



## Jails and Juvenile Detention Centers in Washington State: *Population Trends, Survey of Local Facilities, and Availability of CJTC Courses*

In 2023, the Washington State Legislature directed the Washington State Institute for Public Policy (WSIPP) to conduct a study of jails and juvenile detention centers.

[Exhibit 1](#) describes the three parts of the study. First, the assignment directed WSIPP to study how the characteristics of the jail and JDC populations have changed over the last 12 years.

Next, the assignment asked WSIPP to collect and analyze survey data from individuals in leadership positions at jails and JDCs. The assignment instructed WSIPP to include survey questions about a variety of topics, including staffing shortages and the physical condition of local facilities.

Finally, the assignment instructed WSIPP to examine the availability of Criminal Justice Training Commission classes for correctional officers.

This report is presented in six sections. [Section I](#) offers background information on jails and JDCs. [Section II](#) provides an overview of our data and methods. Based on the results from our analyses, we describe the confined population in [Section III](#), the conditions of confinement in [Section IV](#), and the workforce in [Section V](#). We conclude in [Section VI](#).

### Summary

This report presents the results of a three-part study of local jails and juvenile detention centers (JDCs) in Washington State. These institutions are mainly used to house individuals who have been arrested while they wait for their cases to be processed by the court system.

Using administrative data from 2010-2022, we examined trends in the characteristics of all individuals who were admitted to jail and JDC facilities for at least 24 hours. We observed decreases in number of admissions and the prevalence of individuals detained for drug crime, along with increases in the prevalence of mental health disorders and individuals detained for violent crime.

We collected survey data from 56 jails and JDCs operating 64 facilities, which represents a 100% response rate. The survey asked about a wide variety of topics, including the workforce, facility condition/capacity, cost of renovation/new construction, health and reentry services, and institutional finances. Among other findings, most respondents reported that their institution is struggling to recruit or retain correctional officers, which has resulted in persistent staffing shortages. In addition, the average facility has been in operation for 35 years. Most respondents indicated their facility needs extensive repair.

Finally, we examined the availability of Criminal Justice Training Commission (CJTC) courses. Although state law mandates that new recruits complete training within six months of being hired as a correctional officer, evidence suggests that CJTC courses are not offered frequently enough to keep up with demand. As a result, new recruits have been waiting 6-12 months before enrolling.

**Exhibit 1**  
Legislative Assignment

The Washington State Institute for Public Policy must—

*...Conduct a study of the Washington jail system and county juvenile justice facilities. The institute's report shall include, to the extent possible, consideration of the following:*

*(1) A longitudinal study of how the county jail and county juvenile detention populations have changed over the last 12 years including, but not limited to, an analysis of demographics, physical and behavioral health issues, number of inmates, and types of convictions.*

*(2) An analysis of county jail and county juvenile detention facility survey data provided by the Washington state association of counties. The survey shall include, but not be limited to, the following:*

- *Age of the facilities*
- *Age of systems within the facilities*
- *Cost of remodeling facilities*
- *Cost of building new facilities*
- *General maintenance costs of the facilities*
- *Operational costs of the facilities*
- *Workforce, to include, but not be limited to, employee vacancies as a percentage of total employees*
- *Services, supports, and programming, to include, but not be limited to:*
  - *Costs of housing those with behavioral health needs;*
  - *Number of individuals with behavioral health needs;*
  - *Cost of competency restoration;*
  - *Physical health services and related costs;*
  - *Number of individuals booked and housed on behalf of state agencies;*
  - *Percent of individuals waiting for a state hospital;*
  - *Available nonincarcerative alternatives and diversion programs; and*
  - *Available release and reentry services;*
- *Funding sources, to include, but not be limited to:*
  - *County tax structure and revenue raising ability; and*
  - *Jail and juvenile detention facility funding sources.*

*(3) Examination of the availability of criminal justice training commission classes for corrections officers.*

*Engrossed Substitute Senate Bill 5187, Chapter 475, Laws of 2023*

## I. Background

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We begin by briefly describing the purpose of jails and juvenile detention centers (JDCs) within the criminal justice system. Next, we discuss three important events between 2010 and 2022 that affected how the justice system operated in Washington State. Finally, we review information about training courses for correctional officers provided by the Criminal Justice Training Commission (CJTC).

### Jails and Juvenile Detention Centers

Once law enforcement arrests someone, the next step is to house them in a secure facility for pre-trial detention.<sup>1</sup> Depending on the arrested person's age, they will be temporarily detained in either a jail (adults) or a JDC (youth). In Washington State, most jails and JDCs operate under the jurisdiction of a particular county.

Jails are used for both pretrial detention and punitive terms of confinement lasting up to one year. However, most individuals in jails are there for pretrial detention. A study using data from 2019 found that the average length of stay for jails in Washington State was 17 days.<sup>2</sup>

JDCs are used for pretrial detention and punitive terms of confinement lasting up to 30 days.<sup>3</sup> Similar to jails, most individuals in JDCs are there for pretrial detention. This typically involves a short-term stay<sup>4</sup> ending in either being released to the community or transferring to a different facility for longer-term confinement.

### Events Impacting the Confined Population

Past research has found that changes to laws, policies, or procedures that influence the likelihood of arrest and/or confinement can have major consequences for the size and composition of the confined population.<sup>5</sup> In the text below, we discuss three key developments during 2010-2022 that impacted the confined population in Washington State.

- 1) Changes to laws regulating detention facility placement for individuals who are younger than age 25;
- 2) The outbreak of COVID-19 during 2019-2020; and
- 3) The Washington State Supreme Court case *State v. Blake* (2021).<sup>6</sup>

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<sup>1</sup> The main purpose of pre-trial detention is to confine individuals until their case has been processed by the courts.

<sup>2</sup> Hernandez, H., & Georgoulas-Sherry, V. (2023). *Exploring racial, sex, and age disproportionalities within Washington State Jails, JIC Repository Home*. Washington State Statistical Analysis Center.

<sup>3</sup> Dowell, T. (2019). *The Juvenile Offender System in Washington State 2019 Edition*.

<sup>4</sup> In 2020, the average length of stay at JDCs was 13.5 days and the median length of stay was 3.8 days. Gilman, A., & Sanford, R. (2022). *The impact of COVID-19 on juvenile detention in Washington State*. Olympia, WA: Washington State Center for Court Research, Administrative Office of the Courts. Page 7.

<sup>5</sup> Raphael, S., & Stoll, M.A. (2013). *Why are so many Americans in prison?* Russell Sage Foundation.

<sup>6</sup> [State v. Blake](#).

**Confinement for Individuals Under Age 25**  
Over the last 30 years, the criminal justice system in Washington State experienced a shift in practices for punishing individuals under age 25.<sup>7</sup>

During the 1990s, Washington State instituted changes to the juvenile court system, making it easier for defendants under age 18 to be tried and punished as adults. As a result, it became more common for individuals under age 18 to serve time in adult correctional facilities, including jails.

Over time, however, juvenile justice practices moved away from punishing youth as adults. Between 2010 and 2022, the legislature introduced a series of bills that increasingly restricted the use of adult punishment for younger individuals,<sup>8</sup> including confinement in jails. For example, individuals under age 25 may be confined in Juvenile Rehabilitation facilities instead of jail facilities.

As a result, we may observe changes in the age composition of individuals in jail facilities during the observation period for our study.

### COVID-19

In response to the outbreak of COVID-19, Governor Jay Inslee declared a state of emergency on February 29, 2020. This was followed by a variety of changes to the criminal justice system.

Because airborne viruses can spread rapidly in correctional settings, criminal justice agencies across Washington State responded to the outbreak of COVID-19 by making a concerted effort to reduce the size of the confined population. For example, the justice system temporarily restricted the use of pre-trial detention or punitive confinement.

In 2021, WSIPP published a report investigating the short-term impact of COVID-19 restrictions on the criminal justice system.<sup>9</sup> The author identified differences in how criminal cases were processed through the justice system in the year before and after pandemic-era restrictions were introduced.

The author found that pandemic-era restrictions were associated with a substantial drop in the speed with which cases involving non-violent, low-severity offenses were processed. In contrast, cases involving serious violent crimes were virtually unaffected.

Overall, these findings suggest that pandemic-era restrictions resulted in less action being taken against individuals accused of minor crimes but otherwise had little impact on how the criminal justice system dealt with individuals accused of serious violent behavior. These restrictions were introduced in 2020 and remained in effect into 2021, at which point they began to be phased out.

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<sup>7</sup> For a review, see Spangler, M., Wanner, P., Adams, N., Mack, C., & Kelley, K.M., (2024). *Changes to Washington State's juvenile court and juvenile rehabilitation jurisdiction: A preliminary analysis of "JR to 25"* (Doc. No. 24-07-1201). Olympia: Washington State Institute for Public Policy.

<sup>8</sup> House Bill 1674, Chapter 156, Laws of 2015; Engrossed Second Substitute Senate Bill 6160, Chapter 162, Laws of 2018;

Engrossed Second Substitute House Bill 1646, Chapter 322, Laws of 2019; Engrossed Second Substitute House Bill 1186, Chapter 206, Laws of 2021.

<sup>9</sup> Hirsch, M. (2021). *COVID-19 and adult criminal justice: A quantitative look at affected systems* (Doc. No. 21-07-1901). Olympia: Washington State Institute for Public Policy.

As a result, we expect to observe changes in the number of admissions and the criminal history of individuals in jail and JDC facilities between 2019 and 2020. In particular, we anticipate a substantial drop in admissions, as well as a shift toward a higher concentration of individuals with convictions for violent crime and a lower concentration of individuals with convictions for non-violent offenses.

#### *State v. Blake (2021).*

On February 25, 2021, the Washington State Supreme Court ruled in *State v. Blake* that the existing laws regulating punishment for felony drug possession were unconstitutional.<sup>10</sup> This ruling had a dramatic impact on how the criminal justice system dealt with offenses for drug possession:

*Across the state, law enforcement agencies announced that they would no longer detain or arrest people for simple possession. Similarly, the Washington Association of Prosecuting Attorneys instructed its members to immediately drop any pending cases for simple possession, to seek orders vacating old convictions, and to recall any arrest warrants issued in simple possession cases.*<sup>11</sup>

Three months after the *Blake* decision, the legislature introduced legislation that recriminalized drug possession as a misdemeanor.<sup>12</sup>

Much remains unknown about how *State v. Blake* affected the criminal justice system. However, it appears that the immediate impact resulted in a radical decrease in arrests, detention, and sentences for drug possession.

As a result, we expect to observe changes in the number of admissions and the criminal history of individuals in jail and JDC facilities between 2020 and 2021. In particular, we anticipate a decrease in admissions and a lower concentration of individuals with convictions for drug offenses.

<sup>10</sup> *State v. Blake*. (2021). 197 Wash.2d 170, 481 P.3d 521.

<sup>11</sup> Ochsner Utt, A. (2023). Grappling with our own errors: Lessons from *State v. Blake*. *Washington and Lee Law Review Online*, 80(6), 347.

<sup>12</sup> [Engrossed Senate Bill 5476, Chapter 311, Laws of 2021](#). Legislation related to the classification of drug possession

continues to evolve. During May 2023, the legislature passed [Second Engrossed Second Substitute Senate Bill 5536 Chapter 1, Laws of 2023](#), which reclassified drug possession as a gross misdemeanor.

## [Criminal Justice Training Commission Training Courses](#)

To work as a correctional officer, individuals must complete training courses provided by the CJTC. State law requires individuals to complete CJTC training within six months of starting employment as a correctional officer (CO).<sup>13</sup>

### [Corrections Officer Academy](#)

Newly hired officers who are primarily responsible for the custody, safety, and security of adults in jails must complete the CJTC's Corrections Officer Academy (COA).<sup>14</sup> Currently, the COA is a 400-hour program that is administered over ten weeks.<sup>15</sup> The COA provides instruction in the following topics:

- Cell search,
- Cognitive command,
- Communication,
- Control/defensive tactics,
- Crisis,
- Fitness,
- Guardianship philosophy,
- Jail operations,
- Practical law,
- Practical skills & mock scenarios, and
- Security management.<sup>16</sup>

Before 2021, the COA lasted four weeks, and classes were held roughly ten times a year. In 2021, legislation increased the COA length to ten weeks.<sup>17</sup>

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<sup>13</sup> [RCW 43.101.350](#).

<sup>14</sup> [RCW 43.101.220](#).

<sup>15</sup> COA courses were traditionally all held at CJTC's main office in Burien, but as of April 2024, COA classes are also taking place at regional offices in Spokane and Vancouver. However, the opening of these offices occurred after the observation period for our study.

This increase allowed for additional topics to be introduced to the curriculum, such as scenario-based training. After 2021, COA classes have been held quarterly (i.e., a 60% decrease in frequency). Although the CJTC increased the number of seats in the COA, this was not enough to offset the drop in frequency, resulting in a net reduction in COA capacity.

### [Juvenile Corrections Officer Academy](#)

Newly hired officers who are responsible for the custody, safety, and security of juveniles must complete the CJTC's Juvenile Corrections Officer Academy (JCOA).<sup>18</sup> This is an 80-hour program spread over eight days of instruction.<sup>19</sup> Course topics include the following:

- Observation skills,
- Interpersonal skills,
- Security management,
- Supervision of youth,
- Proper use of physical force,
- Legal issues,
- Report writing,
- Dealing with aggressive behavior,
- Handling mental illness problems,
- Professionalism, and
- Human relations/cultural awareness.<sup>20</sup>

In recent years, the JCOA has not experienced any significant changes in the content or length of training. Classes are held about once every six months.

<sup>16</sup> CJTC. *Corrections Officers Academy 400-hour syllabus*.

<sup>17</sup> [RCW 43.101.220](#).

<sup>18</sup> [WAC 139-10-240](#).

<sup>19</sup> Individuals working with juveniles must complete the JCOA but are not required to complete the COA.

<sup>20</sup> [CJTC. Juvenile Corrections Officer Academy](#).

## II. Data and Methods

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In this section, we review the three main types of data that we used for our study. First, we discuss the information we collected to measure changes in population characteristics. Next, we describe our survey of local facilities. Finally, we discuss the data we received from the CJTC.

### Trends in Population Characteristics

We use administrative data to measure the characteristics of individuals admitted to jail and juvenile detention centers (JDCs) between 2010 and 2022.

#### Data Sources

We compiled information from the Health Care Authority (HCA), the Office of Financial Management (OFM), the Administrative Office of the Courts (AOC), WSIPP's Criminal History Database (CHD),<sup>21</sup> the Department of Social and Health Services (DSHS), and the Behavioral Health Administration (BHA).

WSIPP receives information on individuals held in jail facilities via the Jail Booking and Reporting System (JBRS) and individuals held in juvenile detention centers via the Juvenile and Corrections System (JCS).<sup>22</sup> Unfortunately, we did not have jail data for King County.<sup>23</sup>

#### Data Processing

As an initial step, we used records from JBRS and JCS to create a dataset containing information on individuals who spent at least 24 hours in a Washington State jail or JDC between January 1, 2010, and December 31, 2022. This process generated a dataset with roughly 1.6 million observations.<sup>24</sup>

Next, we linked this dataset with records in WSIPP's CHD to obtain information about criminal history and demographic characteristics. We were able to successfully match 98.3% of observations in the JBRS/JCS dataset with CHD records.<sup>25</sup>

Finally, we shared the JBRS/JCS dataset with Research and Data Analysis (RDA) at DSHS to obtain information on physical and behavioral health conditions. RDA linked this dataset with Medicaid payment records in their Integrated Client Database.

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<sup>21</sup> The CHD includes data from the Department of Corrections (DOC).

<sup>22</sup> WSIPP receives JBRS data from OFM and JCS data from AOC.

<sup>23</sup> King County submits jail data to JBRS, but OFM does not receive this data. Because OFM provides WSIPP with JBRS data, we did not have King County jail data.

<sup>24</sup> In this dataset, each observation corresponds to a "booking event" where an individual was admitted to a jail or JDC and stayed for at least 24 consecutive hours. We chose

these selection criteria to focus on the characteristics of individuals who spent a meaningful amount of time in confinement.

<sup>25</sup> JBRS/JCS data may not match CHD records when criminal records are expunged, when data are missing, or when individuals do not have criminal records in Washington. This can happen if an individual is transferred to a jail or JDC from out of state. It can also happen if an individual is arrested and detained but never charged with a crime.



Because the health measures are based on Medicaid records, RDA screened out observations for individuals who did not have at least one month of Medicaid eligibility during the 24 months before the facility admission date.<sup>26</sup> RDA then reviewed Medicaid records to establish whether individuals received treatment for various health conditions.<sup>27</sup> If an individual received treatment for a given condition at least once during the 12 months before their facility admission date, they were coded as having the associated health condition. RDA compiled statistics on the annual prevalence of different health conditions and shared these statistics with WSIPP.

### Measures

We constructed a variety of measures to examine the characteristics of individuals admitted to jail and JDC facilities.

*Number of Admissions.* We measure annual admissions based on the number of booking events where individuals spent at least 24 consecutive hours in the jail or JDC facility.<sup>28</sup>

*Demographics.* We examined the sex, age, and racial/ethnic composition of individuals

admitted to jails and JDCs. We measured sex composition by calculating the percentage of annual admissions for men and women. We measured the age composition based on how old individuals were when they were admitted to the facility.

We measured the racial/ethnic composition by calculating the percentage of annual admissions for individuals from different racial/ethnic groups. We sorted individuals into one of five categories: White, Black, Hispanic, Asian/Pacific Islander, and American Indian/Alaskan Native. We placed all Hispanic individuals in the same category regardless of race. Other categories exclude Hispanic individuals.

*Criminal History.* We constructed criminal history measures based on convictions for offenses that occurred before the admission date for the booking event.<sup>29</sup> We separately examine convictions for misdemeanor and felony offenses.

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<sup>26</sup> Washington expanded Medicaid coverage two times during the observation period for our study. Between 2011 and 2013, Washington used a waiver from the Centers for Medicare and Medicaid Services to expand coverage through a provision in the Affordable Care Act (ACA). In January 2014, Medicaid coverage expanded again as the full ACA took effect. See Washington Transitional Bridge Demonstration. Project number 11-W-00254/10 (Title XIX); Patient Protection and Affordable Care Act of 2010, Pub. L. No. 111-148, 124 Stat. 119 (2010).

<sup>27</sup> DSHS-RDA relied on the International Classification of Diseases (ICD) to classify health conditions based on treatment records. However, the ICD switched from the 9<sup>th</sup> edition (ICD-9) to the 10<sup>th</sup> edition (ICD-10) during October 2015. As a result, RDA used the ICD-9 to classify health conditions that were treated between January 2010 and September 2015, then used the ICD-10 to classify health

conditions that were treated between October 2015 and December 2022. Because ICD-10 codes capture a higher level of detail than ICD-9 codes, comparisons between rates before and after 2015 should be interpreted with caution.

<sup>28</sup> We categorize booking events based on the year of the admission date.

<sup>29</sup> We indexed all criminal history measures based on offense date. As a result, these measures capture criminal behavior that occurred before the date of admission to the jail/JDC facility. For example, if an individual committed a crime on February 1, 2010, was arrested and admitted to a jail facility on March 1, 2010, and was later convicted of the offense, then this conviction would be included in the individual's criminal history in relation to their March 2010 jail stay. Thus, our criminal history measures account for the type of offense that resulted in each individual's jail/JDC stay.



We created indicator variables to measure convictions for five types of misdemeanors: any, weapon, violent, alcohol/drugs, and property.<sup>30</sup>

The second set of criminal history measures focuses on convictions for felonies.<sup>31</sup> We created indicator variables to measure convictions for the felony version of the same five types of offenses: any felonies, weapon, violent, alcohol/drugs, and property.

*Physical Health.* We received information on the percentage of individuals admitted to jails and JDCs between 2010 and 2022 who had five physical health conditions:<sup>32</sup> infectious disease, cardiovascular disease, diabetes, liver disease, and developmental disabilities.<sup>33</sup>

*Behavioral Health.* We received information on the percentage of individuals admitted to jails and JDCs between 2010 and 2022 who exhibited behavioral health needs.

We focus on four measures: substance use disorder (SUD) treatment need,<sup>34</sup> mental health treatment need,<sup>35</sup> psychiatric condition,<sup>36</sup> and psychiatric hospitalization.<sup>37</sup>

*Need for Competency Services.* After being arrested and detained in a local facility, individuals with severe mental health issues may require competency evaluation services to establish whether they are able to understand the criminal proceedings.<sup>38</sup> If so, state law requires that the individual receive competency restoration services. This typically involves transferring the individual to a specialized facility where they will receive treatment (e.g., therapy, psychiatric medication) until they are deemed competent to stand trial. We received information on the percentage of individuals admitted to jail facilities who required competency evaluation/restoration services between 2019 and 2022.<sup>39</sup>

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<sup>30</sup> Misdemeanors are minor crimes that carry a maximum sentence of 90 days in jail and/or a \$1,000 fine (e.g., trespassing, prostitution). Gross misdemeanors are more serious than standard misdemeanors and are punishable by up to one year in jail and/or a \$5,000 fine (e.g., theft of less than \$750, reckless endangerment). [RCW 9A.20.021](#).

<sup>31</sup> Felonies are serious crimes that carry a maximum sentence of life imprisonment and/or a \$50,000 fine (e.g., murder, aggravated assault, burglary). [RCW 9A.20.021](#).

<sup>32</sup> We also received data on those with cancer and HIV/AIDS, but these conditions were rarely treated in the jail and JDC populations, so we omit them here (i.e., less than 1.5% annually).

<sup>33</sup> Developmental disabilities are a collection of physical or cognitive impairments that impact communication, learning, or behavior (e.g., Autism, Down syndrome, intellectual disability).

<sup>34</sup> Becker, T., Henzel, P., Harrison, P., Black, C., Mayfield, J., Huber, A., Barbara, & Felver, E. (2022). *The impact of prosecutorial diversion programs on behavioral health service use and criminal justice system involvement an evaluation of DSHS-contracted diversion programs*. DSHS Research and Data Analysis Division Olympia, Washington.

<sup>35</sup> According to Becker et al. (2022), "Mental health and substance use disorder treatment need indicators are based on health and behavioral health diagnoses, prescription and treatment records. Drug and alcohol-related arrest data maintained by the WSP were also used to identify probable substance use issues."

<sup>36</sup> The measure "psychiatric condition" includes diagnosis for psychosis, mania/bipolar, depression, suicide/self-harm event, suicidal ideation, anxiety, attention-deficit/hyperactivity disorder (ADHD), impulse/conduct disorder, trauma/stressor disorder, somatoform disorder, factitious disorder, selected personality disorders, eating disorders, and miscellaneous mental health conditions.

<sup>37</sup> According to Becker et al. (2022), this measure includes "Western and Eastern State Hospital admissions, short-term community psychiatric hospitalizations, and inpatient stays at an evaluation and treatment facility."

<sup>38</sup> According to [RCW 10.77](#), "incompetency means a person lacks the capacity to understand the nature of the proceedings against him or her or to assist in his or her own defense as a result of mental disease or defect."

