



# MODEL POLICY FOR REDUCING CONFINEMENT AND ISOLATION IN JUVENILE FACILITIES



Washington State Department of  
**CHILDREN, YOUTH & FAMILIES**



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## About the Washington State Department of Children, Youth, and Families

The Washington State Department of Children, Youth, and Families (DCYF) is a cabinet-level agency focused on the well-being of children.

### Guiding Principles

- A relentless focus on outcomes for children.
- A commitment to collaboration and transparency.
- A commitment to using data to inform and evaluate reforms, leveraging and aligning existing services with desired child outcomes.
- A focus on supporting staff as they contribute to the agency's goals and outcomes.

### What We Do

DCYF is the lead agency for state-funded services that support children and families to build resilience and health and to improve educational outcomes. We accomplish this by partnering with state and local agencies, tribes and other organizations in communities across the state of Washington. Our focus is to support children and families at their most vulnerable points, giving them the tools they need to succeed.

Brain science tells us that laying a strong foundation early in life, critically impacts healthy development. The science also tells us that addressing trauma, especially at critical transition points in the lives of youth, helps ensure successful transition into adulthood. To truly give all children the great start in school and life they deserve, DCYF was created to be a comprehensive agency exclusively dedicated to the social, emotional, and physical well-being of children, youth, and families — an agency that prioritizes early learning, prevention, and early intervention at critical points along the age continuum from birth through adolescence.

### Mission

Protect children and strengthen families so they flourish.

### Vision

All Washington's children and youth grow up safe and healthy — thriving physically, emotionally, and educationally, nurtured by family and community.

### Values

- Inclusion
- Respect
- Integrity
- Compassion
- Transparency

## Background

Following the 2020 Legislative Session and passage of the Youth Solitary Confinement bill, the DCYF policy administrator reached out to and met with two juvenile court administrators who serve as co-chairs of the Detention Quality Assurance Committee, and a representative from King County Juvenile Detention Center. Each person in the group discussed their use of confinement or isolation and shared facility policies. It was from these meetings that the basis of the model policy was formed. Although there were a few differences on how confinement and isolation are used, there were many similarities and shared challenges.

## How to Use This Publication

### Understanding HB 2277 on Solitary Confinement

During the 2020 Legislative Session, [Second Substitute House Bill 2277 Concerning Youth Solitary Confinement](#) was passed. Beginning June 11, 2020, separating youth and confining them as a punishment or retaliation is prohibited. In recognition of the potential harm caused by prolonged confinement and the demonstrated ineffectiveness for reducing behavioral incidents, the bill further defined the limited instances when room confinement and isolation can be used. The model policy is intended to provide additional guidance on how to use room confinement or isolation in a way that advances the rehabilitative goals of the juvenile justice system in Washington State, and that it is not used as a punitive measure.

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*“You get depressed and hopeless and trapped in your own thoughts repeating trauma again and again. We need to fix this problem. Solitary confinement increases costs because kids need more counseling and treatment afterward, or they get into more trouble. We need a public health approach to juvenile justice. We need to respect the science about brain development and take trauma into account.” – Senate Committee on Human Services, Reentry & Rehabilitation, February 2020*

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### Adoption of the Model Policy Guidance

The model policies in this publication address solitary confinement, room confinement, and isolation for all juveniles in detention facilities and DCYF institutions. The Youth Solitary Confinement bill prohibits the use of solitary confinement, and limits the use and duration of room confinement and isolation. DCYF is required to adopt a model policy by July 1, 2021. After that, but by Dec. 1, 2021, detention facilities or institutions must either a) adopt the model policy, or b) notify DCYF of the reasons the detention facility or institution will not adopt the model policy, including how the detention facility or institution’s policies and procedures differ from the model policy by emailing their response to [JRPolicy@dcyf.wa.gov](mailto:JRPolicy@dcyf.wa.gov).

## Collecting Data

DCYF is required under [RCW 13.22.040](#) to compile information on the use of confinement or isolation in excess of one hour, including the number of times isolation and room confinement were used, circumstances leading to room confinement or isolation, the duration of each use (and any isolation beyond four hours), if supervisory reviews occurred and were documented, age and race of individuals, medical and mental health assessments, and access to medication, meals and reading material.

