

What is the role of the Department of Corrections (DOC) in placing residents who are released from the Special Commitment Center?

Before the court orders any kind of conditional release to a Less Restrictive Alternative (LRA), it first orders an investigation of the potential residence. This investigation is done by DOC. A community corrections specialist then provides an investigative report to the court that includes a description of the land and property, its distance from schools, churches, bus stops, grocery stores, alcohol and cannabis stores, bars and taverns, daycares, parks and other public spaces of concern. This investigative report also includes DOC's recommendations for any conditions or restrictions for the individual being released from a more restrictive setting. Upon completion, DOC files its report with the court.

The court then decides whether the placement is appropriate and determines the final conditions and restrictions of the individual's release. These reports are very specific and detailed.

State agencies such as DOC do not approve or deny the placement. This is the job of the court. DOC's role is to provide information to the court, including potential risk factors and recommended conditions.

What happens before a Conditional LRA is ordered by the court?

The End of Sentence Review Committee (ESRC), made up of multi-agency stakeholders including law enforcement and mental health professionals, reviews the individual's criminal history, medical and psychiatric history and treatments received to determine the initial sex offender level. This recommendation is sent to the county sheriff's office. The sheriff's office decides whether to affirm or change that level.

How does DOC supervise these individuals once they are placed?

DOC relies on the court order to direct how the individual is supervised. The court imposes comprehensive and specific conditions. Individuals released on an LRA are required to be in contact with a DOC community corrections specialist. Other conditions include:

- Wearing an ankle bracelet continuously through the term of supervision. These devices, called Global Positions Systems (GPS), track the location of the resident at all times – 24 hours a day, seven days a week. If the individual goes out of bounds, an alert is triggered, and DOC is immediately notified. A community corrections specialist is on call at all times to monitor and respond to any alerts.
- Calling their community corrections specialist when leaving and arriving to and from any destination.
- Following a strict curfew.
- Having itineraries for travel pre-approved and including approved routes that are monitored by GPS in real-time.
- Having all potential travel vetted and surveyed by DOC through the multi-agency Transition Team (community corrections officer, sex-offender treatment provider, mental health provider, housing provider and DSHS staff).
- Conducting face-to-face, in-person, home and community visits.
- Maintaining communication between DOC and the individual by phone.
- Conducting random drug and alcohol tests.
- Conducting periodic risk assessments of the LRA.
- Clearly defining which contacts with individuals are prohibited, as well as approved contacts.
- Approving all chaperones.

What does the data say about community safety?

In the three decades Less Restrictive Alternatives have been in place, no resident has ever been charged with a sexual assault.

What happens if an individual violates the conditions of supervision?

There are usually upwards of 50 different conditions of supervision under an LRA. Each case is managed by a Residential Community Transition Team (RCTT) that includes a DOC community corrections specialist. This team reviews and monitors the individual's compliance and has several options when there is a violation, including:

- Returning the individual to total confinement on McNeil Island.
- Restricting the individual's movement to specific areas of the community.
- Prohibiting the individual from leaving the residence except for court-mandated trips (legal, medical, therapy).
- Making changes to the individual's treatment plan.
- Increasing the use of chaperones while in the community.

The severity of the violation determines the level of response. For any violation that presents an imminent safety risk to the community, DOC will immediately return the resident to confinement regardless of whether the RCTT has been consulted.

Any time there is a violation of the court order, regardless of how severe, DOC provides a written report to the court outlining the behaviors and proposed remedy. The court decides whether the violation should result in a return to total confinement on McNeil Island or modification of the court-ordered conditions.

What happens if a resident escapes?

RCW 71.09.130 speaks best to this. It can be viewed in its entirety [online](#).

Escape from LRA is a felony offense. If a resident is found to have traveled outside of approved routes and cannot be contacted, the community corrections specialist is notified in real-time. DOC and local law enforcement immediately begin to search for the resident. Additionally, the county prosecutor and the civil court prosecutor are notified immediately.

What is the average sexually violent predator LRA caseload per DOC community corrections specialist?

The caseload varies depending on resources and the location of the residents on LRA. Community corrections specialists that supervise these cases have much lower caseloads than standard supervision. There are a total of 13 specialists assigned across the state monitoring 86 total residents.

How does DOC distribute community corrections specialists?

Each individual DOC community corrections specialist is assigned cases based on geography. This allows for the specialist to be more responsive to the individual residents. For example, a community corrections specialist that is assigned primarily to Pierce County may also supervise a case out of Thurston County.

Links and resources:

- <https://apps.leg.wa.gov/rcw/>
- <https://doc.wa.gov>
- DOC Victim Services Program: 360-725-9350 or toll-free 1-800-322-2201