<sup>39</sup> Statistics on competency evaluation/restoration services were only available for individuals in the jail population between 2019 and 2022.

## Survey of Local Facilities

During the summer of 2023, WSIPP designed a survey in collaboration with the Washington State Association of Counties (WSAC). The survey included questions about 12 topics (Exhibit 2).<sup>40</sup>

### Exhibit 2 Survey Topics

- 1) Correctional officers
- 2) Attitudes toward CJTC courses
- 3) Condition of physical assets
- 4) Strategies for improving facilities
- 5) Regionalization\*
- 6) Supervised population
- 7) Capacity and crowding
- 8) Behavioral health
- 9) Health services
- 10) Reentry services
- 11) Annual expenses and funding
- 12) Important issues\*

Note:

\* We present the survey results for “regionalization” and “important issues” in [Appendix IV](#).

To identify eligible respondents, WSAC coordinated with county officials to develop a list of institutions that met the following criteria: 1) the institution served as a jail or juvenile detention center (JDC) in Washington State; 2) the institution was operational during August 2023; and 3) the institution was administered by cities or counties.<sup>41</sup>

<sup>40</sup> See [Appendix I](#) to access a link to the questionnaire.

<sup>41</sup> Throughout this report, we use the term “local” to refer to city/county government. This excludes Tribal, state, or federal authorities.

<sup>42</sup> Most respondents (85.7%) reported that their institution operated a single facility. However, eight respondents (14.3%) indicated that their institution operated two facilities. Thus, our sample covers 56 institutions and 64 facilities.

<sup>43</sup> Most respondents (85.7%) reported that their institution was serving a county (or counties) located in a single region of Washington. Although one respondent reported that their institution served counties in both regions, 75% of those

A total of 56 institutions met these criteria, including 35 jails and 21 JDCs.

Data collection took place between September and December 2023.

In total, we received survey responses from 56 institutions operating 64 facilities.<sup>42</sup> To our knowledge, this represents all local jails and JDCs that were operational in Washington in August 2023. Thus, we received survey responses from 100% of the 56 institutions.

*Sample Characteristics.* Of 56 respondents, 35 (62.5%) identified their institution as a jail, and 21 (37.5%) identified it as a JDC. In addition, 32 institutions (57.1%) served western counties, and 24 (42.9%) served eastern counties.<sup>43</sup>

Past research suggests that the size of criminal justice institutions can impact how they function.<sup>44</sup> To account for this, we categorized institutions based on the size of their confined population and correctional workforce during August 2023. Specifically, we used survey data to measure the maximum daily count of confined individuals held in the institution (which ranged from 0 to 1,440), as well as the number of correctional officers (COs) employed by the institution when it is fully staffed (which ranged from 8 to 510).<sup>45</sup>

counties were located in Western Washington, so we categorized this respondent’s institution as serving Western Washington.

<sup>44</sup> Skarbek, D. (2014). *The social order of the underworld: How prison gangs govern the American penal system*. Oxford University Press and Ulmer, J.T. (1997). *Social worlds of sentencing: Court communities under sentencing guidelines*. SUNY Press.

<sup>45</sup> If an institution ranked in the lower 20% of the sample on either measure, we categorize it as “small.” If an institution ranked in the middle 60% on both measures, we categorize it

To illustrate differences in institutional size, we report the median value for the size of the confined population and correctional workforce in [Exhibit 3](#).

The results indicate that the size of these institutions varies widely. For example, the median number of people in confinement at large institutions was ten times greater than medium-sized institutions and 40 times greater than small institutions.

**Exhibit 3**  
Institutional Size

Measure	Institutional size		
	Small	Medium	Large
No. of institutions	19	25	12
Confined population: highest daily count			
Median	11	46	477
Number of COs when fully staffed			
Median	13	26	116
Institution type/region			
Western Jails	3 (15.8%)	7 (28%)	8 (66.7%)
Western JDCs	8 (42.1%)	5 (20%)	1 (8.3%)
Eastern Jails	6 (31.6%)	8 (32%)	3 (25%)
Eastern JDCs	2 (10.5%)	5 (20%)	0 (0%)

Notes:

CO = Correctional officer.

Percentages are calculated based on the number of institutions within each column.

*Placement and Coverage.* The survey asked respondents how many counties their institution served. Among western counties, 17 out of 19 have their own dedicated jail, and 12 out of 19 have their own JDC. Most eastern counties (15 out of 20) have their own dedicated jail, but only a minority (4 out of 20) have their own dedicated JDC. As a result, eastern JDCs often served multiple counties.<sup>46</sup>

[Exhibit 4](#) shows the spatial distribution of local jails and JDCs across Washington.

[Criminal Justice Training Commission Data](#)

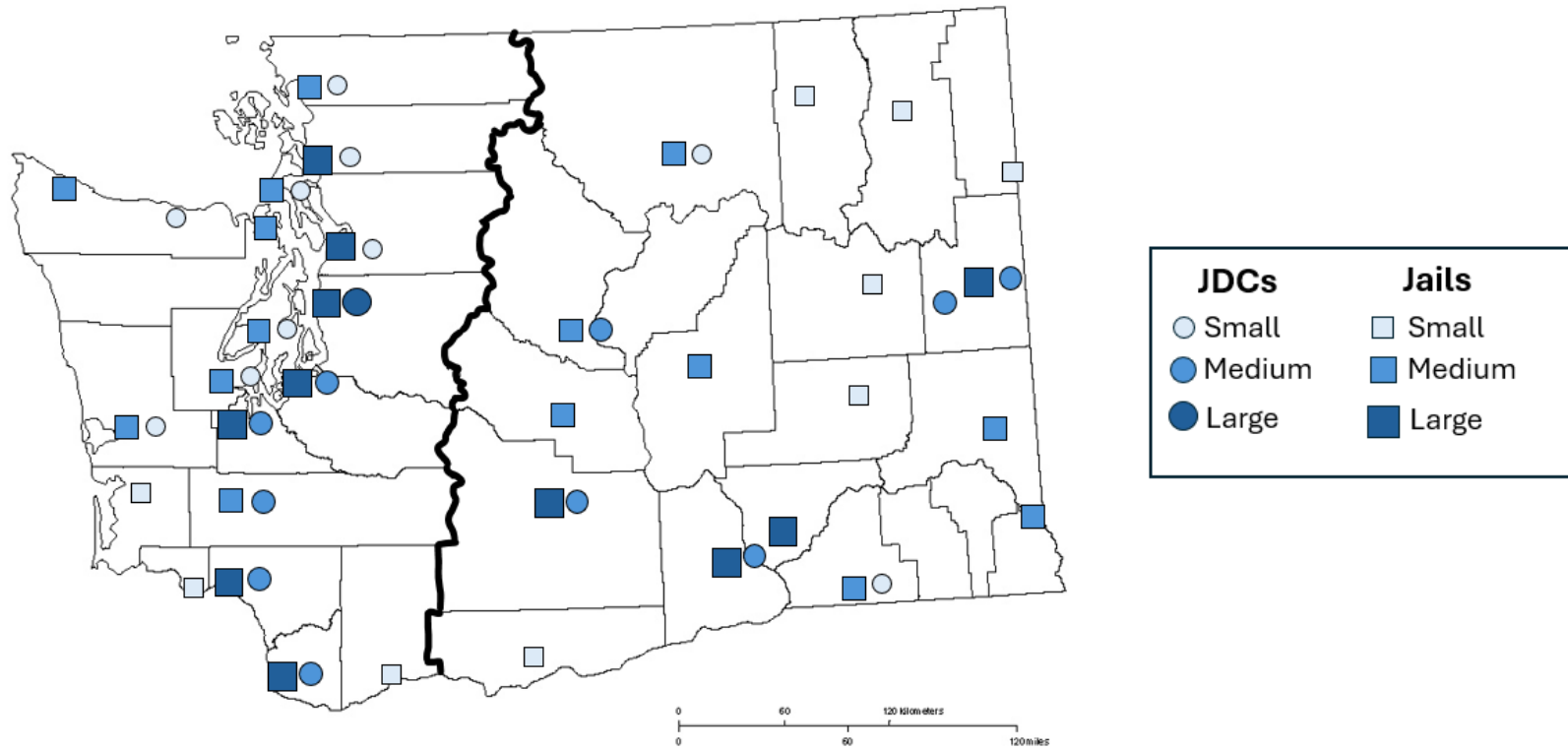
We received administrative data from CJTC that measures course completion outcomes for individuals enrolled in the COA and JCOA between 2016 and 2023. Individuals who completed the training are coded as “graduates,” and those who did not complete training are coded as “departed.”

as “medium.” If an institution ranked in the upper 20% on either measure, we categorize it as “large.”

<sup>46</sup> For example, Martin Hall—a JDC in Eastern Washington—reportedly serves ten counties.

### Exhibit 4

Approximate Location of Local Jails and Juvenile Detention Centers (JDCs) in Washington State



Notes:

N=56.

In many counties, the jail and JDC are located close to each other. As a result, we adjusted the placement of icons to avoid visual overlap.

### III. Confined Population

In this section, we describe the characteristics of individuals confined in jails and JDCs using two data sources. We use administrative records to examine changes in characteristics between 2010 and 2022. In addition, we use survey data measuring different characteristics of the confined population on August 31, 2023.

#### Number of Confined Individuals

##### Annual Admissions

Panel A of [Exhibit 5](#) shows annual admissions to jail facilities between 2010 and 2022. Between 2010 and 2019, admissions were relatively stable, with an average of about 127,000 admissions per year. However, there was a substantial decrease between 2019 and 2020, as annual jail admissions declined by 42.1%, likely due to COVID-19. Jail admissions fell to around 66,000 in 2021—the lowest number we observed for jails during this period—but began to rebound in 2022 with about 72,000 admissions.

Panel B of [Exhibit 5](#) shows annual admissions to JDC facilities between 2010 and 2022. Juvenile detention center admissions declined every year between 2010 and 2021, followed by a slight uptick in 2022. There was a sharp decrease in JDC admissions between 2019 and 2020, which again likely reflects the impact of COVID-19.

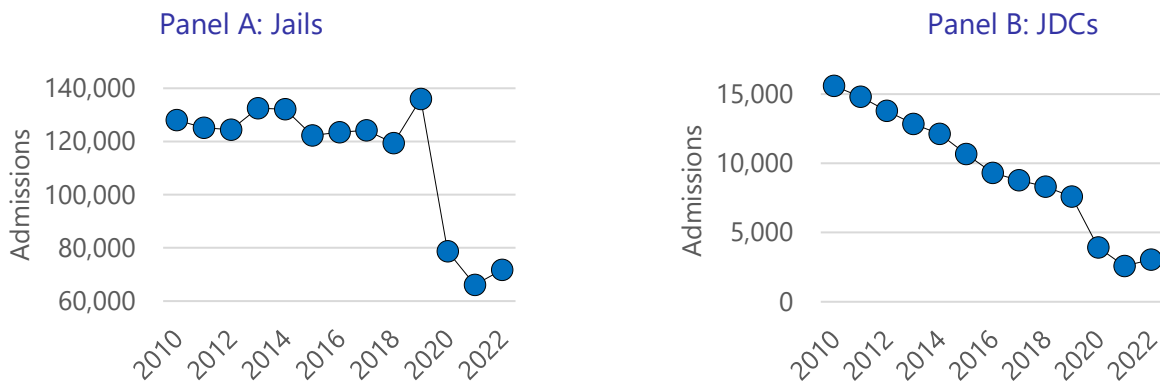
##### Confined Population on August 31, 2023

The survey asked respondents to provide a count of all individuals who were under the supervision of the institution on August 31, 2023. This point-in-time estimate is a different way to measure the confined population than annual admissions.

[Exhibit 6](#) reveals large differences in the size of the confined population for jails and JDCs. On August 31, 2023, the average number of people in confinement was 219.7 for jails and 12.1 for JDCs. Thus, the average jail held roughly 18 times as many people in confinement as the average JDC.

#### Exhibit 5

Annual Admissions: 2010 to 2022



**Notes:**

Each observation corresponds to a booking event where an individual was admitted to a jail or JDC facility and spent at least 24 consecutive hours in confinement.

Booking events for jails in King County are excluded.

## Exhibit 6

### Size of the Supervised Population: August 31, 2023

Measure	Western WA		Eastern WA	
	Jails	JDCs	Jails	JDCs
No. of institutions	18	14	17	7
Size of the confined population				
Range (min – max)	7 – 1,360	3 – 41	0 – 818	4 – 32
Mean (Standard deviation)	267.1 (339.4)	11.1 (11.3)	169.5 (237.9)	14.3 (10.8)
Median	174	6.5	59	10
No. which supervises unconfined individuals	10 (55.6%)	9 (64.3%)	8 (47.1%)	1 (14.3%)
No. of institutions	10	9	8	1
Size of supervised/unconfined population				
Range (min – max)	2 – 508*	1 – 263	1 – 20	
Mean (Standard deviation)	61.6 (157.2)	61.2 (83.1)	7.8 (7.1)	12 <sup>^</sup>
Median	9.5	37	4	

**Notes:**

The shaded row shows the percentage of institutions that supervised any unconfined individuals.

\* One Western WA jail respondent indicated that their institution supervised 508 unconfined individuals. However, this is an outlier. The other nine Western WA jail respondents reported values between two and 35.

<sup>^</sup> Only a single Eastern WA JDC supervised unconfined individuals. As a result, we simply report the total size of the supervised/unconfined population for this respondent.

We also found evidence of regional differences in population size by institution type. For example, the size of the confined population tended to be slightly larger at eastern JDCs than at western JDCs. In addition, the size of the confined population tended to be larger in western jails than in eastern jails.

More generally, the results highlight extreme variation in the size of the confined population at jails across Washington. For example, the number of individuals in confinement at western jails ranged from 7 to 1,360. At eastern jails, the confined population ranged from 0 to 818 individuals.

Although jails and JDCs are primarily responsible for supervising individuals in confinement, they may also supervise individuals who live in the community.

The shaded row in [Exhibit 6](#) shows the number of institutions that supervised any unconfined individuals.<sup>47</sup> Only half of the institutions in our sample (28 out of 56) were responsible for supervising unconfined individuals. The bottom panel of [Exhibit 6](#) shows statistics on the size of the supervised unconfined population for these 28 institutions.

<sup>47</sup> The survey defined the supervised unconfined population as “people in community-based programs (e.g., *electronic monitoring, home detention, community service, day*

*reporting, alcohol/drug treatment programs, etc.) who do not return to the institution at night.”*

We found that western JDCs were most likely to supervise unconfined individuals (64.3%) and had higher population sizes (median of 37). In addition, we found a relationship between the size of the institution and the size of this population, with larger institutions supervising more individuals.

### Confined on Behalf of Other Authorities

It is common for individuals confined in jails and JDCs to be under the jurisdiction of the local government. However, some facilities may confine individuals on behalf of other authorities.<sup>48</sup>

The survey asked respondents whether any individuals were confined in their institution on behalf of other authorities on August 31, 2023. We found that 55.4% of respondents (31 out of 56) answered “yes” to this question ([Exhibit 7](#)).

In exploratory analyses, we found that institutional size was the strongest predictor of how respondents answered this question.<sup>49</sup> Small institutions were the least likely to hold individuals in confinement on behalf of other authorities, while large institutions were the most likely.

The 31 respondents who indicated that their institution confined individuals on behalf of other authorities received a series of follow-up questions to measure the size of this population.<sup>50</sup> We used this information to calculate the percentage of each institution’s confined population that was being held on behalf of other authorities on August 31, 2023. We show descriptive statistics for this measure in the bottom (shaded) panel of [Exhibit 7](#).

## Exhibit 7

Individuals Confined on Behalf of Other Authorities: August 31, 2023

Measure	Western WA		Eastern WA	
	Jails	JDCs	Jails	JDCs
No. of institutions	18	14	17	7
Has individuals confined for other authorities	10 (55.6%)	6 (42.9%)	10 (58.8%)	5 (71.4%)
% confined for other authorities				
Range (min-max)	0.8 – 100%	7.1 – 50%	6.7 – 100%	9.4 – 100%
Mean (Standard deviation)	43.0% (38.9%)	22.2% (16.3%)	31.5% (26.9%)	49.7% (33.4%)
Median	28.2%	15.7%	24%	50%

Note:

Statistics shown in the shaded panel were only calculated for institutions that confined individuals on behalf of other authorities.

<sup>48</sup> For example, local facilities may temporarily hold individuals on behalf of federal, state, or Tribal authorities.

<sup>49</sup> See [Appendix II](#) for more details.

<sup>50</sup> The survey asked separate questions for seven different types of authorities. For more details, see the [Appendix I](#) for a link to the questionnaire.



On average, about one-third (36.6%) of the confined population at these 31 institutions was being held for other authorities. In exploratory analyses, we found that this population was mostly composed of individuals confined on behalf of “other cities in Washington” and “other counties in Washington.”<sup>51</sup>

We also found that the proportion confined for other authorities was higher at eastern JDCs than at western JDCs. On average, 49.7% of the confined population at eastern JDCs were held for other authorities compared to 22.2% for western JDCs.

## Demographics

### Sex

During 2010-2022, males accounted for the majority of the jail population (76-80%) and the JDC population (70-74%).

### Age

Panel A of [Exhibit 8](#) shows the age composition of the jail population between 2010 and 2022. The most noteworthy pattern relates to the percentage of individuals between the ages of 18-25. This age group accounted for 30% of the jail population in 2010 but only 15% in 2022. The average age of the jail population increased from 33.4 years in 2010 to 36.5 years in 2022.

Panel B of [Exhibit 8](#) shows the age composition of the JDC population. Overall, the results indicate that this population experienced a small shift toward housing individuals younger than age 16. However, the average age of the JDC population held steady at about 16 years during this period, ranging from a low of 15.8 years to a high of 16.1 years.

### Race/Ethnicity

The racial/ethnic composition of the jail population was relatively stable between 2010 and 2022. White individuals accounted for the majority of the jail population (67-71%), followed by Black (11-14%) and Hispanic individuals (10-11%). A small percentage of the jail population consisted of Asian/Pacific Islander individuals (4-5%) and American Indian/Alaskan Native individuals (2-4%).

The racial/ethnic composition of the JDC population was also relatively stable during this period. White individuals accounted for most of the JDC population (52-60%), followed by Hispanic (24-29%) and Black individuals (9-13%). A small percentage of the JDC population consisted of Asian/Pacific Islander individuals (4-6%) and American Indian/Alaskan Native individuals (1-4%).

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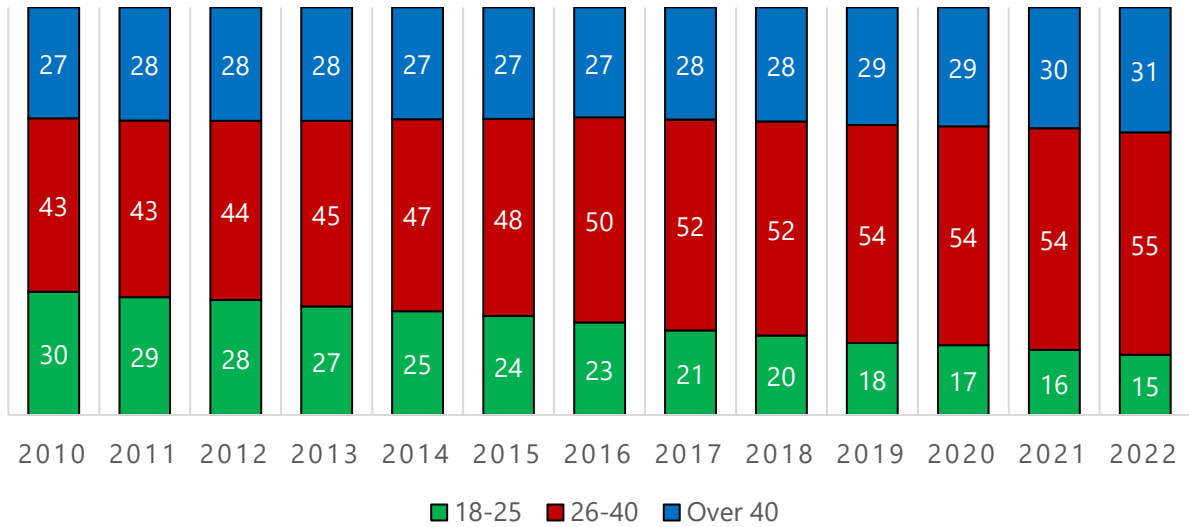
<sup>51</sup> We also measured the number of individuals confined on behalf of DOC and “other Washington State agencies.” This was uncommon, as 71.4% and 84% of institutions did not

confine a single person on behalf of DOC or “other Washington State agencies,” respectively.

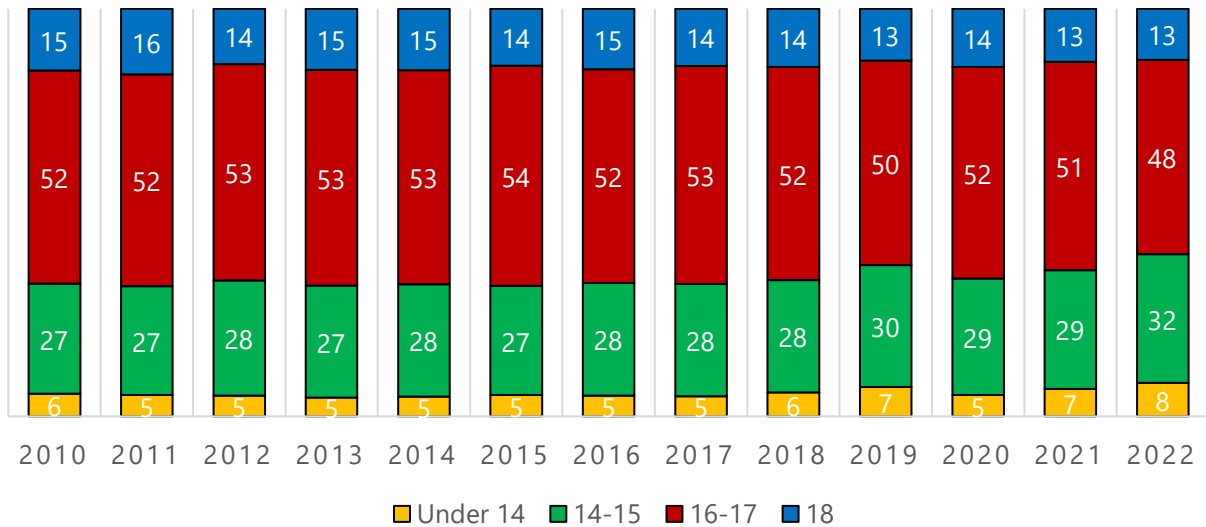
### Exhibit 8

#### Age Composition: 2010 to 2022

Panel A: Jails



Panel B: JDCs



Note:

The numbers within each bar represent percentages that sum to 100.

## Criminal History

### Misdemeanor Convictions

Panel A of [Exhibit 9](#) shows the prevalence of misdemeanor convictions for the jail population between 2010 and 2022. The percentage of the population with convictions for three types of misdemeanors (i.e., any, weapon, property) remained relatively stable, convictions for alcohol/drug offenses decreased, and convictions for violent offenses increased.