A similar requirement for county detention facilities is listed under [RCW 13.22.050](#).

## Reporting to DCYF and the Legislature

According to [RCW 13.22.060](#), the data information must be reported from detention facilities to DCYF by Dec. 1, 2021, and an updated report must be submitted by Nov. 1, 2022. DCYF is required to compile the required data from their Juvenile Rehabilitation facilities and the county detention facilities into a report provided to the appropriate legislative committees by Dec. 1, 2022, under [RCW 43.01.036](#).

After Nov. 1, 2022, detention facilities ([RCW 13.22.050](#)) and DCYF ([RCW 13.22.040](#)) must compile this information annually and publish it on each of their websites.

Starting in January 2023, DCYF will begin periodic reviews of policies, procedures, and use of confinement and isolation in all applicable facilities and provide a report to the Legislature summarizing those reviews every three years.

In preparation of these reviews, DCYF is in the process of establishing a position to support facilities in this work.

## Applicable Definitions

The following definitions should be adopted with the model policies and guidance provided in this document. These definitions are listed in [RCW 13.22.010](#), and adds additional definitions used in the RCW or items in parentheses ( ) for clarification purposes.

- “Confinement” means when a youth is separated from the population and placed in a locked room for longer than 15 minutes. For the purposes of this model policy, confinement means “room confinement” or “isolation” since “solitary confinement” is prohibited.
- "Department" means the department of children, youth, and families (DCYF).
- "Detention facility" means:
  - Any detention facility as defined under [RCW 13.40.020](#); and
  - Any juvenile correctional facility under alternative administration operated by a consortium of counties under [RCW 13.04.035](#).
- "Imminent harm" means immediate and impending threat of a person causing bodily injury to self or others.
- "Institution" has the same meaning as in [RCW 13.40.020](#).

## MODEL POLICY FOR REDUCING CONFINEMENT AND ISOLATION IN JUVENILE FACILITIES

- "Isolation" means confinement that occurs:
  - When a youth is separated from the youth population and placed in a room (or cell) for longer than 15 minutes for the purpose of discipline, behavior modification, or due to an imminent threat to the safety of the youth or others; and
  - In a room (or cell) other than the room assigned to the youth for sleeping. Juveniles are in isolation from the moment they are separated from others until they have rejoined the population. Juveniles who are pregnant shall not be put into isolation. Maintaining appropriate gender separation does not constitute isolation.
- "Juvenile" means:
  - Any individual who is under the chronological age of 18 years; and
  - Any individual under the chronological age of 25 years who is confined in an institution, including an individual confined in an institution under [RCW 72.01.410](#).
- "Juvenile court administrator" means an administrator appointed pursuant to [RCW 13.04.035](#).
- "Medical assessment" means an evaluation of an individual physically by an RN, ARNP, or MD, or an off-site medical facility to determine if medical treatment is required.
- "Mental health assessment" means an assessment conducted by a psychologist, psychiatrist, or other trained mental health staff who meets with an individual to address mental health needs, identify risk of suicide, or evaluate and develop a treatment plan to prevent self-harm.
- "Punitive" means to impose a punishment.
- "Room confinement" means a juvenile is separated from the youth population and placed in a room or cell that the juvenile is assigned to for sleeping, other than during normal sleeping hours or interim rest hours. "Room confinement" does not include time a youth requests to spend in his or her room or rest periods in between facility programming. Juveniles are in room confinement from the moment they are separated from others until they are permitted to rejoin the population.
- "Solitary confinement" means a youth is involuntarily separated from the youth population and placed in a room or cell other than the room assigned to the youth for sleeping for longer than 15 minutes for punitive purposes. Different terminology does not exempt practice from being "solitary confinement."

Pursuant to [RCW 13.22.030](#), DCYF shall adopt a model policy by July 1, 2021 prohibiting the use of solitary confinement, and limiting the use and duration of room confinement and isolation. Following that, detention facilities or institutions must either a) adopt the model policy, or b) notify DCYF of the reasons the detention facility or institution will not adopt the model policy, including how the detention facility or institution's policies and procedures differ from the model policy.

