and type of facility. An initial report must be
32 submitted, in compliance with RCW 43.01.036, to the governor and the
33 appropriate committees of the legislature by December 1, 2022. A
34 final report must be submitted, in compliance with RCW 43.01.036, to
35 the governor and the appropriate committees of the legislature by
36 December 1, 2023.

37 (2) This section expires December 31, 2023.

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

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

7 (b) Develop a corrections capital facilities master plan that
8 outlines the capital investments needed to accommodate the objectives
9 of this act, while providing for the health and safety of all
10 incarcerated persons, correctional officers and other staff, and
11 outside visitors, when the restrictions on solitary confinement are
12 imposed under this act;

13 (c) Provide a profile of currently incarcerated persons who are
14 or have been housed in restrictive housing during the 2021-2023
15 fiscal biennium, including information regarding their underlying
16 offenses and any sanctions imposed during their incarceration, and
17 the amount of time they have remaining in total confinement;

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

20 (e) Provide an inventory of currently incarcerated persons who
21 are or have been housed in restrictive housing and who have been
22 transferred or have been considered for transfer to an out-of-state
23 correctional facility.

24 (2) The department of corrections must compile the information
25 detailed in subsection (1) of this section into a report which must
26 be submitted, in compliance with RCW 43.01.036, to the governor and
27 the appropriate committees of the legislature by January 9, 2023.

28 (3) This section expires December 31, 2023.

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

31 NEW SECTION. **Sec. 14.** Sections 1 through 8 of this act take
32 effect July 1, 2023.

33 NEW SECTION. **Sec. 15.** Sections 9 through 13 of this act take
34 effect July 1, 2022.

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