Panel B of [Exhibit 9](#) shows the prevalence of misdemeanor convictions for the JDC population. The percentage convicted of misdemeanor weapon offenses remained stable, convictions for three types of misdemeanor offenses (i.e., any, alcohol/drug, property) decreased, and convictions for violent offenses increased.

### Felony Convictions

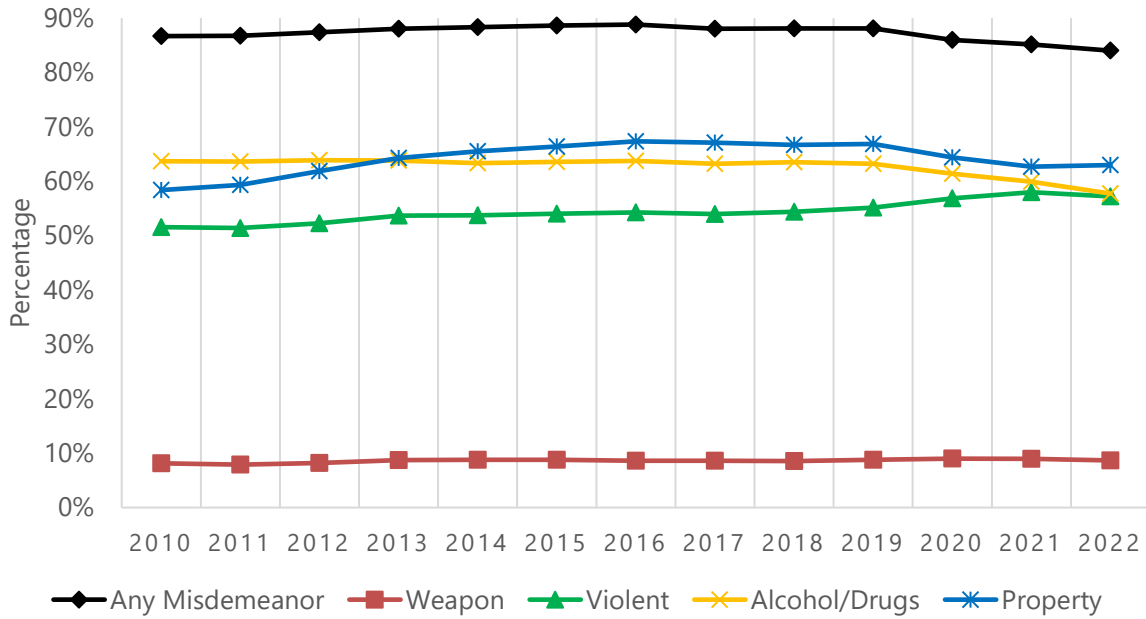
Panel A of [Exhibit 10](#) shows the prevalence of felony convictions for the jail population between 2010 and 2022. The percentage of the population with convictions for two types of felonies (i.e., any, property) remained relatively stable, convictions for alcohol/drug offenses decreased, and convictions for weapon and violent offenses increased.

Panel B of [Exhibit 10](#) shows the prevalence of felony convictions for the JDC population. The percentage of the JDC population with convictions for two types of felony offenses (i.e., property, alcohol/drug) decreased, while convictions for three types of felony offenses (i.e., any, weapon, violent) increased.

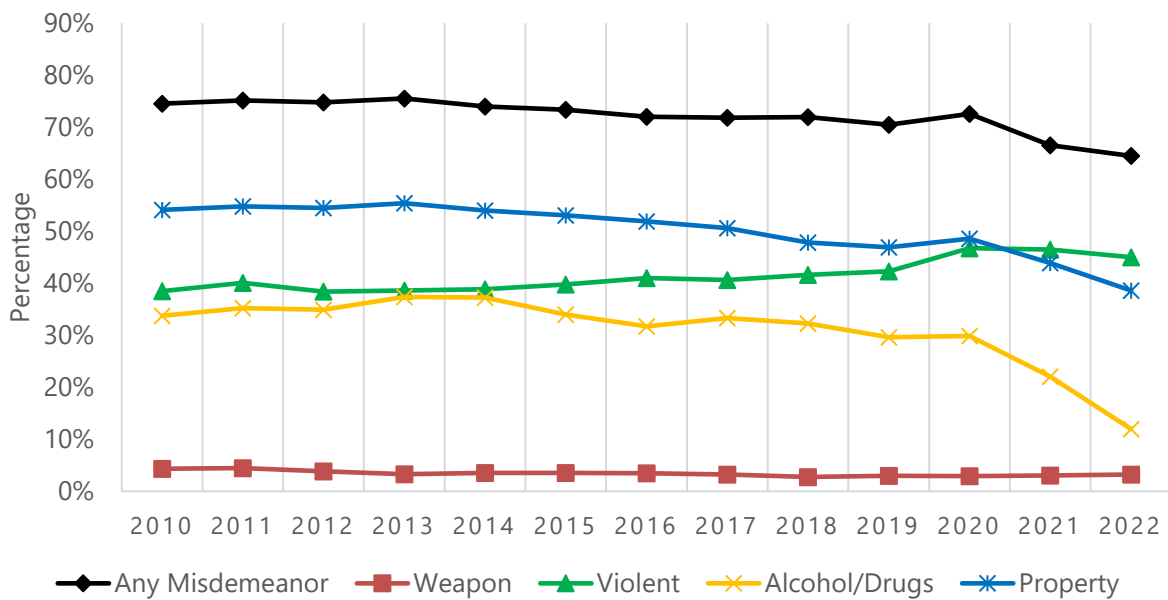
### Exhibit 9

#### Misdemeanor Convictions: 2010 to 2022

Panel A: Jails



Panel B: JDCs

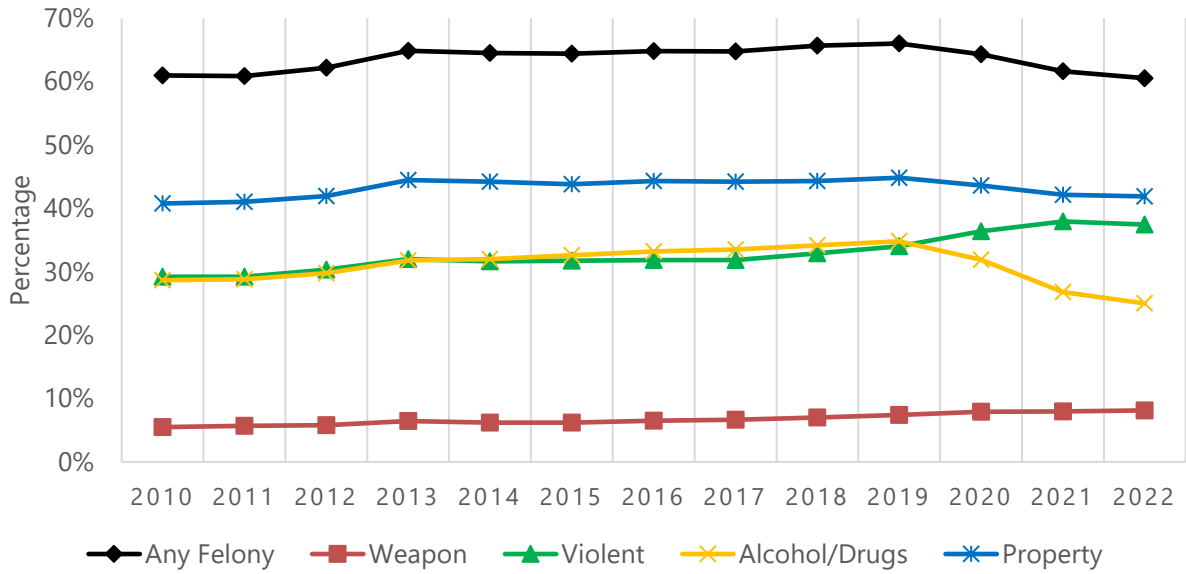


Note:

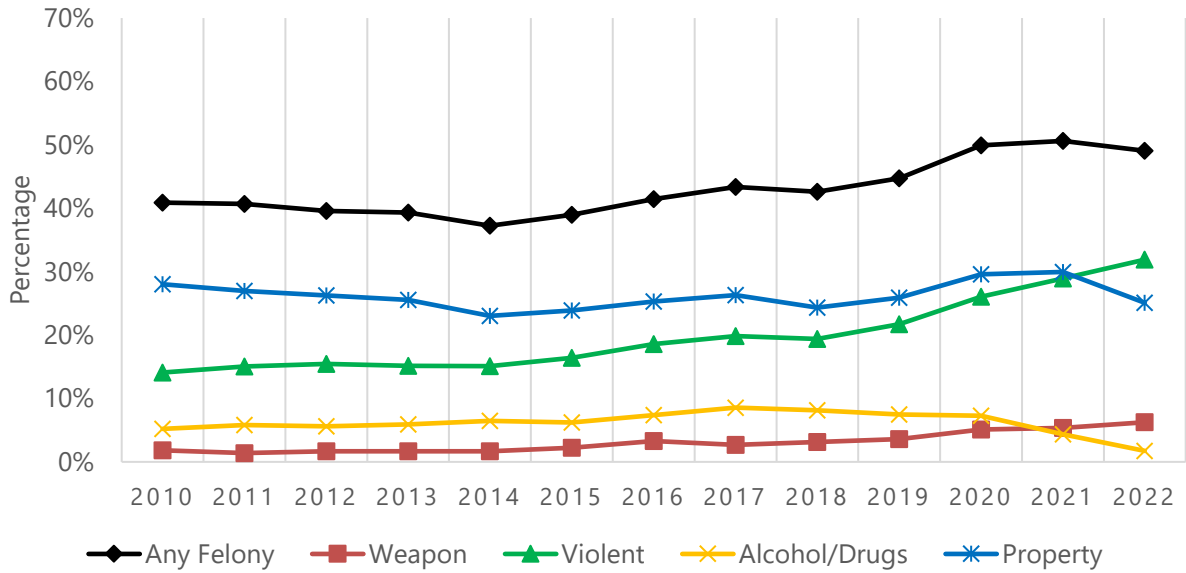
Percentages do not sum to 100, as individuals could have convictions for different types of misdemeanors.

### Exhibit 10 Felony Convictions: 2010 to 2022

Panel A: Jails



Panel B: JDCs



Note:

Percentages do not sum to 100, as individuals could have convictions for different types of felonies.

## Health Characteristics

### Physical Health

Panel A of [Exhibit 11](#) shows the percentage of individuals in the jail population who received treatment for infectious disease, cardiovascular disease, diabetes, or liver disease in the 12 months before being admitted to the jail facility.<sup>52</sup> Between 2010 and 2022, the prevalence of infectious disease and cardiovascular disease increased, while the prevalence of diabetes and liver disease remained stable.

Panel B of [Exhibit 11](#) shows the percentage of the JDC population that received treatment for infectious disease, cardiovascular disease, or developmental disabilities in the 12 months before being admitted to the detention facility.<sup>53</sup> Between 2010 and 2022, the prevalence of infectious disease slightly decreased, cardiovascular disease slightly increased, and developmental disabilities increased substantially.

### Behavioral Health

Panel A of [Exhibit 12](#) shows the percentage of individuals in the jail population who exhibited behavioral health conditions. Overall, the prevalence of behavioral health issues increased between 2010 and 2022. However, there was a small drop in the percentage of individuals with SUD treatment needs between 2020 (75.5%) and 2022 (71.9%).

Panel B of [Exhibit 12](#) shows the results for the JDC population. Overall, the patterns indicate that the prevalence of SUD treatment needs decreased between 2010 and 2022 but mental health issues increased.

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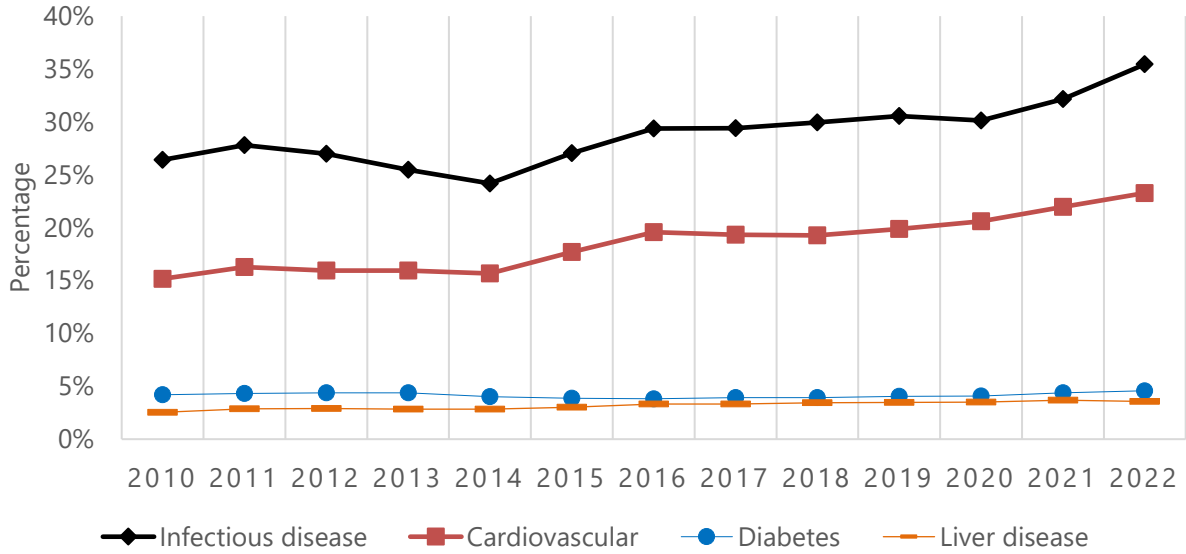
<sup>52</sup> In this exhibit, we omit the pattern for developmental disability because this condition was rarely treated in the jail population (i.e., less than 1.5% annually).

<sup>53</sup> In this exhibit, we omit the patterns for diabetes and liver disease because these conditions were rarely treated in the JDC population (i.e., less than 1.5% annually).

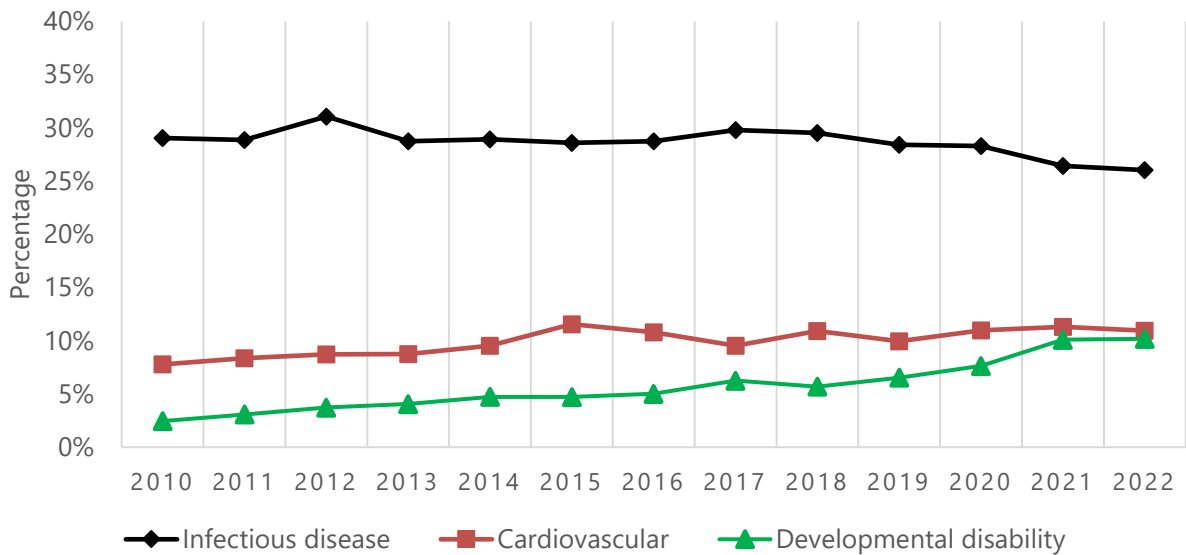
### Exhibit 11

#### Physical Health Conditions: 2010 to 2022

##### Panel A: Jails



##### Panel B: JDCs



**Notes:**

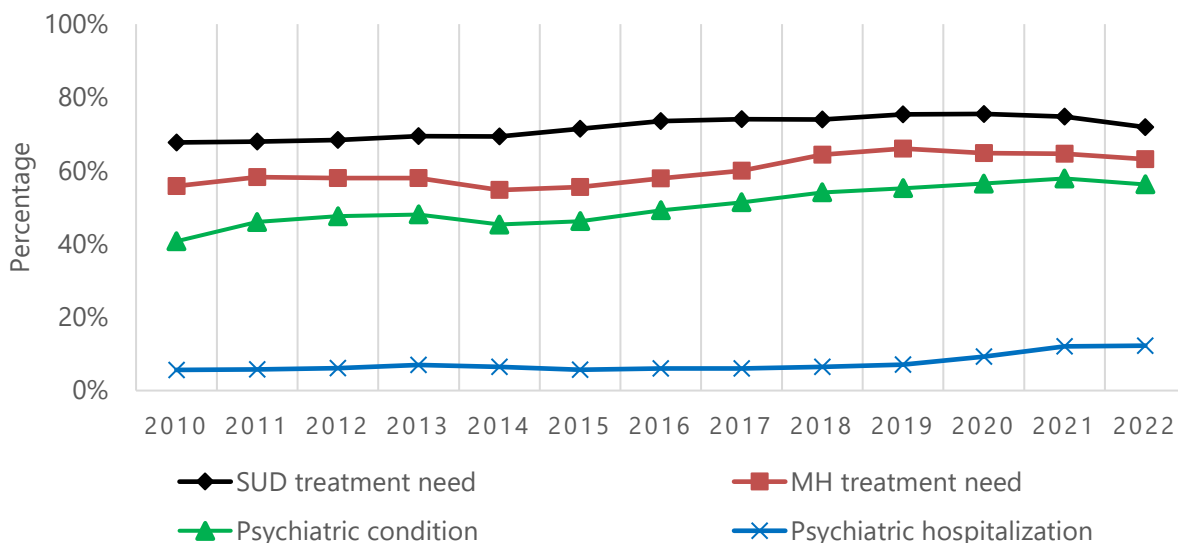
Values represent the percentage of individuals who received treatment in the 12 months before the date of jail/JDC admission. Percentages do not sum to 100, as individuals could have received treatment for multiple physical health conditions. Observations only include individuals eligible for Medicaid benefits for at least one month during the 24 months before the date of admission.



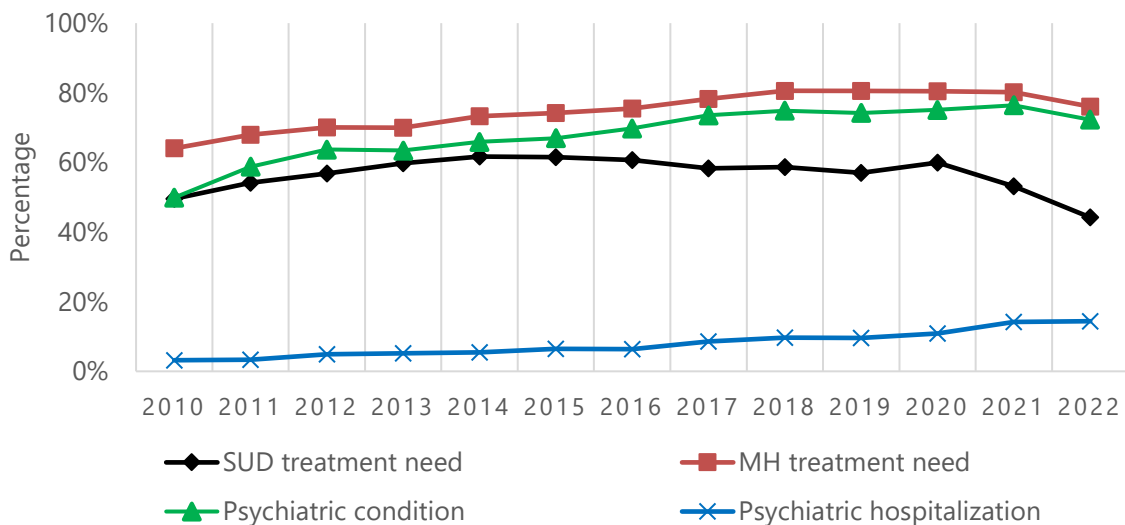
## Exhibit 12

### Behavioral Health Conditions: 2010 to 2022

Panel A: Jails



Panel B: JDCs



Notes:

Values represent the percentage of individuals who received treatment in the 12 months before the date of jail/JDC admission. Percentages do not sum to 100, as individuals could have received treatment for multiple behavioral health conditions. Observations only include individuals eligible for Medicaid benefits for at least one month during the 24 months before the date of admission.

The survey included questions about individuals in confinement who had behavioral health needs. The survey defined behavioral health needs as “a mental health disorder (*schizophrenia, depression, bipolar disorder, etc.*) and/or a substance use disorder (*compulsive misuse of alcohol, opiates, stimulates, etc.*)”

The survey also specified that respondents should only consider individuals to have behavioral health needs if there was clear evidence that they had a mental health and/or substance use disorder.<sup>54</sup>

### Confined Population with Behavioral Health Needs

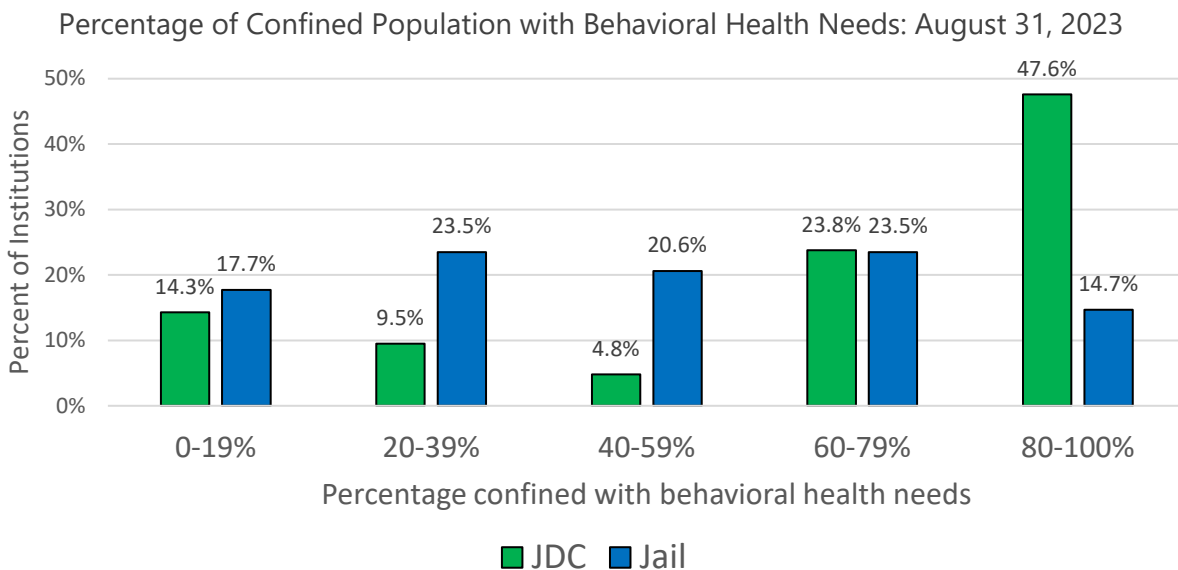
The survey asked respondents how many confined individuals had behavioral health needs on August 31, 2023.