## Model Policy

In an effort to protect the well-being of juveniles in the juvenile justice system and enhance rehabilitative goals, the Legislature established [Chapter 13.22 RCW](#) on Juvenile Solitary Confinement. This chapter prohibits use of solitary confinement for punishment or retaliation, and establishes requirements regarding the use of graduated interventions to address behavioral incidents, ranging from prevention, to the use of room confinement and isolation. The goal of the RCW, and this model policy, is to limit the use and duration of room confinement and isolation.

### Preventing Use of Confinement and Isolation

Staff working with youth at juvenile detention facilities and institutions must provide youth a rehabilitative approach, through a system of graduated interventions that encourages participation in programming and treatment. This includes:

1. Training provided to all staff who supervise youth on:
  - a. Prohibiting solitary confinement.
  - b. How to prevent or reduce the need and length of confinement and isolation.
  - c. How to safely use room confinement or isolation if needed.
2. A systematic approach to:
  - a. Address behavioral issues that include graduated interventions with less restrictive options such as engaging youth in problem-solving, emotional regulation exercises, specialized programming, or other tools to prevent the need for room confinement or isolation.
  - b. Protect the safety and security of individuals and their peers, staff, and visitors.

### Prohibiting Solitary Confinement

According to [RCW 13.22.005](#), solitary confinement is ineffective at reducing behavioral incidents and may increase anxiety and anger in youth. Use of solitary confinement as a form of punishment or retaliation, defined in [RCW 13.22.010](#), is **prohibited in all juvenile detention facilities or institutions**.

*"Solitary confinement" means a youth is involuntarily separated from the youth population and placed in a room or cell other than the room assigned to the youth for sleeping for longer than 15 minutes for punitive purposes. Different terminology does not exempt practice from being "solitary confinement."*

## Use of Room Confinement

Room confinement in a juvenile institution or detention facility is only authorized according to the requirements provided in this section. Room confinement is preferred over isolation to address behavior. The following definition is found in [RCW 13.22.010](#). For the purposes of this model policy, room confinement does not include when a youth is placed on medical quarantine due to illness, potential contagions or exposure such as Coronavirus, or other medical reasons that prevent a youth from participating in facility programming with others.

*"Room confinement" means a juvenile is separated from the youth population and placed in a room or cell that the juvenile is assigned to for sleeping, other than during normal sleeping hours or interim rest hours. "Room confinement" does not include time a youth requests to spend in his or her room or rest periods in between facility programming. Juveniles are in room confinement from the moment they are separated from others until they are permitted to rejoin the population.*

1. Room confinement can be used when a youth's behavior causes disruption to the facility, or there is a safety or security concern that does not rise to the level of imminent harm, and less restrictive measures are not effective.
2. The duration of room confinement is limited to no more than four hours in any 24-hour period, only if:
  - a. Youth are visually checked at least every 15 minutes.
  - b. Staff attend to the needs of the youth if awake, evaluating and encouraging the youth on meeting the goals set in order to release from room confinement.
  - c. Staff provide access to clothing, mattress and bedding, medication as required under supervision, toilet and sink access at least hourly, necessary mental health services, and reading, writing, and treatment material unless safety precautions are required.
  - d. Youth are released from room confinement as soon as the purpose of confinement is met, the desired behavior is evident, or a professional evaluation determines the youth is no longer an imminent risk to themselves or others.
  - e. Staff document each incident of room confinement.
3. An extension beyond four hours is allowed if subsequent or multiple incidents occur and:
  - a. All requirements in 2.a. – 2.e. are met and continue.
  - b. The reason for the extension of room confinement, beyond four hours, is documented.
  - c. Medical professionals must assess and address any physical needs, and a qualified mental health professional must evaluate mental health needs and develop a care plan to prevent self-harm (assessments may occur after release from room confinement).
  - d. An individualized plan is established for the youth, setting goals on what they need to do in order to be released and rejoin the general population.
  - e. The detention facility or institution superintendent or designee provides documented authorization every four hours.
  - f. The agency secretary or designee, or juvenile court administrator provides documented authorization if exceeding 24 hours.



## Use of Isolation

Similar to room confinement, use of isolation is only authorized according to the requirements provided in this section. The following definition is found in [RCW 13.22.010](#). For the purposes of this model policy, isolation does not include when a youth is placed on medical quarantine due to illness, potential contagions or exposure such as Coronavirus, or other medical reasons that prevent a youth from participating in facility programming with others.

