



Residential Drug Offender Sentencing Alternative Expansion Status

2013 Report to the Legislature

As required by Third Engrossed Substitute Senate Bill 5034

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Report Overview

The 2013 Legislature directed the Department to submit a report to the Office of Financial Management and the appropriate fiscal and policy committees of the legislature on the use of the expanded Drug Offender Sentencing Alternative (DOSA) beds funded by the legislature in Third Engrossed Substitute Senate Bill 5034.

Residential Drug Offender Sentencing Alternative Overview

Effective July 25, 1999, the Washington State Legislature created the Drug Offender Sentencing Alternative (DOSA) for eligible offenders. Until 2005, DOSA was a sentence alternative comprised of a reduced prison term in exchange for participating in treatment and community custody. In 2005, an additional treatment alternative was added which consists of treatment in the community followed by community custody. This sentencing alternative reduces the number of offenders sentenced to prison by allowing the courts to order eligible and appropriate offenders to undergo treatment in lieu of incarceration.

Research has shown that participation in chemical dependency treatment programs reduces recidivism, which translates to a savings of taxpayer dollars and the reduced need for prison beds. (“Chemical Dependency Treatment Offenders: A Review of the Evidence and Benefit-Cost Findings” – Washington State Institute for Public Policy, 2012 -) Offenders sentenced to DOSA are required to participate in, and successfully complete, Chemical Dependency treatment. The types of treatment an offender receives are based on their individual level of need and severity of addiction, however the Residential DOSA sentence requires three to six months of long term residential treatment followed by a 24-month term of community custody. Offenders that are not successful and do not program or violate their conditions of release can be remanded by the court to serve the remainder of their sentence in prison.

Implementation of Expanded Drug Offender Sentencing Alternative Capacity

Since 2005, the use of the Residential DOSA has increased. In 2010, 927 offenders were referred for DOSA examinations, in 2011, 940 offenders were referred, and in 2012, 1,025 offenders were referred for a DOSA examination. The increase in referrals resulted in a higher use of the sentencing option, and created significant delays in placing sentenced offenders into Residential DOSA community beds due to an insufficient capacity of the existing treatment beds to meet the demand.

Strategies to Increase Utilization of Residential DOSA

In the past year, DOC has taken steps to communicate with stakeholders and improve processes associated with the Residential DOSA program. In October of last year, a meeting occurred with stakeholders to include superior court judges, drug court staff, treatment providers, and legislative staff

in which DOC solicited input on how to improve the program and to increase usage. Based on their input, DOC worked closely with the residential treatment provider to improve services and communication and convened a joint meeting with the residential treatment provider and the provider contracted with DOC to provide outpatient treatment services in the community.

Significant changes have been made to the quality of the treatment provided and to the collaborative efforts between DOC, the residential treatment provider and the outpatient treatment provider. Monthly meetings have occurred with providers to improve transition from the residential portion of the treatment to the outpatient follow-up resulting in significant improvement in decreasing the amount of time between release from residential treatment and placement in outpatient treatment in the community. DOC convened a second Residential DOSA meeting with statewide stakeholders to identify further barriers and to report on the changes implemented over the past year to enhance utilization and improve outcomes. Based on that meeting, DOC will improve on data collection and reporting, work with the providers to further improve communication, decrease wait time for treatment, and improve the initial examination process that evaluates an offender’s need for treatment.

Current Usage of Expanded Capacity

The 2013 Legislature increased funding from 175 to 220 Residential DOSA beds effective July 1, 2013. Once the funding was approved, DOC began working with the residential treatment provider to amend the contract. As a result, there has been a reduction in wait times for residential beds. In the months of September and October, the Residential DOSA population reached a high of 223 occupied beds, and achieved an average daily population of 217 and 219, respectively. The increase in funding for the DOSA Residential option has resulted in a decrease of the time between sentencing and placement in a treatment bed.