We divided this value by the total size of the confined population to calculate the percentage of people who had behavioral health needs.<sup>55</sup> We show the results for jails and JDCs in [Exhibit 13](#).

In both jails and JDCs, respondents reported that a large proportion of the population had behavioral health needs. On average, respondents reported that 68.7% of the JDC population and 49.5% of the jail population had behavioral health needs.

The issue was most severe at JDCs. For example, nearly half of JDC respondents indicated that 80-100% of the confined population at their institution had behavioral health needs.<sup>56</sup>

### Exhibit 13



<sup>54</sup> The survey provided examples of instances where there was clear evidence of behavioral health needs, such as: 1) “the individual is receiving treatment for a mental health or substance use disorder”; 2) “the individual has a documented diagnosis of a mental health or substance use disorder”; or 3) “the individual is awaiting transfer to a mental health facility.”

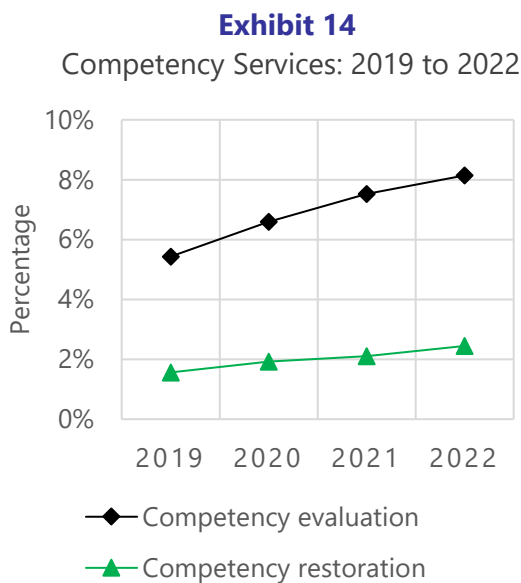
<sup>55</sup> One respondent skipped this question. As a result, the results are based on survey responses from 55 institutions.

<sup>56</sup> In total, seven JDC respondents indicated that 100% of the confined population at their institution had behavioral health needs.

### Need for Competency Services

As discussed in [Section II](#), confined individuals may receive services to evaluate and restore competency. If competency restoration services are required, then individuals will be transferred to a state hospital or other specialized facility where they will receive treatment until they are deemed competent to stand trial.

[Exhibit 14](#) shows the percentage of individuals in the jail population who required competency services between 2019 and 2022. Over time, the percentage who received competency evaluation services increased from 5.4% in 2019 to 8.1% in 2022. Similarly, the percentage of those who received competency restoration services increased from 1.6% in 2019 to 2.5% in 2022.



**Note:**

Values represent the percentage of individuals in the jail population who received competency services in the 12 months before the date of admission.

### Awaiting Transfer for Competency Restoration Services

Local jails and JDCs are responsible for housing individuals who require competency restoration services while they are awaiting transfer. To measure the size of this population, the survey asked: “On August 31, 2023, how many facility residents were waiting to be transferred for competency restoration services?”

We present the results in [Exhibit 15](#). The top panel shows the percentage of respondents who reported that any individuals were awaiting transfer. We found that 29 institutions (52.7%) had at least one individual in confinement who was awaiting transfer for competency restoration services.

This was substantially more common for jails than JDCs. For example, about 77% of jails (26 out of 34) had individuals in confinement who were awaiting transfer, compared to only 14.3% of JDCs (3 out of 21).

In exploratory analyses, we also found that institutional size was strongly associated with the likelihood of having individuals in confinement who were awaiting transfer for competency restoration services.<sup>57</sup> This was common for large and medium-sized institutions but rare for small institutions.

The bottom panel of [Exhibit 15](#) shows the percentage of the confined population that was awaiting transfer for competency restoration services. The results indicate that individuals awaiting transfer comprised a small percentage of the confined population. On average, 5.9% of the population was awaiting transfer at these 29 institutions.<sup>58</sup>

<sup>57</sup> See [Appendix II](#) for more details.

<sup>58</sup> Four respondents indicated that more than 10% of the confined population was awaiting transfer.

## Exhibit 15

### Individuals Awaiting Transfer for Competency Restoration Services: August 31, 2023

Measure	Baseline	Western WA		Eastern WA	
		Jails	JDCs	Jails	JDCs
No. of institutions	55*	17*	14	17	7
% of institutions with any individual awaiting transfer	29 (52.7%)	15 (88.2%)	2 (14.3%)	11 (64.7%)	1 (14.3%)
No. of institutions	29	15	2	11	1
% of population awaiting transfer					
Range (min-max)	0.1 - 17.4%	0.1 - 10.9%	7.1 - 12.5%	0.7 - 17.4%	
Mean (Standard deviation)	5.9% (3.9%)	5.9% (3.3%)	9.8% (3.4%)	5.4% (4.8%)	3.1%^
Median	5.8%	6.3%	9.8%	3.7%	

**Notes:**

\* One western jail skipped this question.

^ Only a single eastern JDC had confined individuals awaiting transfer for competency restoration services. As a result, we simply report the percentage awaiting transfer for this respondent.

In addition, the number of individuals awaiting transfer at these institutions was typically low. On average, these 29 institutions had 8.1 people awaiting transfer.<sup>59</sup>

### Summary

We used administrative records from 2010-2022 to describe the characteristics of all individuals who were admitted to jail and JDC facilities and confined for at least 24 hours. We also collected survey data on the size and composition of the confined population on August 31, 2023. In this section, we review our main findings and discuss the limitations of our study.

### Annual Admissions

The results revealed somewhat different trends in admissions for jails and JDCs between 2010 and 2022. For example, jail admissions were relatively stable between 2010 and 2019. In contrast, JDC admissions decreased every year, culminating in a 51.3% drop in annual admissions between 2010 and 2019.<sup>60</sup> These findings are consistent with past research on trends in juvenile detention admissions.<sup>61</sup>

The results also highlight some similarities in admissions for jails and JDCs during this period. In particular, COVID-19 restrictions appear to have led to a decrease in admissions between 2019 and 2020. It is possible that the *State v. Blake* ruling also contributed to the reduction of admissions between 2020 and 2021.

<sup>59</sup> The maximum number of people awaiting transfer at a single institution was 42.

<sup>60</sup> There were 15,592 admissions to JDCs in 2010 and 7,595 admissions in 2019.

<sup>61</sup> Gilman, A.B., & Sanford, R. (2021). *Washington State juvenile detention 2020 annual report*. Olympia, WA: Washington State Center for Court Research, Administrative Office of the Courts.

### Supervised Population

The survey measured the size of the supervised population at jails and JDCs on August 31, 2023. We found that half of the institutions supervised individuals who were not confined inside one of the institution's facilities. This practice was particularly common among western JDCs. In addition, the average size of the supervised and unconfined population was larger at western JDCs than at other facilities.

We also found large differences in the size of the confined population by institution type. On average, the confined population was 18 times larger in jails than in JDCs. To a lesser extent, we observed regional differences in population size. For example, western jails generally held more people in confinement than eastern jails, while eastern JDCs held slightly more than western JDCs.

In addition, we found that about 55% of institutions were holding individuals in confinement on behalf of other authorities. Most of these individuals were being held for other cities and counties in Washington. This practice was common at larger institutions and rare at small institutions. Among institutions that engaged in this practice, individuals confined for other authorities accounted for a higher proportion of the population at eastern JDCs than western JDCs. Ultimately, it is unclear why we observed regional differences for JDCs but not for jails.

### Demographics

We found little variation in the sex or racial/ethnic composition of individuals admitted to jail and JDC facilities between 2010 and 2022. However, we observed a large change in the age composition of the jail population.

Individuals between ages 18-25 accounted for 30% of the jail population in 2010 but only 15% in 2022. During this period, the legislature introduced a series of laws that restricted the use of jail confinement for individuals in this age group. If some of these individuals are being confined in Juvenile Rehabilitation instead of jails, then this could account for our findings.

### Criminal History

We observed two basic patterns in the prevalence of convictions for different types of offenses. First, the percentage of individuals with convictions for alcohol/drug offenses decreased between 2019 and 2022. Second, the percentage of individuals with convictions for violent offenses increased between 2019 and 2022. These patterns emerged regardless of offense classification (misdemeanor or felony) or population type (jail or JDC).

It is possible that pandemic-era restrictions and the *Blake* decision contributed to the decreasing prevalence of convictions for misdemeanor alcohol/drug offenses. For example, these are low-severity/non-violent offenses, which were most likely to be filtered out by pandemic-era restrictions. It is also likely that the *Blake* decision contributed to this decrease by changing how the justice system handled cases involving drug possession.

## Health Characteristics

We measured the health characteristics of the jail and JDC population between 2010 and 2022 based on whether individuals received treatment for physical and behavioral health conditions during the previous year. We also used survey questions to collect information on the behavioral health needs of individuals in confinement on August 31, 2023.

We found strong evidence that the prevalence of mental health problems intensified for the jail and JDC population between 2010 and 2022. The increase was especially pronounced for the JDC population. By the end of this period, the JDC population exhibited higher rates of mental health problems than the jail population. For example, in 2022, 63% of the jail population and 76% of the JDC population were classified as in need of mental health treatment. There was also a distinct increase in the percentage of individuals with particularly severe mental health conditions. Between 2010 and 2022, individuals who had previously experienced psychiatric hospitalization increased from 5.6% to 12.5% of the jail population and 3.2% to 14.4% of the JDC population.

The survey results indicate that a high percentage of individuals confined in jails and JDCs on August 31, 2023, had behavioral health needs. On average, about two-thirds of the confined population in JDCs and one-half in jails had behavioral health needs.

When we examined the percentage of individuals in the jail population who required competency evaluation/restoration services, we found a steady increase between 2019 and 2022. In absolute terms, individuals who required competency services made up a small percentage of the jail population during this period (i.e., around 1-8%). In relative terms, however, the continuous growth of this subpopulation is noteworthy.

The survey results also provide insight into the prevalence of individuals confined at jails and JDCs who were awaiting transfer for competency restoration services on August 31, 2023. Overall, we found that only about half of institutions (53%) had individuals awaiting transfer. This was substantially more common for jails than JDCs. For example, most JDCs (86%) did not have a single individual awaiting transfer. Moreover, individuals awaiting transfer comprised a small percentage of the confined population at these institutions (i.e., an average of 5.9%).

The results for physical health conditions were harder to interpret. For the jail population, rates of infectious disease and cardiovascular conditions increased between 2010 and 2022. For the JDC population, there was a distinct increase in the prevalence of developmental disabilities.

There was suggestive evidence that trends in infectious disease may have been impacted by COVID-19 but this only emerged for the jail population. For example, the rate of infectious disease for the jail population increased by 5.3 percentage points from 2020 (30.1%) to 2022 (35.4%). However, the rate for the JDC population decreased by 2.3 percentage points from 2020 (28.3%) to 2022 (26%).

Finally, there was also suggestive evidence that the *State v. Blake* (2021) ruling may have influenced the prevalence of SUD, particularly for the JDC population. For example, the percentage of the JDC population with a SUD treatment need dropped by 15.7 percentage points between 2020 (59.9%) and 2022 (44.2%). For the jail population, however, the percentage with a SUD treatment need dropped by only 3.6 percentage points between 2020 (75.5%) and 2022 (71.9%).

## Limitations

The results from the current study are informative for understanding how the characteristics of individuals admitted to jail and JDC facilities changed between 2010 and 2022. However, there are limitations to our approach that restrict our ability to fully examine the extent to which characteristics may have changed during this time.

Perhaps the most significant limitation is that the data we used to identify individuals admitted to jail facilities excluded information from King County, which contains a substantial percentage (29.5%) of Washington's population.<sup>62</sup> Ultimately, it is unclear how the omission of King County jail data affected our results.<sup>63</sup>

In addition, some of the measures we use are limited by our reliance on administrative data. For example, our measures of criminal history are based on conviction records. Evidence suggests that only about half of crimes are ever reported to the police,<sup>64</sup> and only some of these offenses will result in conviction. As a result, it is likely that our measures of criminal history underestimate past involvement in crime.

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<sup>62</sup> The 2020 Census found that 2,269,675 people lived in King County and 7,705,281 people lived in Washington State. See U.S. Census Bureau, 2020 Census 118th Congressional District Summary File (CD118).

<sup>63</sup> It is worth noting that many of the changes we observed in the size and composition of the jail population appear to be linked to events that impacted the criminal justice system across Washington State, such as COVID-19, *State v. Blake* (2021), and changes in legislation regulating facility placement for individuals under age 25. Because King County

was also impacted by these events, we speculate that some of the trends we observed in the current study also occurred in the King County jail population (e.g., reductions in population size, fewer individuals under age 25, and fewer individuals confined for drug offenses).

<sup>64</sup> Langton, L., Berzofsky, M., Krebs, C.P., & Smiley-McDonald, H. (2012). *Victimizations not reported to the police, 2006-2010* (p. 18). Washington, DC: US Department of Justice, Office of Justice Programs, Bureau of Justice Statistics.



Similarly, we relied on Medicaid payment data to measure health characteristics based on whether individuals received treatment for different conditions. However, this approach cannot measure instances where individuals have health needs but do not access health services.

Past research suggests that this issue (i.e., measuring population health based on the use of health services) tends to underestimate the prevalence of health problems, particularly for disadvantaged populations with extensive health issues.<sup>65</sup> This is especially relevant for our study, as evidence indicates that individuals in jails and JDCs often have serious health needs.<sup>66</sup> In other words, it is likely that our results underestimate the health needs of the jail and JDC populations.

Although we identified trends in characteristics for individuals admitted to jail and JDC facilities between 2010 and 2022, we are limited in our ability to offer a definitive interpretation of these patterns. Multiple events occurred during this 12-year period that could plausibly impact these characteristics. While we reference events such as COVID-19 and the *Blake* decision to help contextualize the findings, our study is not designed to identify the causal effect of these events on the characteristics of the jail and JDC population.

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<sup>65</sup> Etches, V., Frank, J., Ruggiero, E.D., & Manuel, D. (2006). Measuring population health: a review of indicators. *Annual Review of Public Health, 27*(1), 29-55.

<sup>66</sup> Maruschak, L.M., Berzofsky, M., & Unangst, J. (2015). *Medical problems of state and federal prisoners and*

*jail inmates, 2011-12* (pp. 1-22). Washington, DC: US Department of Justice, Office of Justice Programs, Bureau of Justice Statistics and Golzari, M., Hunt, S.J., & Anoshirvani, A. (2006). The health status of youth in juvenile detention facilities. *Journal of Adolescent Health, 38*(6), 776-782.

## IV. Conditions of Confinement

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In this section, we draw on survey data to describe the conditions of confinement across six topic areas, including capacity, facility age and condition, renovation and new construction, supportive services, and institutional finances. At the end of the section, we summarize our key findings.

### Capacity and Crowding

An important characteristic of custodial institutions is *capacity*, or the maximum number of people who can be housed at the institution. When the size of the confined population exceeds capacity, correctional facilities can experience problems related to overcrowding. The survey collected information on the extent to which local jails and JDCs were under-capacity or over-capacity during August 2023.

### Peak Population

As an initial step, the survey asked about the institution's peak population during August 2023 (i.e., the month before the start of survey administration). Next, the survey collected two measures of capacity: design capacity and practical capacity.

### Design Capacity and Practical Capacity

The survey defined "design capacity" as "the greatest number of residents that the institution was originally designed to house, as determined by an architect or planner."

In contrast, the survey defined "practical capacity" as "the greatest number of residents that the institution can safely and effectively house, as determined by your professional opinion."

In exploratory analyses, we compared these two measures by dividing practical capacity by design capacity. About 68% of respondents (38 out of 56) reported that the practical capacity was smaller than the design capacity. In other words, most respondents believe that their institution cannot safely/effectively hold as many individuals as it was originally designed to house.<sup>67</sup> On average, across the full sample, the practical capacity was 15% lower than the design capacity.

Next, we examined whether local jails and JDCs were under- or over-capacity on the day when their confined population reached its peak size during August 2023. [Exhibit 16](#) shows the results when we divide peak population size by design capacity.

Two basic patterns emerge across both measures of capacity. First, jails were typically at higher capacity than JDCs. For example, on the day in August 2023, when their confined population reached its peak size, the average JDC was at less than 50% capacity, while the average jail was at least 75% full.<sup>68</sup>

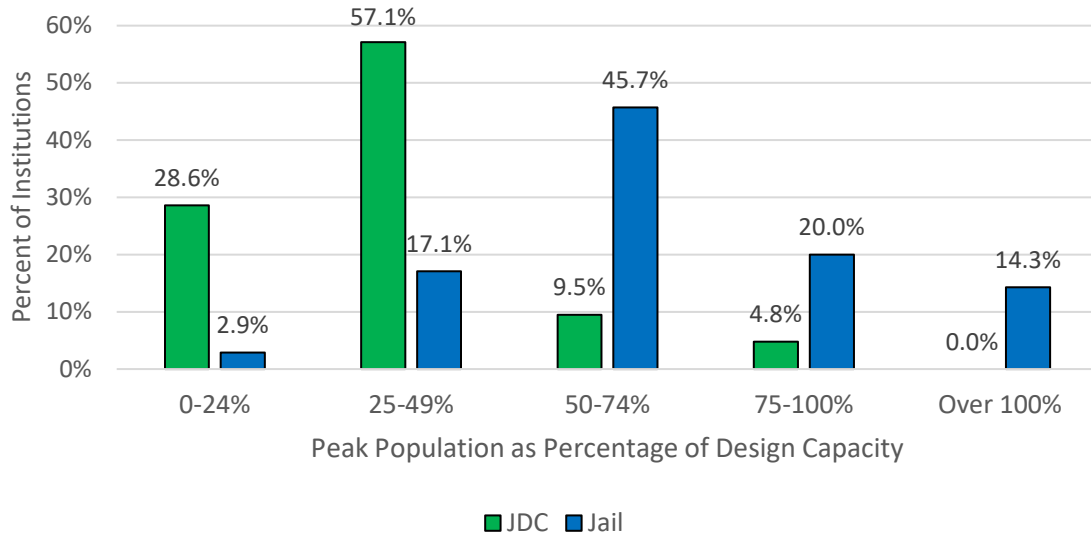
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<sup>67</sup> In addition, 17.9% of respondents (10 out of 56) reported that the practical capacity was larger than the design capacity. Of the respondents, 14.3% (8 out of 56) reported that the practical capacity and design capacity were equal.

<sup>68</sup> On the peak population day in August 2023, the average JDC was at 34% design capacity and 48% practical capacity, while the average jail was at 75% design capacity and 82% practical capacity.

## Exhibit 16

### Design Capacity and Peak Population: August 2023



Second, a minority of jails were over 100% capacity. We found that five jails (14.3%) were over 100% design capacity, with values ranging from 104% to 208%. We also found that eight jails (22.9%) were over 100% practical capacity, with values ranging from 107% to 193%.

### Condition of Physical Assets

The survey asked respondents several questions about the age and condition of their institution's physical assets (e.g., buildings, internal systems, equipment).

As eight institutions operated two facilities, the survey separately asked questions about each facility. Thus, our sample consists of 56 institutions operating 64 distinct facilities.

### Facility Age

The survey asked respondents to identify the year the facility first became operational. (Exhibit 17).

Facilities ranged in age between 3 to 84 years, with an average age of 34.7 years. Most facilities (75%) had been in operation between 20 to 49 years, while a handful of facilities had been in operation for less than 20 years (14%) or more than 49 years (11%).

Exhibit 17 also shows regional variation in facility age by institution type. On average, eastern jail facilities were 15.1 years older than western jail facilities, and eastern JDC were 6.4 years older than western JDC facilities.

### Exhibit 17

#### Facility Age: Years in Operation

Measure	Baseline	Western WA		Eastern WA	
		Jails	JDCs	Jails	JDCs
No. of facilities	64	24	14	19	7
Mean age (SD)	34.7 (15.3)	29.9 (11.9)	28.6 (13.7)	45.1 (17.1)	35 (11.1)
Age range (min-max)	3 - 84	6 - 51	3 - 61	11 - 84	25 - 50

Notes:

SD = Standard deviation.

The results indicate that eastern jails operate many of the oldest facilities in Washington. Indeed, the oldest facility in the sample is an eastern jail that first became operational in 1939.

#### Age of Internal Systems

The survey included questions to measure the age of five internal systems within each facility. Exhibit 18 shows how the survey defined each system.

We measured the age of internal systems using two survey questions. First, the survey asked respondents how much the original system has changed (e.g., parts replaced, upgraded, or remodeled) since the facility first became operational. The response options included the following: *No changes*, *minor changes*, *major changes*, and *full-scale changes*.

If respondents selected *no change* or *minor changes*, then we set the system age equal to the age of the facility.

If respondents selected *major changes* or *full-scale changes*, then the survey included a second question: "In what year was the most significant renovation completed?" When this occurred, we

calculated the system's age based on the number of years between the renovation date and the date of survey completion.

Once again, we found evidence of regional differences (Exhibit 19). On average, jails tend to have older internal systems than JDCs from the same region. Moreover, eastern jail facilities have the oldest internal systems in the sample. This pattern is unsurprising, as eastern jail facilities tend to be substantially older than other facilities.