*"Isolation" means confinement that occurs (a) when a youth is separated from the youth population and placed in a room for longer than 15 minutes for the purpose of discipline, behavior modification, or due to an imminent threat to the safety of the youth or others; and (b) in a room other than the room assigned to the youth for sleeping. Juveniles are in isolation from the moment they are separated from others until they have rejoined the population. Juveniles who are pregnant shall not be put into isolation. Maintaining appropriate gender separation does not constitute isolation.*

1. Isolation can be used in the following ways as a last resort if less restrictive alternatives were unsuccessful:
  - a. To prevent imminent harm to the youth or others.
  - b. When waiting for transfer to another facility.
  - c. Overnight if the youth's behavior is too disruptive to other youth.
  - d. In response to an escape attempt.
  
2. The duration of isolation is allowed up to four hours in any 24-hour period, only if:
  - a. Youth are visually checked at least every 15 minutes.
  - b. Staff attend to the needs of the youth if awake, evaluating and encouraging the youth on meeting the goals set in order to release from isolation.
  - c. Staff provide access to clothing, mattress and bedding, medication as required under supervision, toilet and sink access at least hourly, necessary mental health services, and reading, writing, and treatment material unless safety precautions are required.
  - d. Youth may be released from isolation when the purpose of isolation is met, the desired behavior is evident, or a professional evaluation determines the youth is no longer an imminent risk to themselves or others.
  - e. Staff document each incident of isolation.
  
3. An extension beyond four hours is allowed if subsequent or multiple incidents occur and:
  - a. All requirements in 2.a. – 2.e. are met and continue.
  - b. An individualized plan is established for the youth, setting goals on what they need to do in order to be released and rejoin the general population.
  - c. Medical professionals must assess and address any physical needs, and a qualified mental health professional must evaluate mental health needs and develop a care plan to prevent self-harm (assessments may occur after release from isolation).
  - d. The detention facility or institution superintendent or designee provides documented authorization every four hours.
  - e. The agency secretary or designee, or juvenile court administrator provides documented authorization if exceeding 24 hours.
  
4. If a youth is no longer an imminent risk to themselves or others, but is still disruptive to the facility, or poses a safety or security concern, they may step down to room confinement.

## Data Guide and Reporting

### Data Guide Fields

Facilities will need to track all room confinement and isolation events lasting 60 minutes or more. Time youth spend in their room resting, sleeping, for medical purposes, or by their own request does not need to be included. The fields below are suggested guidance to improve consistent reporting across all facilities:

Event-Level Fields		
1. Event ID	8. Event Start Time (HH:MM)	15. Medical Review Completed (Yes / No)
2. Person ID	9. Event Type (Room Confinement / Isolation)	16. Mental Health Assessment Completed (Yes / No)
3. Person Race: Select All That Apply (American Indian or Alaska Native, Asian, Black or African American, Hispanic/Latino, Native Hawaiian or other Pacific Islander, White, Unknown)	10. Event Start Reason* (Prevent Imminent Harm / Awaiting Transfer / Disruptive Behavior / Escape Attempt)	17. Access to Medications (Yes / No / Medication Not Required)
4. Person Gender (Male / Female / X / Other / Refused or Unknown)	11. Event End Date (MM/DD/YYYY)	18. Access to Meals (Yes / No / Not During Meal Time)
5. Person Date of Birth (MM/DD/YYYY)	12. Event End Time (HH:MM)	19. Additional Notes
6. Event Location (Facility Name)	13. Event End Reason (Purpose of Confinement Met / Desired Behavior Evident / No Longer a Risk / Other: Please Define)	
7. Event Start Date (MM/DD/YYYY)	14. Documented Supervisory Review (Yes / No / N/A)	

\* Note: If quarantine data is included, please identify it separately as "Medical Quarantine."

### Reporting

Detention facilities should coordinate with [OIAA@dcyf.wa.gov](mailto:OIAA@dcyf.wa.gov) on how to provide the initial data required.

After Nov. 1, 2022, detention facilities ([RCW 13.22.050](#)) and DCYF ([RCW 13.22.040](#)) must compile and publish this information annually on their websites.