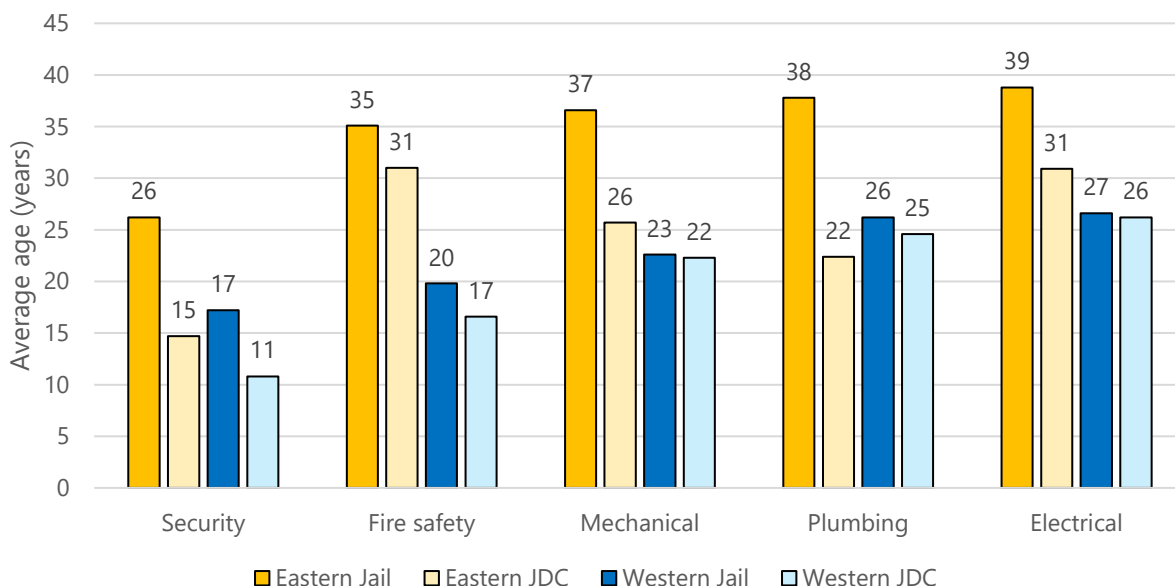
### Exhibit 18

#### Definition of Internal Systems

Name	Definition
Security	The collection of fences, gates, door locks, alarms, metal detectors, and surveillance equipment used to control and monitor facility residents.
Fire safety	The collection of devices, alarms, and equipment used to detect and control a fire inside the facility.
Mechanical	The collection of vents, fans, and devices that distribute hot and cold air throughout the facility.
Plumbing	The collection of pipes, appliances, and fixtures involved in either supplying hot/cold water to the facility or draining wastewater/sewage from the facility.
Electrical	The collection of wires and devices that distribute electricity throughout the facility.

## Exhibit 19

Average Age of Internal Systems: Institution Type and Region Served



### Notes:

Eastern jail facilities (N=19); eastern JDC facilities (N=7).  
Western jail facilities (N=24); western JDC facilities (N=14).

Finally, the results revealed differences by type of internal system. Security and fire safety systems were more likely to have experienced major or full-scale renovations than other internal systems. About 61% of facilities performed major updates to their security system, and around 34% of facilities did so to their fire safety system. This accounts for the lower average age of security and fire safety systems compared to other internal systems.<sup>69</sup> More generally, these patterns may reflect the tendency for jails and JDCs to prioritize updating their facility's security and fire safety systems over other internal systems.

### Quality Rating

The survey asked respondents to rate eight features of each facility based on their physical condition and functionality, including structural elements, systems and fixtures, furniture and equipment, and individual assessments for five internal systems.

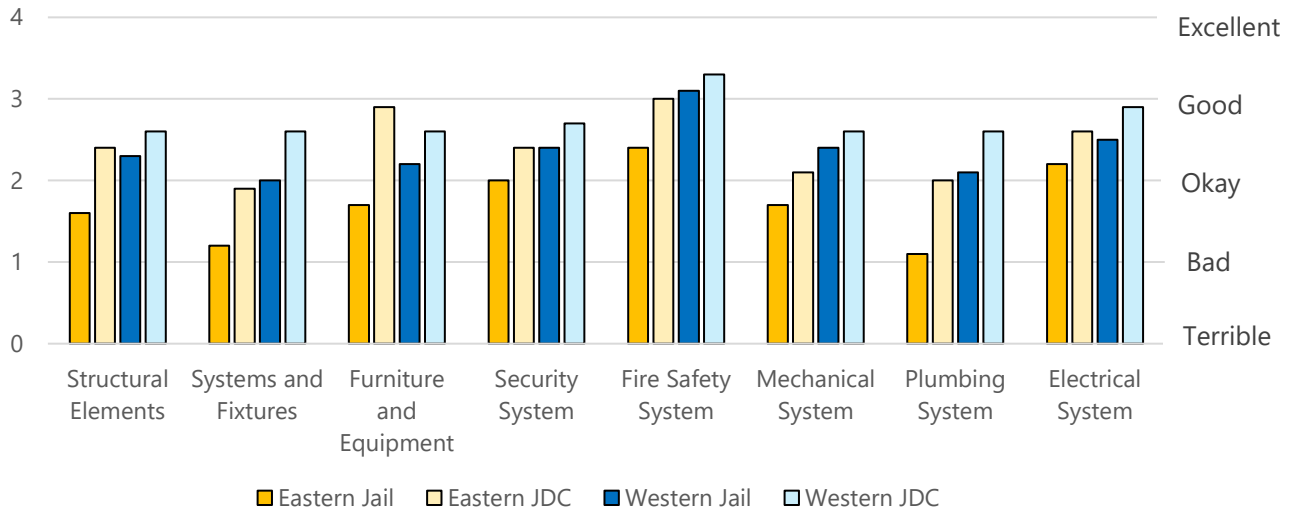
Each question used a 5-point quality scale. We assigned numeric values to response options so that higher scores correspond to higher-quality ratings: Terrible (0), bad (1), okay (2), good (3), and excellent (4).

<sup>69</sup> For example, the average security system was 18 years old, and the average electrical system was 31 years old. About 61% of facilities had performed major or full-scale

renovations to their security system, but only 14% of facilities performed such updates to their electrical system.

## Exhibit 20

Average Quality Rating: Institution Type and Region Served



Once again, we found evidence of regional and institutional differences (Exhibit 20). On average, jails received lower quality ratings than JDCs from the same region. Eastern facilities generally received lower quality ratings than western facilities. Moreover, eastern jails received the lowest quality ratings across all eight features.

### Age and Quality

We also conducted exploratory analyses to investigate whether differences in quality ratings were related to other characteristics.<sup>70</sup> We consistently found that *age* was the strongest predictor of quality ratings.

For example, older facilities received lower quality ratings for structural elements, systems/fixtures, and furniture/equipment. Similarly, older internal systems received lower quality ratings than newer systems. These patterns are unsurprising, as physical assets naturally degrade over time. In addition, we found that underlying differences in age drove regional differences in quality ratings.

On average, eastern facilities received worse quality ratings than western facilities on every feature we examined. However, eastern facilities also tend to be older and have older internal systems than western facilities. When we controlled for age, regional differences in quality became substantially smaller and were no longer statistically significant. This indicates that eastern facilities tend to be in worse physical condition than western facilities because eastern facilities tend to be older than western facilities.

Similarly, we found that underlying differences in age help to explain institutional differences (i.e., why jail facilities received worse quality ratings than JDCs).

<sup>70</sup> See Appendix II for more details.

## Strategies for Improving Facilities

The survey asked several questions about potential strategies for improving the physical condition of jail and JDC facilities. This included questions regarding the need for major construction work, whether it was preferable to invest in renovating current facilities versus building new facilities, and potential costs associated with renovation/new construction.

### Need for Major Construction

As an initial step, the survey asked respondents to reflect on the overall physical condition of facilities at their institution and to consider whether they believed any of the facilities required major changes.

The survey defined “major changes” as “significant construction work that goes beyond routine maintenance or repairs.” This included work such as full-scale renovations or constructing and expanding facilities.

Most jail respondents (80%) indicated that their institution required major changes, but this was reported by only 38.1% of JDC respondents. In total, about 64% of respondents (36 out of 56) indicated that their institution required major changes.

The 36 respondents who indicated that their institution required major changes were asked a series of follow-up questions.

### Renovate or Rebuild?

The first follow-up question asked respondents how much they agreed or disagreed with the following statement: “It would be better to build brand-new facilities than to spend money on improving the current facilities.” Among respondents who indicated their institution needed major changes, 77.8% (28 out of 36) agreed that it would be better to construct new facilities than invest in improving current facilities.

### Condition Assessment

The survey asked respondents (N=36) whether facilities at their institution had ever received a condition assessment ([Exhibit 21](#)). The survey defined a condition assessment as something that “happens when an engineering firm or construction company sends someone to conduct an inspection of the facility and identify everything that needs to be fixed or updated.”

Among respondents who indicated their institution needed major changes, 41.7% (15 out of 36) reported that their institution had previously received a condition assessment. The date of the last condition assessment ranged from 2006 to 2023, with an average of 4.7 years between the time of the last assessment and survey completion.

### Cost of Renovation and New Construction

The survey asked respondents (N=36) two additional follow-up questions about whether they had any information on how much it would cost to either renovate the facility or build a new facility (see [Exhibit 21](#)).

## Exhibit 21

### Condition Assessment, Renovation, and New Construction

Received assessment or estimate		Estimated cost	
<b>Condition assessment</b>			
Received assessment	15 (41.7%)		
Years since last assessment			
Range	0 – 17		
Mean (SD)	4.7 (4.6)		
<b>Renovation cost estimate</b>		<b>Cost of renovation (millions)</b>	
Received estimate	9 (25.0%)	Range	0.44 – 123
Years since last estimate		Median	30
Range	0 – 7	Mean (SD)	34 (38)
Mean (SD)	2.6 (2.4)		
<b>New facility cost estimate</b>		<b>Cost of new construction (millions)</b>	
Received estimate	11 (30.6%)	Range	17.5 - 421
Years since last estimate		Median	110
Range	0 – 8	Mean (SD)	156 (149)
Mean (SD)	2.2 (2.9)		

**Notes:**

SD = Standard deviation.

Statistics shown above come from survey data for 64.3% of the full sample (i.e., 36 out of 56 respondents).

This subset of respondents previously indicated that their institution required major renovation or new construction.

One-fourth (9 out of 36) reported that they had information on renovation costs. The date of the cost estimate ranged from 2016 to 2023, with an average of 2.6 years between the time of the cost estimate and survey completion.

Renovation cost estimates varied by institutional size. One small institution reported a cost of \$440,000. Among medium-sized institutions, the average cost was \$22.2 million. For large institutions, the average cost was \$55.1 million.

In addition, the results indicate that 30.6% of respondents (11 out of 36) had received a cost estimate for constructing a new facility.

The date of the cost estimate ranged from 2015 to 2023, with an average of 2.2 years between the time of the cost estimate and survey completion.

Cost estimates for new facility construction also varied by institutional size. One small institution reported a cost of \$19 million. Among medium-sized institutions, the average cost was \$60.4 million. For large institutions, the average cost was \$319 million.



## Health Services

The survey collected information on various health services that may have been offered to individuals in confinement. This includes the types of services provided, attitudes toward these services, and the costs associated with providing these services.

### Dental Health Services

The survey asked respondents whether their institution offered dental health services during the last 12 months. In addition, the survey collected information on the frequency and type of services provided. We show the results in [Exhibit 22](#).

#### Exhibit 22

##### Dental Health Services: Last 12 Months

Measure	Jails	JDCs
No. of institutions	35	21
Offer dental health services	33 (94.3%)	15 (71.4%)
No. of institutions	33	15
<b>Frequency of DH services</b>		
At least once per year	4 (12.1%)	7 (46.7%)
At least once per 6 months	5 (15.2%)	4 (26.7%)
Every month	11 (33.3%)	1 (6.7%)
Every week	8 (24.2%)	3 (20%)
Onsite	5 (15.2%)	0 (0%)
No. of institutions	33	15
<b>Available DH services</b>		
Basic procedures	31 (93.9%)	12 (80%)
Major procedures	9 (27.3%)	12 (80%)
Preventative care	9 (27.3%)	5 (33.3%)

Notes:

DH = Dental health.

Onsite = Dental health services provider was employed at the institution.

The results indicate that about 86% of institutions (48 out of 56) provided dental health services to individuals in confinement during the 12 months before survey completion. In addition, the results revealed variations in the types of services offered. Among the 48 institutions that provided dental health services, about 90% covered basic procedures, 44% covered major procedures, and 29% covered preventative care.

### Mental Health Services

The survey asked respondents whether their institution offered mental health services during the last 12 months. In addition, the survey collected information on the frequency and type of services provided. We show the results in [Exhibit 23](#).

#### Exhibit 23

##### Mental Health Services: Last 12 Months

Measure	Jails	JDCs
No. of institutions	35	21
Offer mental health services	34 (97.1%)	21 (100%)
No. of institutions	34	21
<b>Frequency of MH services</b>		
At least once per year	1 (2.9%)	0 (0%)
At least once per 6 months	1 (2.9%)	1 (4.8%)
Every month	2 (5.9%)	2 (9.5%)
Every week	12 (35.3%)	6 (28.6%)
Onsite	18 (52.9%)	12 (57.1%)
No. of institutions	34	21
<b>Available MH services</b>		
Psychiatric medication	30 (88.2%)	19 (90.5%)
Therapy/counseling	31 (91.2%)	21 (100%)

Notes:

MH = Mental health.

Onsite = Mental health services provider was employed at the institution.

The results indicate that about 98% of institutions (55 out of 56) provided mental health services to individuals in confinement during the 12 months before survey completion. A single jail respondent indicated that their institution did not provide mental health services.

We also found that most institutions provided mental health services either onsite or on a weekly basis. About 89% offered psychiatric medication, and 95% offered therapy or counseling. Overall, there were no meaningful differences between jails and JDCs in the availability, frequency, or type of mental health services offered.<sup>71</sup>

### Exhibit 24

#### SUD Services: Last 12 Months

Measure	Jails	JDCs
No. of institutions	35	21
Offer SUD services	33 (94.3%)	18 (85.7%)
No. of institutions	33	18
<b>Frequency of SUD services</b>		
At least once per year	1 (3.0%)	0 (0%)
At least once per 6 months	1 (3.0%)	2 (11.1%)
Every month	0 (0%)	3 (16.7%)
Every week	14 (42.4%)	10 (55.6%)
Onsite	17 (51.5%)	3 (16.7%)
No. of institutions	33	18
<b>Available SUD services</b>		
Therapy/counseling	25 (75.8%)	16 (88.9%)
MAT	29 (87.9%)	14 (77.8%)

**Notes:**

SUD = Substance use disorder.  
 Onsite = SUD services provider was employed at the institution.  
 MAT = Medication-assisted treatment.

### Services for Substance Use Disorder

The survey asked respondents whether their institution offered services for substance use disorder (SUD) during the last 12 months. In addition, the survey collected information on the frequency and type of services provided. We show the results in Exhibit 24.

The results indicate that about 91% of institutions (51 out of 56) provided SUD services to individuals in confinement during the 12 months before survey completion. This was slightly more common for jails than JDCs, but the vast majority of both types of institutions provided SUD services.

### Exhibit 25

#### Physical Health Services: Last 12 Months

Measure	Jails	JDCs
No. of institutions	35	21
Offer PH services	34 (97.1%)	21 (100%)
No. of institutions	34	21
<b>Frequency of PH services</b>		
Every week	13 (38.2%)	7 (33.3%)
Onsite	21 (61.8%)	14 (66.7%)
No. of institutions	34	21
<b>Available PH services</b>		
Infectious disease screening	30 (88.2%)	21 (100%)
Pregnancy test	33 (97.1%)	21 (100%)
Drug/alcohol test	29 (85.3%)	17 (80.9%)
Preventative care	32 (94.1%)	20 (95.2%)
Treatment for minor injuries	34 (100%)	21 (100%)
Treatment for major injuries	26 (76.5%)	16 (76.2%)
Meds for chronic illness	34 (100%)	21 (100%)

**Notes:**

PH = Physical health.  
 Onsite = Physical health services provider was employed at the institution.

<sup>71</sup> Some jails and JDCs offer extensive mental health services in addition to psychiatric medication and individual counseling (e.g., crisis response, family therapy).

Among institutions that offer SUD services, about 80% (41 out of 51) provide therapy/counseling, and 84% (43 out of 51) provide medication-assisted treatment (MAT).<sup>72</sup> Both services were commonly offered at jails and JDCs.<sup>73</sup>

### Physical Health Services

The survey asked respondents whether their institution offered physical health services during the last 12 months. In addition, the survey collected information on the frequency and type of services provided. We show the results in [Exhibit 25](#).

Overall, we found little variation in how respondents answered questions about physical health services. About 98% of institutions provide physical health services. All of these institutions offered physical health services either onsite or on a weekly basis. In addition, the vast majority of institutions indicated that they provided each of the health services listed in the bottom panel of [Exhibit 25](#).

### Institutional Size and Health Services

In exploratory analyses, we found that institutional size was strongly related to the provision of onsite health services.<sup>74</sup>

### Attitudes Toward Health Services

*Physical Health.* The survey asked respondents whether they agreed or disagreed with the following statement: *“Overall, my institution is well-suited to meeting the physical health needs of its residents.”* We show the results in [Exhibit 26](#).

Most respondents (60.7%) agreed that their institution was well-suited to meeting the physical health needs of individuals in confinement. About 23% felt neutral toward this statement, and 16% disagreed with it. When we separate the results by institution type and region served, the same basic pattern occurs for western institutions and eastern JDCs.

However, attitudes were more mixed for eastern jail respondents. For example, only about one-third of eastern jail respondents agreed that their institution was well-suited to meeting the physical health needs of individuals in confinement. Indeed, a slight majority of eastern jail respondents (41.2%) disagreed with this statement.

*Behavioral Health.* The survey asked respondents how much they agreed or disagreed with four statements about individuals in confinement who had behavioral health needs. We present the results for jails and JDCs in [Exhibit 27](#).

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<sup>72</sup> Medication-assisted treatment (MAT) combines traditional talk therapy with prescription medications.

<sup>73</sup> Some jails and JDCs offer additional SUD services beyond therapy and MAT (e.g., SUD evaluation, classes, Narcan).

<sup>74</sup> See [Appendix II](#) for more details.

## Exhibit 26

### Attitudes Toward Physical Health Services

Measure	Western WA		Eastern WA	
	Jails	JDCs	Jails	JDCs
No. of institutions	18	14	17	7
<i>"My institution is well-suited to meeting the physical health needs of its residents."</i>				
Agree	12 (66.7%)	10 (74.1%)	6 (35.3%)	6 (85.7%)
Neutral	5 (27.8%)	3 (21.4%)	4 (23.5%)	1 (14.3%)
Disagree	1 (5.6%)	1 (7.1%)	7 (41.2%)	0 (0%)

The first statement focused on the cost of confining individuals with behavioral health needs. Most jail respondents (88.6%) agreed that it is more expensive to house residents with behavioral health needs. However, only a slight majority of JDC respondents (42.9%) agreed, and a similar percentage (38.1%) felt neutral.

The second statement focused on the suitability of the jail/JDC environment for individuals with behavioral health needs. Most jail respondents (71.4%) disagreed that their institution is well-suited to housing residents with behavioral health needs, while only 19% of JDC respondents disagreed.

The third statement focused on the extent to which institutional staff were trained to work with individuals with behavioral health needs: *"Overall, staff at my institution possess the skills and knowledge necessary to effectively work with residents who have behavioral health needs."* We found a similar pattern of responses for jails and JDCs. About half of respondents agreed with this statement, one-third felt neutral, and a small percentage disagreed.

The final statement focused on whether the institution has sufficient services for individuals with behavioral health needs.

Most jail respondents (62.9%) disagreed that their institution has enough services and programs to serve residents with behavioral health needs, and about one-fourth felt neutral. About half of JDC respondents disagreed with this statement, but the other half were split between agreement and feeling neutral.

### Exhibit 27

#### Attitudes Toward Behavioral Health Needs

Measure	Jails	JDCs
<i>"It is more expensive to house residents with BH needs."</i>		
Agree	31 (88.6%)	9 (42.9%)
Neutral	4 (11.4%)	8 (38.1%)
Disagree	0 (0%)	4 (19.0%)
<i>"My institution is well-suited to housing residents with BH needs."</i>		
Agree	3 (8.6%)	8 (38.1%)
Neutral	7 (20.0%)	9 (42.9%)
Disagree	25 (71.4%)	4 (19.0%)
<i>"Staff at my institution possess the skills and knowledge necessary to effectively serve residents with BH needs."</i>		
Agree	17 (48.6%)	11 (52.4%)
Neutral	12 (34.3%)	7 (33.3%)
Disagree	6 (17.1%)	3 (14.3%)
<i>"My institution has enough services/programs to serve residents with BH needs."</i>		
Agree	4 (11.4%)	6 (28.6%)
Neutral	9 (25.7%)	5 (23.8%)
Disagree	22 (62.9%)	10 (47.6%)

**Notes:**

BH = Behavioral health.

JDC = Juvenile detention center (N=21).

Jails (N=35).

In exploratory analyses, we found that institutional size was associated with differences in respondent attitudes toward serving individuals with behavioral health needs.<sup>75</sup> For example, we found that the largest institutions in the sample were the most likely to agree that they had sufficient services/programs to serve individuals with behavioral health needs and that their staff were trained to work effectively with this population. In addition, 100% of these institutions agreed that it was more expensive to house residents with behavioral health needs.

<sup>75</sup> See [Appendix II](#) for more details.

### Exhibit 28

#### Cost of Health Services During 2022

Measure	Institutional size		
	Small	Medium	Large
No. of institutions*	16	23	11
Total \$ spent on health services			
Mean	\$81,000	\$463,000	\$4,922,000
Standard dev.	\$67,000	\$503,000	\$3,124,000
Median	\$51,000	\$340,000	\$3,799,000

**Notes:**

Dollar amounts rounded to the nearest thousand.

\* Six respondents skipped questions about cost of health services.

#### Cost of Health Services

The survey asked respondents how much their institution spent on health services during 2022. Because the responses varied by institutional size, we present descriptive statistics for each size category in [Exhibit 28](#).

#### Reentry Services

The survey asked respondents several questions about reentry services that may have been offered to individuals in confinement. Broadly defined, reentry services are designed to help individuals as they prepare to exit confinement and return to their home community.

The survey asked three types of questions about reentry services. First, the survey asked respondents whether their institution offered any reentry services on August 31, 2023.

Second, the survey asked a series of follow-up questions to measure the types of reentry services that were offered. In [Exhibit 29](#), we show how the survey described each reentry service.

## Exhibit 29

### Description of Reentry Services

Name	Examples
Health care	Provide supply of medication; assistance obtaining health insurance
Support systems	Notify family members of release; provide information on community resources
Transportation	Bus pass; assistance obtaining transportation from the facility
Clothing	Assistance obtaining clean, appropriate clothing
Housing	Provide information regarding available shelter; subsidized shelter in the form of housing vouchers
Education	GED courses; provide individuals with information related to education services
Documentation	Assistance obtaining an identification card
Food	Assistance obtaining food; information on public resources related to food
Employment	Job readiness training; resume preparation; assistance securing employment
Financial resources	Provide funds to subsidize food, transportation, and other necessities

Third, the survey asked respondents whether they agreed or disagreed with the following statement: *“Overall, the reentry services offered at my institution are adequately meeting the needs of facility residents.”*

We present the results from questions on reentry services in [Exhibit 30](#). The top panel shows that about 79% of institutions (44 out of 56) provided reentry services on August 31, 2023. This was more common for western than eastern institutions. For example, about 91% of western institutions (29 out of 32) and 63% of eastern institutions (15 out of 24) offered reentry services.<sup>76</sup>

The shaded panel in [Exhibit 30](#) presents the results for 44 respondents who were asked follow-up questions about reentry services. We show statistics on the availability of specific types of reentry surveys in descending order by prevalence (i.e., most common to least common).

Overall, most institutions indicated that they offered the reentry services listed in [Exhibit 30](#). However, some services were more widely available than others. For example, over 85% of institutions offered reentry services related to health care, support systems, and transportation. In contrast, only about 39% of institutions provided services related to financial resources.

In exploratory analyses, we also found that western institutions were more likely than eastern institutions to offer reentry services related to documentation and financial resources.<sup>77</sup> For example, 79.3% of western institutions and 40% of eastern institutions offered reentry services related to documentation. In addition, 44.8% of western institutions and 26.7% of eastern institutions offered reentry services related to financial resources.

<sup>76</sup> This difference is statistically significant at the 0.05 level.

<sup>77</sup> See [Appendix II](#) for more details.

Finally, the bottom of [Exhibit 30](#) shows how respondents reacted to the statement: *“Overall, the reentry services offered at my institution are adequately meeting the needs of facility residents.”* A slight majority of respondents (47.7%) felt neutral toward this statement, while a similar percentage (40.9%) agreed with it.

In exploratory analyses, we found that responses to this question were not clearly associated with institutional type, region, or size.<sup>78</sup> However, we found that the quantity

of available reentry services predicted how respondents answered this question. Institutions that offered a greater variety of reentry services were more likely to agree that these services were meeting the needs of the confined population.

In addition, we found institutions that specifically offered employment and documentation services were more likely to agree with this sentiment than those that did not offer these services.

### Exhibit 30

Availability of Reentry Services: August 31, 2023

Measure	Baseline	Western WA		Eastern WA	
		Jails	JDCs	Jails	JDCs
No. of institutions	56	18	14	17	7
Offer any reentry services	44 (78.6%)	17 (94.4%)	12 (85.7%)	10 (58.8%)	5 (71.4%)
No. of institutions	44	17	12	10	5
Available reentry services					
Health care	39 (88.6%)	15 (88.2%)	10 (83.3%)	9 (90%)	0 (0%)
Support systems	39 (88.6%)	15 (88.2%)	12 (100%)	7 (70%)	5 (100%)
Transportation	38 (86.4%)	17 (100%)	9 (75%)	8 (80%)	4 (80%)
Clothing	36 (81.8%)	15 (88.2%)	8 (66.7%)	10 (100%)	3 (60%)
Housing	34 (77.3%)	14 (82.4%)	9 (75%)	8 (80%)	3 (60%)
Education	31 (70.5%)	8 (47.1%)	12 (100%)	6 (60%)	5 (100%)
Documentation	29 (65.9%)	13 (76.5%)	10 (83.3%)	3 (30%)	3 (60%)
Food	27 (61.4%)	10 (58.8%)	8 (66.7%)	6 (60%)	3 (60%)
Employment	23 (52.3%)	7 (41.2%)	10 (83.3%)	3 (30%)	3 (60%)
Financial resources	17 (38.6%)	9 (52.9%)	4 (33.3%)	4 (40%)	0 (0%)
<i>“Reentry services are adequate.”</i>					
Agree	18 (40.9%)	7 (41.9%)	7 (58.3%)	2 (20%)	2 (40%)
Neutral	21 (47.7%)	7 (41.9%)	5 (41.7%)	6 (60%)	3 (60%)
Disagree	5 (11.4%)	3 (17.7%)	0 (0%)	2 (20%)	0 (0%)

<sup>78</sup> See [Appendix II](#) for more details.

## Annual Expenses and Funding

The survey asked respondents about their institution's finances during 2022. This included questions about general maintenance costs, operating costs, and funding. Because the responses varied by institutional size, we present descriptive statistics for each size category in [Exhibit 31](#).

The survey also asked respondents whether this information came from a review of financial records or if it was an estimate from memory. Most respondents indicated they reviewed financial records to identify the cost of general maintenance (62.5%), operating costs (69.2%), and funding (66%).

**Exhibit 31**  
Expenses and Funding During 2022

Measure	Institutional size		
	Small	Medium	Large
No. of institutions*	16	22	10
\$ spent on general maintenance			
Mean	\$32,000	\$175,000	\$1,326,000
Standard deviation	\$42,000	\$250,000	\$1,298,000
Median	\$19,000	\$102,000	\$1,015,000
No. of institutions <sup>^</sup>	18	24	10
\$ spent on operating costs			
Mean	\$1,753,000	\$4,472,000	\$36,400,000
Standard deviation	\$1,314,000	\$2,746,000	\$29,200,000
Median	\$1,439,000	\$3,391,000	\$23,000,000
No. of institutions <sup>^^</sup>	18	23	9
\$ received in funding			
Mean	\$1,699,000	\$3,334,000	\$35,300,000
Standard deviation	\$1,339,000	\$2,438,000	\$31,700,000
Median	\$1,666,000	\$3,050,000	\$24,000,000

**Notes:**

Dollar amounts rounded to the nearest thousand.

\* Eight respondents skipped questions about general maintenance costs.

<sup>^</sup> Four respondents skipped questions about operating costs.

<sup>^^</sup> Six respondents skipped questions about funding.



### Composition of Operating Costs

The survey asked respondents to provide an estimated breakdown of their institution’s operating costs during 2022. The survey instructed respondents to assign percentages to five categories:

- Employees (*salaries, benefits, training, etc.*);
- Facility residents (*food, clothing, health services, etc.*);
- Administrative/legal fees (*insurance, lawsuits, arrest/warrant management, judicial review*);
- Utilities (*water, electric, gas, etc.*); and
- All other goods and services.

Exhibit 32 shows the results for jails and JDCs. Overall, respondents estimated that expenses related to employees and facility residents (i.e., individuals in confinement) accounted for the vast majority of their institution’s operating costs during 2022. The average jail spent 67.5% of operating costs on employees and 16.8% on facility residents, while the average JDC spent 79.3% on employees and 6.2% on facility residents.

In exploratory analyses, we examined whether variation in the composition of operating costs was related to other characteristics. We found that respondents provided similar answers to these questions regardless of region served or institutional size.

### Exhibit 32

Composition of Operating Costs: 2022

Measure	Jails	JDCs
No. of institutions*	32	20
% of operating costs		
<b>Employees</b>		
Range (min – max)	45% – 90%	62% – 96%
Mean (SD)	67.5% (12.2%)	79.3% (10.4%)
<b>Facility residents</b>		
Range (min – max)	0 – 40%	0 – 24%
Mean (SD)	16.8% (10.4%)	6.2% (6.0%)
<b>Administrative/legal costs</b>		
Range (min – max)	0 – 16%	0 – 30%
Mean (SD)	4.4% (4.3%)	6.0% (8.2%)
<b>Utilities</b>		
Range (min – max)	0 – 15%	0 – 14%
Mean (SD)	3.3% (3.9%)	4.2% (3.5%)
<b>All other goods/services</b>		
Range (min – max)	0 – 40%	0 – 16%
Mean (SD)	8.1% (7.9%)	4.4% (4.6%)

Notes:

\* Four respondents skipped this question.  
SD = Standard deviation.

## Funding Sources

The survey asked respondents to provide an estimated breakdown of their institution’s funding sources during 2022 by assigning percentages to eight categories:<sup>79</sup>

- Local taxes;
- Boarding contracts/per diem payments (*housing individuals on behalf of other authorities.*);
- Incentive payments and reimbursements (*State Criminal Alien Assistance Program, Social Security Administration, etc.*);
- Grants, aid, and subsidies (*provided by federal, state, or local governments*);
- Work programs (*selling products/services provided by facility residents*);
- Copayments/user fees (*collected directly from facility residents*);
- Charitable donations; and
- Other funding sources

Exhibit 33 shows the estimated breakdown in funding sources for jails and JDCs. Respondents estimated that the vast majority of their institution’s funding came from local taxes. On average, local taxes accounted for 64.2% of funding at jails and 95.8% of funding at JDCs.

The second largest funding source for jails came from boarding contracts and per diem payments. This occurs when institutions with unused bed space generate revenue by housing individuals on behalf of other jurisdictions.

On average, this accounted for 21.9% of funding at jails but only 1.4% of funding at JDCs.

### Exhibit 33

Breakdown of Funding Sources: 2022

Measure	Jails	JDCs
No. of institutions*	30	20
% of funding		
<b>Local taxes</b>		
Range (min – max)	0 – 100%	77% – 100%
Mean (SD)	64.2% (37.4%)	95.8% (6.7%)
<b>Boarding contracts/per diem payments</b>		
Range (min – max)	0 – 95%	0 – 10%
Mean (SD)	21.9% (30.7%)	1.4% (2.5%)
<b>Incentive payments/reimbursements</b>		
Range (min – max)	0 – 20%	0 – 0
Mean (SD)	1.7% (4.3%)	--
<b>Grants, aid, and subsidies</b>		
Range (min – max)	0 – 40%	0 – 18%
Mean (SD)	4.2% (8.6%)	2.0% (4.6%)
<b>Work programs</b>		
Range (min – max)	0 – 10%	0 – 0
Mean (SD)	0.6% (1.9%)	--
<b>Copayments/user fees</b>		
Range (min – max)	0 – 4%	0 – 0
Mean (SD)	0.6% (1.0%)	--
<b>Charitable donations</b>		
Range (min – max)	0 – 0	0 – 0
Mean (SD)	--	--
<b>Other funding sources</b>		
Range (min – max)	0 – 94%	0 – 11%
Mean (SD)	6.7% (19.5%)	0.9% (2.6%)

**Notes:**

\* Six respondents skipped this question.

SD = Standard deviation.

<sup>79</sup> For more information on the categories, we selected to measure funding sources, see: Martin, M. (2002). *Budget Guide for Jail Administrators: Beyond Budget Allocation* –

*Sources of Funding and Services*. National Institute of Corrections, U.S. Department of Justice.

Aside from local taxes and boarding contracts/per diem payments, respondents indicated that the six other sources we measured accounted for only a small percentage of their institution's funding.

### Local Taxes

The survey asked respondents about the source of local taxes that funded the institution during 2022. Respondents were asked to estimate the percentage of local tax funds that came from either the County General Fund (i.e., generated from sales tax and property tax) or dedicated funds (i.e., collected to fund specific purposes).

On average, respondents estimated that around 80% of the local taxes that funded their institution during 2022 came from the County General Fund, and about 20% came from dedicated funds.<sup>80</sup>

### Summary

We used survey data to describe the conditions of confinement at 56 local jails and JDCs operating 64 facilities. In the text below, we summarize our key findings and discuss the limitations of our study.

### Capacity and Crowding

The survey collected information on the capacity of jails and JDCs during August 2023. Two findings emerged. First, most respondents reported that their facility cannot safely or effectively hold as many individuals as it was originally designed to house.

Second, we found that most JDCs are at lower capacity than jails. Although a minority of JDCs (4 out of 21) were over 75% full, not a single JDC was over 100% capacity. In contrast, roughly 14-23% of jails were over capacity during August 2023.

### Condition of Physical Assets

The survey results highlight regional differences in the age and physical condition of jails and JDCs during August 2023.

The evidence indicates that eastern facilities tend to be substantially older than western facilities. To a lesser extent, jail facilities tend to be older than JDC facilities from the same region. For example, the average eastern jail has been in operation for about 45 years, which is roughly 15 years longer than the average western jail and western JDC and about ten years longer than the average eastern JDC.

In addition, we found that the average eastern facility is in worse physical condition than the average western facility. To a lesser extent, jail facilities tend to be in worse physical condition than JDC facilities from the same region. For example, eastern jails consistently received lower ratings than other types of institutions across eight different measures of facility condition and functionality.

Overall, we found that age is the strongest predictor of facility condition. Eastern facilities tend to be in worse physical condition than western facilities because they are older. Similarly, jail facilities tend to be in worse condition than JDC facilities because they are older.

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<sup>80</sup> On average, jail and JDC respondents estimated 82.4% and 80.4% came from the County General Fund, respectively.

### Strategies for Improving Facilities

About two-thirds of the sample (36 out of 56 respondents) reported that major renovation or new construction was necessary to improve the physical condition of facilities at their institution. Most of these respondents worked for local jails (28 out of 36), though a small number worked for JDCs.

There was widespread agreement among these 36 respondents that it was better to invest in new construction instead of renovation, with especially high rates of agreement among respondents at older facilities.

Although most were in favor of building new facilities, it was relatively uncommon for respondents to have consulted with construction or engineering professionals about the condition of their facilities or the potential costs of renovation/new construction. For example, only a minority of respondents had received a condition assessment (15 out of 36), a cost estimate for constructing a new facility (11 out of 36), or a cost estimate for renovations (9 out of 36).

### Health Services

During the 12-month period before survey completion, the vast majority of jails and JDCs offered services related to dental health, mental health, substance use disorder (SUD), and physical health. Most institutions provided these services on at least a weekly basis, though dental health services were offered less frequently.

The results also suggest that the health services offered at jails and JDCs covered treatment for a wide variety of conditions. Moreover, many respondents used write-in responses to convey that their institution provided several additional services beyond what was listed as response options for survey questions. In particular, respondents noted that their institution offered extensive mental health and SUD services that were not measured in the survey.

Finally, we examined respondent attitudes toward the physical and behavioral health services offered at their institution. We found that most respondents agreed with the idea that their institution is well-suited to meeting the physical health needs of the confined population. However, attitudes toward serving individuals with behavioral health needs were more mixed.

For example, it appears that many jail respondents find it challenging to house individuals with behavioral health needs. Most jail respondents felt that the institution was not well-suited to housing members of this population, that there were not enough services and programs to meet their needs, and that this population is more expensive to house than other confined individuals. Only about half of jail respondents agreed that staff at their facilities were trained to work with this population effectively, and most of these respondents also expressed that their institution was not well-suited to housing individuals with behavioral health needs.

In contrast, JDC respondents expressed more mixed attitudes toward housing individuals with behavioral health needs. Compared to jail respondents, JDC respondents were less opposed to the idea that their institution was suitable for housing members of this population. Indeed, about one-third of JDC respondents endorsed this idea and felt that their institution had the necessary resources to meet the needs of youth with behavioral health issues.

We also found that attitudes toward housing individuals with behavioral health needs were related to institutional size. In particular, there was widespread agreement among respondents at large institutions that their organization had sufficient services and staff expertise to work with this population. However, it appears that these enhanced capabilities come at an increased cost to the institution, as all of these respondents indicated it was more expensive to house members of this population.

### Reentry Services

The survey results provide insight into the availability of reentry services at local jails and JDCs during August 2023. At that time, nearly four out of five institutions offered services to help individuals prepare to exit confinement and return to their home community. Most of these institutions offered a wide variety of reentry services, though respondents held mixed opinions on whether these services were adequately meeting the needs of the confined population.

The results also revealed regional differences in the availability of reentry services. Compared to eastern institutions, western institutions were more likely to offer reentry services. In addition, certain types of reentry services (e.g., documentation and financial resources) were more commonly offered at western institutions. However, we were unable to determine why these regional differences emerged.

Finally, we found that respondent attitudes toward the adequacy of reentry services were strongly associated with how many different services were available. As the number of different reentry services increased, respondents were increasingly likely to agree that their institution was meeting the needs of the confined population.

In addition, the results indicate that respondent attitudes are also related to whether their institution offered services related to employment (e.g., job readiness training, resume preparation, help finding a job) or documentation (e.g., assistance obtaining an identification card). Although it is ultimately unclear why these patterns emerged, it is possible that respondents regard these services as especially beneficial for individuals who are preparing to leave confinement.

### Annual Expenses and Funding

The survey results describe annual expenses and revenue for local jails and JDCs during 2022. Respondents at both jails and JDCs estimated that employee-related expenses (e.g., salaries and benefits) accounted for the vast majority of operating costs. Moreover, respondents at both jails and JDCs estimated that the majority of their annual funding came from local taxes.

However, we also observed some differences in how jails and JDCs received funding. On average, local taxes accounted for 96% of the funding at JDCs but only 64% at jails. Jails were more likely to rely on supplemental funding from a variety of sources, particularly through leasing unused bed space to other jurisdictions. On average, jails received about 22% of their annual funding through boarding contracts and per diem payments.

### Limitations

*Cost of Renovation/New Construction.* Less than 20% of the sample provided information on renovation/construction costs. As a result, we cannot assume that the patterns we observe are generalizable.

In addition, respondents provided information on cost estimates that they originally received as far back as 2015. Because many of these estimates are several years old, it is possible that this information is outdated. More research is needed to assess the potential costs of renovation and new construction accurately.

*Cost of Health Services.* One-third of respondents estimated the cost of health services based on their memory of past expenses. As a result, it is possible these responses may not be fully accurate.

*Annual Expenses and Funding.* Roughly 30-40% of respondents indicated that they did not review financial records to identify answers to survey questions. Instead, these respondents estimated the answers based on memory. As a result, it is possible these responses may not be fully accurate.

More generally, evidence suggests that self-report survey methods are prone to measurement errors when collecting financial information.<sup>81</sup> Ideally, we would supplement self-report data with administrative records that provided more details on institutional expenses and revenue. However, this is beyond the scope of the current study.

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<sup>81</sup> See Moore, J.C., Stinson, L.L., & Welniak, E.J. (2000). Income measurement error in surveys: A review. *Journal of Official Statistics-Stockholm*, 16(4), 331-362.

## V. Workforce

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Correctional officers (COs) are responsible for directly supervising individuals who are confined in jails and JDCs. Because these institutions operate 24 hours a day, 7 days a week, it is critically important that they maintain adequate levels of CO staffing. Factors that impact CO staffing include recruitment and retention efforts, working conditions, and the availability of state-mandated training for new officers.

In this section, we examine issues impacting the workforce in local jails and JDCs. First, we draw on survey data to describe CO staffing levels and working conditions during 2023. Second, we use a combination of survey data and administrative records from the Criminal Justice Training Commission (CJTC) to examine the availability of required training courses for COs in recent years.

### CO Staffing

Our survey data indicates that COs make up the bulk of the workforce at local jails and JDCs. On average, COs made up 82.4% of jail employees and 84.9% of JDC employees. We asked additional survey questions about CO staffing levels, overtime, and experiences with recruitment and retention.

### Turnover and Vacancies

Turnover occurs when employees leave an organization and must be replaced with new hires.

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<sup>82</sup> We calculated the CO turnover rate by dividing the number of COs who ended employment between January 1, 2023, and August 31, 2023, by the average size of the CO workforce measured at the beginning and end of that period.

It can be difficult for jails and JDCs to function properly when CO turnover is high since this often results in staffing shortages and a less experienced workforce.

The CO turnover rate represents the percentage of COs at an institution who ended employment during the period between January and August 2023 ([Exhibit 34](#)).<sup>82</sup> The average turnover rate at jails and JDCs was 16.3% and 15.6%, respectively.

The CO vacancy rate represents the percentage of CO positions that were vacant as of August 31, 2023 ([Exhibit 35](#)).<sup>83</sup> The average CO vacancy rate at jails and JDCs was 18.9% and 12.7%, respectively.

In exploratory analyses, we examined the relationship between CO turnover and vacancy rates and responses to a survey question about self-reported difficulty with recruiting and retaining COs.<sup>84</sup> We found that when the turnover or vacancy rate was 10% or higher, respondents reported greater difficulty with CO recruitment and retention. When the turnover or vacancy rate was less than 10%, respondents reported easier experiences with recruitment/retention.

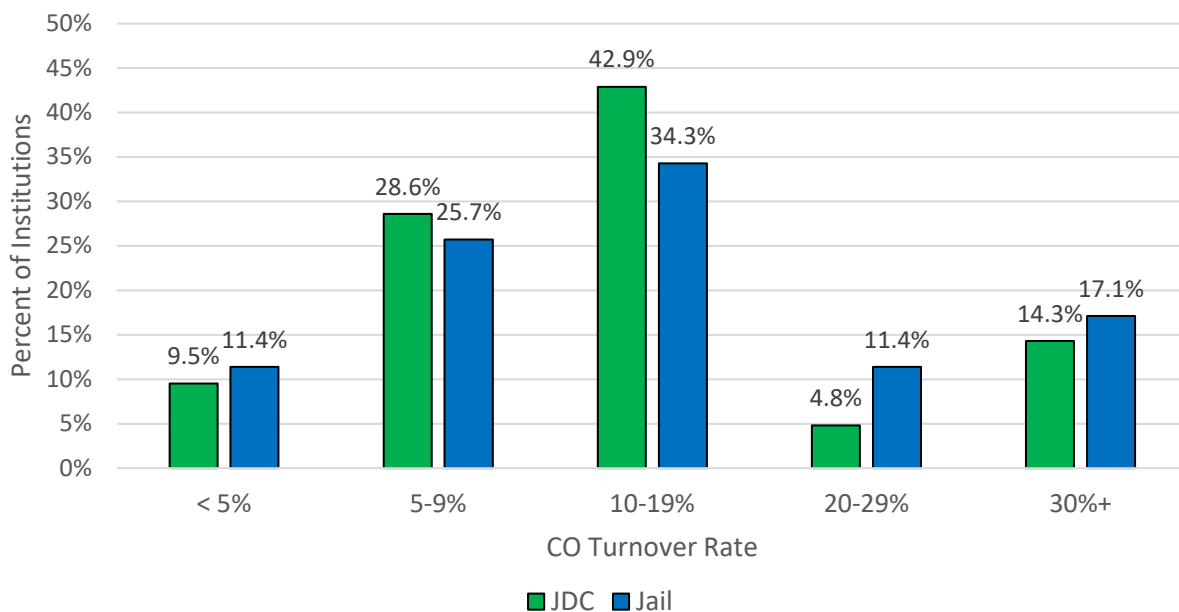
If we treat 10% as a rough indicator of the point at which the CO turnover/vacancy rate becomes problematic, then 62.5% of local institutions (35 out of 56) experienced problems with CO staffing in 2023. If we treat 30% as the threshold for severe staffing problems, then 16.1% of local institutions (9 out of 56) met this threshold.

<sup>83</sup> We calculated the CO vacancy rate on August 31, 2023, by dividing the number of vacant CO positions by the size of the CO workforce when the institution was fully staffed.

<sup>84</sup> See [Appendix II](#) for more details.

### Exhibit 34

Correctional Officer Turnover Rate: January to August 2023



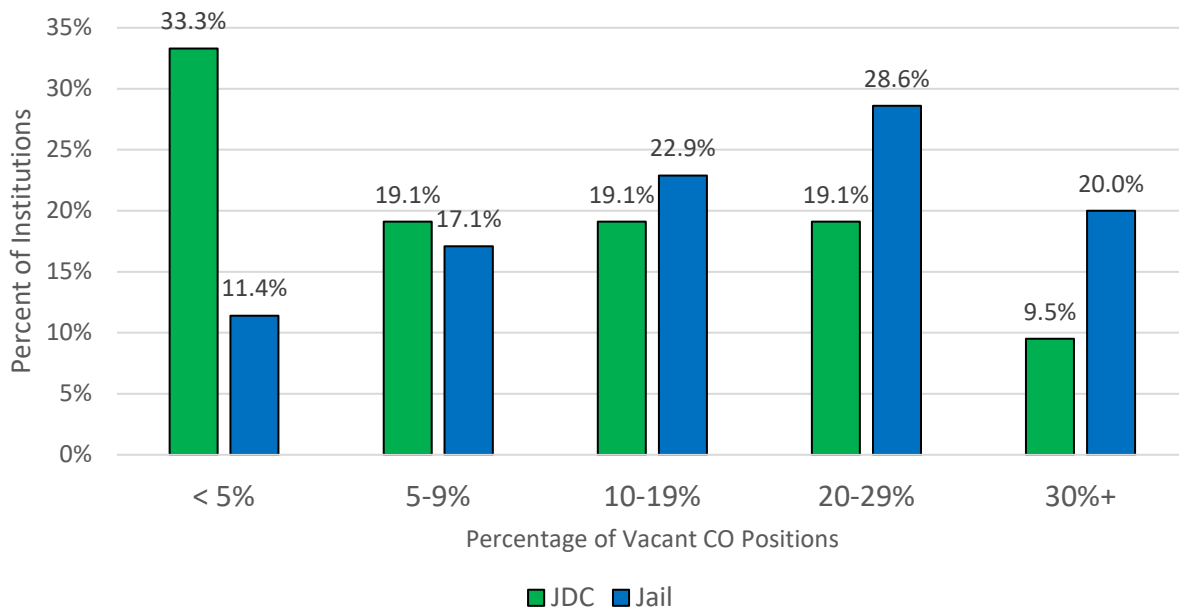
Notes:

JDC = Juvenile detention center (N=21).

Jails (N=35).

### Exhibit 35

Correctional Officer Vacancy Rate: August 2023



Notes:

JDC = Juvenile detention center (N=21).

Jails (N=35).



## Overtime

Staffing shortages often require COs to work overtime. The survey asked respondents how often their institution relied on two types of overtime between January and August 2023: 1) mandatory overtime, where an institution has a policy in place that officially requires COs to work overtime; and 2) voluntary overtime, which occurs when the institution does not officially require overtime but strongly encourages COs to work overtime as a matter of necessity.

We found that it was common for jails and JDCs to rely on voluntary CO overtime (Exhibit 36). When asked how often their institution relied on voluntary overtime, the majority of respondents for both jails (88.6%) and JDCs (80.9%) selected the option “*every week*.”

In contrast, we found that jails relied on mandatory overtime more frequently than JDCs. When asked how often their institution required mandatory overtime, the most common response for jails (62.9%) was “*every week*,” while the most common response for JDCs (42.9%) was “*never*.”

Although JDCs relied on mandatory overtime less than jails, the practice was still commonly used. For example, roughly half of JDCs (10 out of 21) used mandatory overtime on at least a monthly basis.<sup>85</sup>

<sup>85</sup> In exploratory analyses, we found that mandatory overtime, turnover, and vacancies for COs were highly correlated. This indicates that mandatory overtime was used most frequently by institutions that had high turnover and

## Exhibit 36

Reliance on CO Overtime: Frequency

Measure	Jails	JDCs
<b>Voluntary overtime</b>		
Never	1 (2.8%)	0 (0%)
Once every few months	0 (0%)	1 (4.8%)
1-2 times per month	3 (8.6%)	3 (14.3%)
Every week	31 (88.6%)	17 (80.9%)
<b>Mandatory overtime</b>		
Never	5 (14.3%)	9 (42.9%)
Once every few months	3 (8.6%)	2 (9.5%)
1-2 times per month	5 (14.3%)	4 (19.1%)
Every week	22 (62.9%)	6 (28.6%)

### Notes:

Jails (N= 5).

JDC = Juvenile detention center (N=21).

Overtime frequency was measured for the period between January and August 2023.

## Recruitment and Retention

We asked respondents several questions about their recent experiences with attempting to recruit and retain COs (Exhibit 37). A clear majority of respondents for jails (82.9%) and JDCs (85.7%) indicated it was “*hard*” or “*very hard*” to recruit COs. In exploratory analyses, we found that respondents at larger institutions rated CO recruitment as less difficult than those at smaller institutions.<sup>86</sup>

The majority of respondents agreed that there were not enough people applying to work as correctional officers and that most applicants accepted job offers. To a lesser extent, most respondents agreed that they reject a lot of unqualified applicants.

greater staffing shortages, though the direction of these relationships is unclear.

<sup>86</sup> See Appendix II for more details.

Finally, 60% of jail respondents and 57% of JDC respondents indicated it was “hard” or “very hard” to retain COs.

The survey also included open-ended questions that asked respondents to describe (in their own words) their recent experiences with CO recruitment and retention. After reviewing all responses to identify common themes, we categorized each response based on whether it contained the relevant theme. In the text below, we present a brief review of the key findings and provide full results in Appendix III.

**Challenges.** We asked respondents to describe “any challenges you have experienced while attempting to recruit/retain correctional officers.”

Inadequate compensation (i.e., low pay) emerged as the most commonly cited barrier to recruitment and retention. Respondents discussed compensation as both an independent barrier (i.e., it is difficult to recruit and retain COs when the pay is low) and as an aggravating factor (i.e., other barriers to recruitment and retention are intensified by the low pay).

While discussing barriers to recruitment, one respondent wrote: “We hear constantly that people do not want to work in a jail and put their lives at risk for basically a little more than minimum wage.”

Several respondents mentioned “burnout” as a challenge for retention. This theme often appeared in responses that described the following chain of events: 1) staffing shortages lead to overtime and heavier workloads for remaining COs;

### Exhibit 37

#### Attitudes toward CO Recruitment/Retention

Measure	Jails	JDCs
<b>Recruitment difficulty</b>		
Very easy	0 (0%)	0 (0%)
Easy	2 (5.7%)	0 (0%)
Neutral	4 (11.4%)	3 (14.3%)
Hard	11 (31.4%)	12 (57.1%)
Very hard	18 (51.4%)	6 (28.6%)
<b>Reason for recruitment difficulty</b>		
<i>“Not enough applicants.”</i>		
Agree	31 (88.6%)	16 (76.2%)
Neutral	1 (2.9%)	4 (19.1%)
Disagree	3 (8.6%)	1 (4.8%)
<i>“Reject a lot of applicants who are not qualified.”</i>		
Agree	20 (57.1%)	13 (61.9%)
Neutral	8 (22.9%)	2 (9.5%)
Disagree	7 (20.0%)	6 (28.6%)
<i>“Once a job offer is made, most applicants accept.”</i>		
Agree	32 (91.4%)	15 (71.4%)
Neutral	3 (8.6%)	6 (28.6%)
Disagree	0 (0%)	0 (0%)
<b>Retention difficulty</b>		
Very easy	1 (2.9%)	0 (0.0%)
Easy	2 (5.7%)	3 (14.3%)
Neutral	11 (31.4%)	6 (28.6%)
Hard	14 (40.0%)	7 (33.3%)
Very hard	7 (20.0%)	5 (23.8%)

**Notes:**

Jails (N=35).

JDC = Juvenile detention center (N=21).

2) this increases job stress and decreases work-life balance; and 3) which results in burnout and turnover.

Other commonly cited barriers include the high-stress nature of working in a correctional setting, the inflexible work schedule, and competition with law enforcement (i.e., COs are often drawn to the better pay and benefits of police work).

As one respondent put it: “COs quickly move into law enforcement to get into a better retirement system sooner and the pay is so much better.”

*Helpful Strategies.* We asked respondents to describe “any strategies that have helped you with recruiting/retaining correctional officers.”

Respondents frequently discussed financial incentives, such as “signing/retention bonuses.” This involves offering individuals a cash payment at the start of employment in exchange for agreeing to work a minimum length of time (e.g., \$5,000 for two years). If the individual does not fulfill the agreed-upon length of employment, then they must reimburse the cost of the bonus.

We also found that larger institutions described different recruitment and retention strategies than smaller institutions.<sup>87</sup>

*Policies to Support Recruitment and Retention.* We asked respondents to identify “policies that might be implemented to help institutions recruit and retain correctional officers.”

Respondents frequently discussed policies related to compensation and retirement. For example, several respondents proposed that COs should be switched from the Public Safety Employees’ Retirement System

(PSERS) to the Law Enforcement Officers’ and Fire Fighters’ Retirement System (LEOFF).

These respondents emphasized that it is common for people seeking a career in law enforcement to first work as a CO to gain job experience. However, because of differences in retirement plans, their tenure as a CO will not count toward retirement once they become a police officer.

According to respondents, this makes the prospect of working as a CO less appealing, which negatively impacts recruitment. In addition, respondents noted that this also poses problems for retention because it creates an incentive for individuals to make the switch from corrections to law enforcement as quickly as possible.

### CO Training

As discussed in [Section I](#), state law requires individuals to complete CJTC training within six months of being hired as a CO. We examine the availability of CJTC courses by using administrative records from the CJTC to illustrate recent trends in course completion.<sup>88</sup> Next, we review the results from survey questions measuring respondent attitudes toward CJTC training.

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<sup>87</sup> Based on our reading of the open-ended responses, it appears that larger institutions have more resources to dedicate to recruitment and retention efforts than smaller institutions. This may help to explain why respondents from

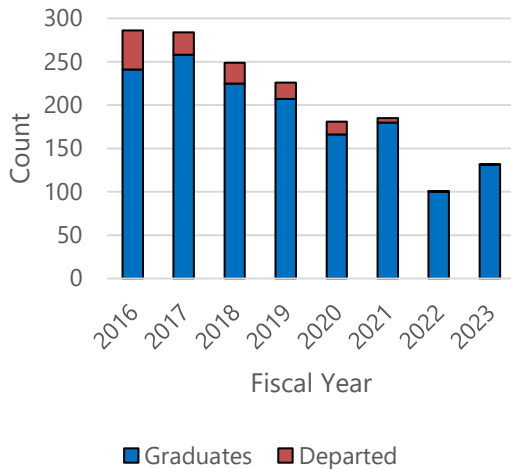
larger institutions rated CO recruitment as less difficult than respondents from smaller institutions.

<sup>88</sup> See [Section II](#) for a description of the CJTC data.

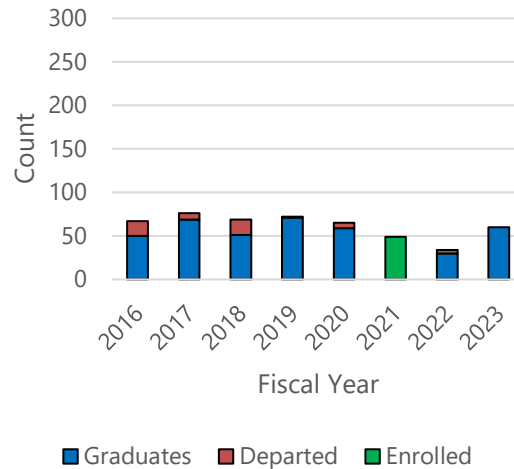
## Exhibit 38

### CJTC Course Completion: 2016-2023

Panel A: COA



Panel B: JCOA



Notes:

Data was lost for one JCOA course in FY2021, meaning the proportion of registrants who graduated successfully could not be computed in that year. JCOA observations may include individuals who were not working as juvenile correctional officers, as some courses were open to non-corrections personnel working with juveniles (e.g., juvenile probation officers).

#### Trends in Course Completion

Panel A of [Exhibit 38](#) shows the number of enrollees who graduated or departed from the Corrections Officer Academy (COA) between 2016 and 2023. During this time period, the number of individuals enrolled in the COA declined by 56.4%. In addition, the results indicate that the COA graduation rate increased between 2016 and 2023.

Panel B of [Exhibit 38](#) shows the number of enrollees who graduated or departed from the Juvenile Corrections Officer Academy (JCOA) between 2016 and 2023. The number of JCOA enrollments remained relatively steady between 2016 and 2019, declined from 2019 to 2022, then rebounded from 2022 to 2023. In addition, JCOA graduation rates fluctuated between 2016 and 2018 but appear to have increased in more recent years.

#### Attitudes Toward CJTC Training

We asked two survey questions about the availability of CJTC training courses ([Exhibit 39](#)). The results indicate that a clear majority of respondents were dissatisfied with the availability of CJTC courses. A clear majority of respondents disagreed with the statement, “Most of the time, new recruits are able to start training soon after they are hired.” Similarly, a clear majority disagreed with the statement, “Overall, I am satisfied with the current availability of CJTC courses.”

We also asked a survey question about the quality of CJTC training ([Exhibit 39](#)). Although there was widespread agreement among respondents about the limited availability of CJTC courses, we found that respondents at jails and JDCs differed in their attitudes toward the quality of CJTC training.

### Exhibit 39

#### Attitudes toward CJTC Training

Measure	Jails	JDCs
<b>Availability</b>		
<i>"New recruits start training soon after being hired."</i>		
Agree	8 (22.9%)	3 (14.3%)
Neutral	2 (5.7%)	2 (9.5%)
Disagree	25 (71.4%)	16 (76.2%)
<i>"I am satisfied with the availability of CJTC courses."</i>		
Agree	2 (5.7%)	0 (0%)
Neutral	6 (17.1%)	4 (19.1%)
Disagree	27 (77.1%)	17 (80.9%)
<b>Quality</b>		
<i>"I am satisfied with the quality of CJTC courses."*</i>		
Agree	12 (34.3%)	1 (4.8%)
Neutral	18 (51.4%)	4 (19.1%)
Disagree	5 (14.3%)	16 (76.2%)

**Notes:**

Jails (N=35).

JDC = Juvenile detention center (N=21).

\* Differences between jail and JDC responses are statistically significant at the 0.001 level.

The survey asked respondents how much they agreed or disagreed with the statement, *"Overall, I am satisfied with the quality of CJTC training."* A clear majority of JDC respondents (76.2%) disagreed with this statement. In contrast, only 14.3% of jail respondents disagreed with this statement.

We also asked open-ended questions to measure respondent attitudes toward the availability and quality of CJTC training. In the text below, we present a brief review of the key findings and provide full results in [Appendix III](#).

**Training Availability.** We asked respondents to *"describe how you feel about the availability of CJTC training."* The most common theme was *"insufficient availability,"* where respondents emphasized the need for larger class sizes and for the CJTC to offer courses more frequently throughout the year. For example, one respondent wrote: *"They need to at least double or triple the number of classes."*

Several respondents also discussed the *"backlog"* of individuals waiting to enroll in CJTC courses. According to these respondents, new hires who attempted to enroll in CJTC courses were forced to wait several months before they could begin the training academy. The estimated time to begin training ranged from 6 to 14 months after the hiring date. As one respondent noted: *"We are currently almost a year out from when someone is hired to getting them into training. It is horrible and detrimental to the functioning of the jail."*

We were able to partially corroborate respondent concerns over the backlog of COA courses. As of May 2023, there was an 11-month wait for a COA class with open space.<sup>89</sup>

**Training Quality.** We also asked respondents to *"describe how you feel about the quality of CJTC training."* The results provide further support for the idea that jail respondents generally reported positive or neutral feelings toward the quality of CJTC training, while JDC respondents tended to be more critical. The most common themes from jail respondents referenced the *"high quality"* or *"acceptable quality"* of CJTC training.

<sup>89</sup> From web screenshots taken from [web.archive.org](http://web.archive.org).

For example, one jail respondent wrote: *"The quality is great! The 10-week course is much more involved."* Another jail respondent wrote: *"The quality appears to be adequate for the requirements of Washington State."*

In contrast, virtually all of the negative feedback on the quality of CJTC training came from JDC respondents. Several JDC respondents expressed that the JCOA was missing important content. When providing examples of missing content, these respondents frequently mentioned verbal de-escalation, trauma-informed care, adolescent brain development, and youth mental health.

It was also common for JDC respondents to comment on the poor quality of JCOA training. These respondents typically characterized JCOA training as underdeveloped and conducted with minimal effort. For example, one JDC respondent wrote: *"The training is poorly organized with outdated material."*

In many cases, respondents argued that the quality is poor because the CJTC does not prioritize training for juvenile corrections. According to these respondents, the CJTC is not invested in developing adequate training for juvenile corrections because the organization is fundamentally focused on providing instruction for law enforcement and adult corrections. For example, JDC respondents expressed sentiments such as *"juvenile detention is clearly an afterthought"* and *"the focus is on adult inmates, not juveniles."*

Finally, several JDC respondents were critical of the quality of training because the JCOA instructors *"are not subject matter experts."*

These respondents expressed that the JCAO was not capable of providing adequate training because the instructors did not have experience working with juveniles in correctional settings and were not knowledgeable on the topic. For example, one JDC respondent wrote: *"The JCOA courses are not taught by subject matter experts or people with experience working with youth."*

## Summary

We used survey data to examine CO staffing levels in jails and JDCs during 2023. We also examined the availability of CO training courses in recent years using administrative records from the CJTC and survey data. In the text below, we summarize our key findings and discuss the limitations of our study.

## CO Staffing

The results from our survey indicate that the vast majority of employees at jails and JDCs worked as COs. However, it was common for respondents to report problems with CO staffing. About two-thirds of respondents reported CO turnover and vacancy rates of 10% or higher, which appears to be the point where institutions begin to experience greater difficulties with staffing shortages.

Due to staffing shortages, it was common for institutions to rely on COs to work overtime. Most respondents reported that between January and August 2023, their institution needed COs to work overtime on a weekly basis. Moreover, most jails implemented mandatory overtime policies that officially required COs to work overtime. This practice was less common among JDCs but was still widely used.



Staffing shortages occur when organizations struggle to recruit new employees or retain active employees. The survey results indicate that both processes have contributed to CO staffing issues at local jails and JDCs. In particular, there appears to be widespread agreement among respondents that a major challenge for recruitment is that relatively few people are applying to work as COs.

In response to open-ended questions about recruitment and retention, respondents repeatedly pointed to compensation as the essential issue. A common sentiment among respondents was that people are willing to work as COs as long as the pay and benefits are commensurate with the stress and risks of the job. According to these respondents, most problems with recruitment and retention can be resolved with higher salaries and better benefits.

We also found evidence of regional differences in experiences with hiring and retaining COs. For example, eastern counties were more likely to believe that increased pay was a necessary strategy.

While discussing their experiences with hiring COs, western respondents were more likely to cite the benefits of using financial incentives and to emphasize the need to streamline the hiring process. This suggests that many western institutions have sufficient resources to attract job candidates but feel hindered by inefficiencies in the hiring process.

In addition, we found that larger institutions reported it was easier to recruit/retain COs than smaller institutions. In general, it appears that larger institutions may have more resources at their disposal to recruit and retain COs than smaller institutions. For example, respondents at larger institutions were more likely to report using resource-intensive strategies such as advertising job postings on social media platforms, sending recruiters out to job fairs, and paying retention bonuses. Indeed, it appears that the main concern among respondents at larger institutions is their inability to compete with the pay and benefits offered by law enforcement agencies.

#### CO Training

*CJTC Data.* We found that COA enrollments decreased by more than 50% between 2016 and 2023. Enrollments dropped by about 20% between 2019 and 2020, which likely reflects the impact of COVID-19.

However, there was an even larger drop between 2021 and 2022, when COA enrollments decreased by 45%. This coincided with the implementation of new legislation that increased the length of the COA and reduced the frequency of course offerings to four times a year.<sup>90</sup>

We also found that JCOA enrollments decreased by about 50% between 2019 and 2022, then nearly returned to pre-pandemic levels between 2022 and 2023. According to the CJTC website, JCOA courses are generally full by the start date, but the subsequent JCOA typically has space available. Moreover, there does not appear to be a growing backlog of officers waiting to enroll in JCOA programs.

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<sup>90</sup> See [Section I](#) for more details.

*Survey Data.* The majority of respondents expressed dissatisfaction with the availability of CJTC training. Regardless of whether they worked at a jail or JDC, respondents noted similar concerns about the limited availability of CJTC courses and an extensive backlog of waitlisted students, which typically meant that new recruits had to wait 6-12 months (or longer) to begin training.

In contrast, we found large differences in how jail respondents and JDC respondents felt about the quality of CJTC training. On the one hand, most jail respondents expressed neutral or positive attitudes toward the quality of training offered at the COA.

On the other hand, most JDC respondents expressed negative attitudes toward the quality of training offered at the JCOA. Several JDC respondents noted that the JCOA curriculum was missing important content, and the instructors lacked experience working with juveniles in a correctional setting.

#### **Limitations**

We did not have access to data on the number of people who needed to enroll in CJTC courses. This is a major limitation since we cannot fully examine the “*availability*” of CJTC courses without knowing how many people tried to enroll but failed because the courses were full.



## VI. Conclusion

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This report presents the results of an in-depth descriptive study of jails and juvenile detention centers (JDCs) across Washington State. The main purpose of these institutions is to provide a secure environment to house individuals who have been arrested while they wait for their cases to be processed through the court system (i.e., pretrial detention).<sup>91</sup>

The current study addresses three research objectives. First, we examined changes in the characteristics of the jail and JDC population since 2010. Second, we surveyed individuals in leadership positions at jails and JDCs to collect information on various topics (e.g., staffing shortages, the age/condition of facilities, etc.). Finally, we examined the availability of training courses that are required for individuals to work as correctional officers.

In the text below, we review the main findings for each of these three research objectives. We close by discussing elements of the legislative assignment that we were unable to address.

### Trends in Population Characteristics

We used administrative data from 2010-2022 to examine the characteristics of all individuals admitted to jail and JDC facilities who were confined for at least 24 hours.

Some characteristics did not meaningfully change during this time period. For example, the sex and racial/ethnic composition of these populations remained stable, as did the prevalence of certain health conditions.

However, several characteristics changed between 2010 and 2022. In general, these changes occurred in two ways. First, some changes occurred gradually throughout the observation period. For example, annual admissions to JDC facilities continuously decreased at a steady rate, as did the percentage of individuals in the jail population who were under age 25.<sup>92</sup> Similarly, we found that the prevalence of individuals with mental health needs steadily increased during this period, particularly for the JDC population.

Second, we found that some characteristics underwent sudden, dramatic changes between 2019 and 2022. In particular, there was a steep decrease in admissions to jail facilities and—to a lesser extent—JDC facilities, a sharp drop in the percentage of individuals detained for minor drug offenses, and a distinct uptick in the percentage of individuals detained for violent offenses.

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<sup>91</sup> The secondary purpose of these institutions is to house individuals who have been convicted of minor offenses. Depending on their age, individuals may be sentenced to serve up to one year in jail or up to 30 days in a JDC.

<sup>92</sup> These particular patterns reflect the intended impact of decisions by policymakers to reduce the size of these

populations. See Washington State Department of Children, Youth, and Families. (2022). *Washington State juvenile justice report to the governor & state legislature*. Washington State Partnership Council on Juvenile Justice and [Spangler et al. \(2024\)](#).

Given the timing and direction of these changes, it is highly likely that COVID-19 and *State v. Blake* (2021) were major contributing factors. These events actively discouraged police and prosecutors from detaining individuals for low-severity drug crimes, which may have led to a greater focus on individuals accused of serious and/or violent crimes.

### Survey of Local Facilities

During the last three months of 2023, we collected survey data from 56 institutions (35 jails, 21 JDCs) operating 64 facilities across Washington State.<sup>93</sup> To the best of our knowledge, this represents 100% of the facilities in operation.

The survey included questions about a wide variety of topics.<sup>94</sup> Because we provide a detailed review of the survey results in earlier sections of this report, we limit our discussion to a handful of key findings.

#### Four Main Issues

The survey data revealed that many local jails and JDCs are experiencing an array of challenges across multiple domains. For the purposes of this summary, we focus on four issues that repeatedly came up throughout the survey: staffing shortages, aging infrastructure, behavioral health, and limited funding.<sup>95</sup>

***Staffing Shortages.*** The results from our survey indicate that during August 2023, about two-thirds of jails and JDCs were experiencing problems related to correctional officer (CO) staffing shortages.

As a result, most institutions were relying on COs to work overtime on a weekly basis. Several respondents noted that because these circumstances made the job especially stressful and increased the risk of burnout, CO staffing shortages had a self-reinforcing quality. Indeed, many respondents described staffing shortages as the most serious problem that their institution was facing.

***Aging Infrastructure.*** To maintain security and adequate living conditions, jails and JDCs must preserve the physical condition of their facilities. However, as facilities age, they will eventually experience deterioration (e.g., weather damage, wear and tear, vandalism) and functional obsolescence (e.g., changing technology, outdated designs). As a result, it can be difficult for older facilities to function properly.

The survey results revealed that most jails and JDCs are several decades old. For example, about half of jails opened in the 1980s, while roughly half of all JDCs opened in the 1990s. We also found that respondents at older facilities were more likely to report that their facilities were in worse physical condition. Overall, about two-thirds of respondents indicated that their facility needed extensive construction work to be restored to proper working order.

***Behavioral Health.*** It was common for survey respondents to express concern over the rising prevalence of individuals in jails and JDCs with serious behavioral health needs during the last decade.

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<sup>93</sup> WSIPP designed the survey in collaboration with Washington State Association of Counties (WSAC).

<sup>94</sup> See [Appendix I](#) to access a link to the questionnaire.

<sup>95</sup> We ended the survey with an open-ended question that asked respondents to identify important issues that their institution was facing. These were the most commonly cited issues.

Several respondents observed that their institution was not designed to serve individuals with severe mental health and substance use disorders and that the increased concentration of such individuals made their jobs more stressful. The survey results revealed that during August 2023, about two-thirds of the confined population in JDCs and one-half in jails had behavioral health needs.

*Limited Funding.* It was common for respondents to emphasize that many of the problems their institution was facing could be resolved with greater funding, but their county simply did not have the tax revenue to cover the costs. For example, most respondents expressed that the CO staffing shortage could be addressed by increasing compensation and offering recruitment bonuses. Similarly, respondents noted that aging infrastructure could be fixed with renovation or new construction, but they required additional support and funding beyond what was available through local sources.

### Type, Size, and Region

Although we administered the same questionnaire to all 56 institutions, we repeatedly found patterns in survey responses that were unique to specific subgroups of respondents. In particular, jail respondents reported more severe problems with staffing shortages and aging infrastructure, while JDC respondents were more likely to emphasize the extensive behavioral health needs of facility residents and express concern over the quality of state-mandated training for working with this population.

In addition, we found that institutional size is strongly associated with access to resources (e.g., money, personnel, services). Survey results indicate that the smallest institutions in the sample have the least resources, while the largest ones have the most.

Finally, we found differences between respondents based on whether their institution served Eastern or Western Washington. According to survey respondents, eastern facilities tend to be substantially older and in worse physical condition than western facilities.

### Availability of CJTC Courses

We examined the availability of courses offered by the Criminal Justice Training Commission (CJTC). We received information on the availability of CJTC courses through CJTC administrative data and in our survey.

The CJTC data showed that Corrections Officer Academy (COA) and Juvenile Corrections Officer Academy (JCOA) enrollments decreased dramatically between 2019 and 2022. However, while JCOA enrollments nearly returned to pre-pandemic levels in 2023, COA enrollments did not.

In 2021, legislation changed the length of the COA from four weeks to ten weeks. This also resulted in a decrease in COA frequency from ten to four times per year. This drop in frequency resulted in an overall reduction in COA capacity.

The survey results revealed that a clear majority of respondents at jails and JDCs were dissatisfied with the availability of CJTC courses. Many respondents reported that new recruits were unable to complete the required training within six months of being hired. In general, it was clear from the survey responses that most respondents were deeply frustrated with the limited availability of CJTC courses.

Based on our review of the survey data, it seems that JDC respondents are primarily dissatisfied with the fact that JCOA courses are only offered twice a year.

### Addressing the Legislative Assignment

The legislative assignment directed WSIPP to collect survey data on 17 issues. However, the data we collected did not fully address four out of 17 of these issues:

- Costs of housing individuals with behavioral health needs;
- Cost of competency restoration;
- County tax structure and revenue-raising ability;
- Available non-incarcerative alternatives and diversion programs.

We partially addressed the costs of housing those with behavioral health needs by asking respondents whether they believed it was more expensive to house these individuals.<sup>96</sup> This allowed us to measure respondent perceptions of the relative costs of housing individuals with behavioral health needs, which is useful for simple descriptive purposes.

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<sup>96</sup> Specifically, the survey asked respondents whether they agreed or disagreed with the statement: *"Compared to other facility residents, it is more expensive to house residents with behavioral health needs."*

However, we were unable to obtain precise information on the costs associated specifically with housing individuals with behavioral health needs. To our knowledge, jails and JDCs do not keep track of the time and resources that their employees expend serving members of this population.

For example, we originally attempted to measure the cost of health services using separate survey questions for each type of service (e.g., dental, mental, SUD, and physical). However, we received feedback from about half of the respondents indicating they only had access to information on the *total* cost of health services, which they provided as a single lump sum.<sup>97</sup>

The other three components were not included in the survey because this information is not readily available to local jails and JDCs. Specifically, competency restoration services are administered after individuals are transferred out of the local jail/JDC, so these institutions would not have information on these costs. Information on county tax structure would need to come from county-level sources. Similarly, non-incarcerative alternatives and diversion programs are administered by other organizations, so a detailed list would not be possible by asking jail and JDC staff.

Given the resources for this study, it was not possible to track down this information from other sources. Further resources would be required to address these components.

<sup>97</sup> To maintain consistency, we harmonized survey responses by calculating the total cost of all health services during 2022.



# Appendices

County Jails and Juvenile Detention Centers in Washington State:  
*Population Trends, Survey of Local Facilities, and Availability of CJTC Courses*

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Appendices	
I.	Survey of Local Facilities .....66
II.	Exploratory Analyses .....68
III.	Workforce: Qualitative Results .....70
IV.	Regionalization and Important Issues .....75

## I. Survey of Local Facilities

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This appendix provides additional details on our survey of local facilities. To access the questionnaire, [click here](#).

### Survey Administration

#### Survey Design

During the summer of 2023, we collaborated with representatives from the Washington State Association of Counties (WSAC) to design an initial version of the questionnaire. WSAC then arranged for a focus group of administrators from county jails and juvenile detention centers (JDCs) to provide feedback on the questionnaire. This feedback helped us improve the quality of the survey by drawing our attention to issues related to question-wording, response options, and missing content.

#### Recruitment

In collaboration with WSAC, we obtained contact information for individuals in leadership positions at each of the 56 institutions that comprised the target population. Before the start of data collection, these individuals received emails explaining that they had been selected to participate in a survey of local facilities. These emails described why the survey was being conducted, shared links to the relevant legislation, and directed individuals with additional questions to contact representatives from WSAC.

#### Data Collection

Data collection took place between September and December 2023. To initiate data collection, prospective respondents received an email with instructions for completing the survey, a PDF containing a printable version, and a link to an online survey.

The survey was long (over 100 questions) and complex (some questions required respondents to review organizational records). To make the process less burdensome, we instructed respondents to approach the survey in four steps: 1) print the survey and review the questions; 2) collect the necessary information to complete the survey, which might require reviewing records or seeking input from other individuals in the organization; 3) record answers directly on the paper version of the survey; and 4) access the online survey to input survey responses.

To ensure a high response rate, we sent weekly reminders to individuals who had not completed the survey. Once respondents completed the online survey, they received email confirmation and were removed from the contact list. After 87 days of data collection, we achieved a 100% response rate in mid-December 2023.

## Additional Details

### Respondent Title

The survey asked respondents to write in their professional titles. We found large differences between respondents for jails and JDCs.

Most respondents for jails (71.4%) identified themselves using terms such as *"chief," "commander,"* or *"superintendent."* The second most common type of response (14.3%) identified jail respondents as correctional personnel, such as *"captain," "lieutenant,"* or *"sergeant."*

In contrast, most JDC respondents identified as either *"court administrators"* (42.9%) or *"detention managers"* (33.3%).

## II. Exploratory Analyses

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This appendix provides additional details on exploratory analyses referenced throughout the report. In the text below, we describe the exploratory analyses based on the sequence in which they appear in the report.

### Section III

#### Confined on Behalf of Other Authorities

We used logistic regression analysis and treated “supervised any unconfined individuals” as the dependent variable. The analysis included institutional size and region-type (i.e., western jail, western JDC, eastern jail, eastern JDC) as covariates.

#### Awaiting Transfer for Competency Restoration Services

We used logistic regression and treated “any individuals awaiting transfer” as the outcome variable. The analysis included measures for institution type, region, and size.

### Section IV

#### Age and Quality

We used ordered logistic regression and treated each quality rating as a separate dependent variable. We estimated two models for every dependent variable. In the first model, we included measures of institution type and region served. In the second model, we re-estimated the same model as before but introduced facility/system age as an additional measure. If the estimate for the region served was statistically significant in the first model, but not the second, this serves as evidence that regional differences in quality are driven by age differences.

#### Institutional Size and Health Services

We found that 0% of small institutions, 5% of medium-sized institutions, and 33% of large institutions provided onsite dental health services. Roughly 17% of small institutions, 64% of medium-sized institutions, and 92% of large institutions provided onsite mental health services. About 6% of small institutions, 39% of medium-sized institutions, and 83% of large institutions provided onsite SUD services. Finally, around 39% of small institutions, 68% of medium-sized institutions, and 92% of large institutions provided onsite physical health services.

#### Attitudes toward Health Services

*Behavioral Health.* We used multinomial logistic regression and treated each of the four attitude items as separate dependent variables. Each analysis included measures for institution type, region, size, and proportion of the confined population with behavioral health needs.

#### Reentry Services

We used multinomial logistic regression and treated responses to the statement “reentry services are adequate” as the dependent variable. We estimated three models. In the first model, we included measures of institution type, region, and size as covariates. In the second model, we added a count variable to the analysis that measured the number of available reentry services (i.e., from 1 to 10). In the third model, we included measures for institution type, region, size, and binary variables to indicate the availability of different types of reentry services.

Next, we used logistic regression analysis and treated binary measures of each reentry service as separate dependent variables. Each analysis included measures of institution type, region, and size.

## Section V

### Turnover and Vacancies

We used ordered logistic regression and treated self-reported difficulty with recruiting and retaining correctional officers (COs) as separate dependent variables. Each analysis included measures of institution type, region, size, and categorical variables representing the CO vacancy/turnover rate.

### Recruitment and Retention

We used ordered logistic regression and treated self-reported difficulty with recruiting COs as the dependent variable. Each analysis included measures of institution type, region, and size.



### III. Qualitative Results

This appendix shows the complete results from open-ended survey questions related to CO recruitment, CO retention, and attitudes toward CJTC courses (Section V). After reviewing all responses to identify common themes, we categorized each response based on whether it contained the relevant theme. In the exhibits below, we describe the main themes that emerged, show the percentage of respondents who mentioned these themes, and include quotes from respondents to illustrate each theme.

#### CO Recruitment

##### Exhibit A1

##### Challenges for CO Recruitment: Themes from Open-Ended Responses

Themes	Frequency
<p><b>Low pay:</b> Compensation is insufficient</p> <p><i>"Low pay that is not commensurate with the requirements and risks of the job."</i></p> <p><i>"We hear constantly that people do not want to work in a jail and put their lives at risk for basically a little more than minimum wage."</i></p>	20 (35.7%)
<p><b>Hiring/vetting process:</b> Screening process is overly restrictive</p> <p><i>"Our internal screening standards are too strict (polygraph, psychological evaluation, and background check). The process takes too long—3 months before cleared to hire."</i></p>	19 (33.9%)
<p><b>Unqualified applicants:</b> Only a small percentage of applicants are qualified for the job</p> <p><i>"We get many applicants, but very few are qualified. Many have not completed the application properly."</i></p> <p><i>"Finding qualified applicants is a barrier. Most have no idea what they are applying for."</i></p>	16 (28.6%)
<p><b>Competition:</b> Applicants accept better offers from other organizations in related fields*</p> <p><i>"Most applicants are applying to multiple agencies at the same time. Other counties offer hiring bonuses that we cannot compete with."</i></p> <p><i>"Pay is always a challenge, especially when surrounding counties are paying more. Many staff start at the jail but then move to the field for better pay."</i></p>	15 (26.8%)
<p><b>Job duties/schedule:</b> The working conditions are stressful, and the schedule lacks flexibility</p> <p><i>"The work schedule is not flexible and can be uncertain (overtime), which impacts work-life balance."</i></p> <p><i>"Other jobs have better hours and less stress for the same (or nearly the same) amount of pay."</i></p>	12 (21.4%)

**Notes:**

N=56; Two respondents skipped this question.

\* Respondents at larger institutions were more likely to reference "competition" (p-value < 0.01).

### Exhibit A2

#### Helpful Strategies for CO Recruitment: Themes from Open-Ended Responses

Themes	Frequency
<b>Financial incentives:</b> Offer signing bonuses and competitive salaries <i>"We created signing bonuses of \$5,000 and offer competitive pay for starting officers."</i> <i>"Hiring incentives, retention pay, pay scale increase, double overtime"</i>	16 (28.6%)
<b>Job fairs:</b> Pursue recruitment opportunities at job fairs* <i>"We send our hiring unit to job fairs." "Our recruiters attend career fairs."</i> <i>"We will be attending job fairs at a local community college."</i>	13 (23.2%)
<b>Social media:</b> Use online social media platforms to advertise job postings and promote interest* <i>"Advertising on Facebook." "Posting job openings on social media has helped a little."</i> <i>"We use videos showing the work that our officers do and post those on platforms like YouTube."</i>	12 (21.4%)
<b>Word of mouth:</b> Informal recruitment efforts where employees tell others about job openings <i>"I have staff telling their friends and family to apply."</i> <i>"Word of mouth - current staff members are the best recruiters."</i>	12 (21.4%)
<b>Other strategies:</b> Miscellaneous recruitment strategies <i>"Presenting to college classes." "Recruitment from other agencies."</i> <i>"Being present at Public Safety Testing sites; recruitment at JBLM; invitations to tour the facility."</i>	11 (19.6%)

**Notes:**

N=56; eight respondents skipped this question.

\*Respondents at larger institutions were more likely to reference "job fairs" and "social media" (p-value < 0.05).

### Exhibit A3

#### Policies to Support CO Recruitment: Themes from Open-Ended Responses

Themes	Frequency
<b>Compensation:</b> Policies related to salary increases and signing bonuses <i>"It may help if County Commissioners and Union would authorize recruitment bonuses."</i> <i>"Increase salaries so that they are commensurate with law enforcement."</i>	17 (30.3%)
<b>Hiring/application process:</b> Adjust requirements related to age and physical/mental evaluations <i>"Lower the hiring age to 18." "Stop requiring a polygraph examination."</i> <i>"Remove physical aptitude testing." "Review the need for psychological evaluation."</i>	11 (19.6%)
<b>Retirement:</b> Change retirement plan from PSERS to LEOFF <i>"COs should receive the same retirement plan as police; similar work, but COs have later retirement age."</i> <i>"Many people want to switch from CO to police, but the retirement doesn't transfer, so they leave quickly."</i>	9 (16.1%)

**Notes:**

N=56; 23 respondents skipped this question.

PSERS = Public Safety Employees' Retirement System.

LEOFF = Law Enforcement Officers' and Fire Fighters' Retirement System.

## CO Retention

### Exhibit A4

#### Challenges for CO Retention: Themes from Open-Ended Responses

Themes	Frequency
<b>Low pay/benefits:</b> Compensation is insufficient, and retirement plan is unappealing <i>"Generally it is the level of pay. They stay between 4 months and 1 year before moving on to higher-paying jobs."</i> <i>"They quickly move into law enforcement to get into a better retirement system sooner and the pay is so much better."</i>	31 (55.4%)
<b>Competition:</b> COs leave to pursue jobs at other institutions or in law enforcement <i>"Neighboring counties offer much better pay with less assigned responsibilities and more support staff."</i> <i>"Several COs leave corrections for law enforcement jobs that have better wages and retirement."</i>	22 (39.2%)
<b>Burnout:</b> Excessive stress from staffing shortages, overtime requirements, and increased workload <i>"Staff shortages lead to overtime and heavier workloads for remaining staff, which results in burnout."</i> <i>"Being short-staffed requires mandatory overtime, which burns staff out and prevents work-life balance."</i>	11 (19.6%)
<b>Schedule:</b> Work schedule is demanding <i>"We can't compete with jobs that don't require working nights, holidays, weekends."</i> <i>"Difficulty of working set night shift schedules."</i>	8 (14.3%)
<b>Challenging work:</b> It is stressful to work in a correctional setting <i>"The nature of the position—it's a stressful environment." "Low wages for a high-risk career."</i> <i>"It is a difficult job mentally." "We work in a challenging environment."</i>	6 (10.7%)

Note:

N=56; six respondents skipped this question.

### Exhibit A5

#### Helpful Strategies for CO Retention: Themes from Open-Ended Responses

Themes	Frequency
<b>Work culture:</b> Maintaining a supportive atmosphere where staff feel appreciated and work as a team <i>"Employees like working here and feel supported by administration." "Employee recognition."</i> <i>"Having a quality workplace where people want to stay." "Trying to create a positive work place."</i>	19 (33.9%)
<b>Increased pay:</b> Increased salary/benefits have assisted with retention efforts <i>"Our officers have negotiated great pay and benefits which have been supported by our county."</i> <i>"Working with commissioners to increase pay/benefits." "Salary increases in 2022 have helped."</i>	16 (28.6%)
<b>Retention bonuses:</b> Cash payments at time of hire that require a minimum time commitment* <i>"We implemented retention bonuses that require staff to remain for a given time frame or reimburse the bonus."</i> <i>"Incentive pay and retention bonuses have helped some." "\$5,000 bonus with a 2 year commitment."</i>	12 (21.4%)
<b>Professional development:</b> Provide opportunities for additional training and career advancement <i>"Provide a career ladder for added responsibilities and greater compensation." "Quality training."</i> <i>"Increased focus on professional development." "We have a lot of specialty positions that offer higher pay."</i>	11 (19.6%)
<b>Scheduling options:</b> Implementing alternative work schedules that increase time off <i>"We work a 3/2 split work week (12-hour shifts), which allows for more time off."</i> <i>"Offering 12 hour shifts for more time off." "Current schedule is 4-on 4-off 11-hour shifts."</i>	6 (10.7%)

Notes:

N=56; 14 respondents skipped this question.

\* Respondents at larger institutions were more likely to reference "retention bonuses" (p-value < 0.05).

### Exhibit A6

#### Policies to Support CO Retention: Themes from Open-Ended Responses

Themes	Frequency
<b>Compensation:</b> Policies related to improving salaries and benefits <i>"We are good to go. We just need to pay them more." "Pay increases are important to keep pace with cost of living."</i> <i>"Let counties and cities keep 1% of the sales tax every year and use it to increase salaries."</i>	20 (35.7%)
<b>Retirement:</b> Change retirement plan from PSERS to LEOFF* <i>"It would be great to see better retirement plans for correctional officers." "Make retirement comparable to police."</i> <i>"Changing retirement from PSERS to LEOFF or reducing age in PSERS to 53 without penalty."</i>	11 (19.6%)
<b>Work environment:</b> Increase staffing, change work schedules, and support for CO mental health <i>"Employ enough people so that staff can use their accrued leave." "Restructure bidding for shifts to create parity."</i> <i>"Any funding around mental health help for COs would help to keep people long term."</i>	11 (19.6%)
<b>Training/education:</b> Provide opportunities and incentives for additional training and formal education <i>"State funding to offer more training opportunities." "Support additional training such as EMT certification. Adjust pay scales so that additional training is rewarded. Support individuals seeking additional formal education."</i>	6 (10.7%)
<b>Behavioral health:</b> Diversion and supportive services for individuals with behavioral health needs <i>"State working to keep appropriate people out of jails (mental health) and place them in appropriate facilities."</i> <i>"Financial assistance from State to fund mental health and substance abuse professionals in our jails."</i>	6 (10.7%)

Notes:

N=56; 18 respondents skipped this question.

\*Jail respondents were more likely than JDC respondents to discuss retention policies related to "retirement" (p-value < 0.05).

PSERS = Public Safety Employees' Retirement System.

LEOFF = Law Enforcement Officers' and Fire Fighters' Retirement System.

### Attitudes toward CJTC Courses

### Exhibit A7

#### Availability of CJTC Courses: Themes from Open-Ended Responses

Themes	Frequency
<b>Insufficient availability:</b> Courses need to expand class sizes and occur more frequently <i>"The availability is overwhelmingly insufficient." "It's not frequent enough and there are never enough slots."</i> <i>"They need to at least double or triple the number of classes." "Need more classes throughout the year."</i>	30 (53.6%)
<b>Backlog:</b> Due to prolonged issues with availability, required courses now have long waitlists <i>"We are currently almost a year out from when someone is hired to getting them into training. It is horrible and detrimental to the functioning of the jail." "It is extremely concerning---classes have wait times of 6-8 months."</i>	28 (50.0%)
<b>Unmet requirements:</b> Unable to meet 6-month training requirement due to limited availability <i>"COs need training within 6 months of hire, but this is impossible due to limited availability and long wait lists."</i> <i>"We sign up new COs for training within 2-3 weeks of hire, but it takes 14 months to get them into a class, which violates the RCW requirement."</i>	12 (21.4%)

Note:

N=56; four respondents skipped this question.

### Exhibit A8

#### Quality of CJTC Courses: Themes from Open-Ended Responses

Themes	Frequency
<b>High quality:</b> Training is of high quality* <i>"The courses are high quality." "CJTC does an excellent job coaching, mentoring, and training new staff."                      "The quality is great! The 10-week course is much more involved." "Graduates say the training is exceptional."</i>	12 (21.4%)
<b>Acceptable quality:</b> Training quality is adequate* <i>"It is okay for what it is." "Covers basics." "Generally it is fine."                      "The quality appears to be adequate for the requirements of Washington State."</i>	11 (19.6%)
<b>Missing content:</b> Training fails to cover important topics/content areas^ <i>"Graduates seem unaware of simple things. When our Defensive Tactics instructors quiz graduates, they are shown techniques that are unrecognized."                      "Missing content on adolescent brain development, verbal de-escalation, mental health, and trauma-informed care."</i>	11 (19.6%)
<b>Juvenile training is inadequate:</b> Training for juvenile corrections is of poor quality^^ <i>"The people running the Juvenile academy do not seem to understand how a juvenile facility operates."                      "The quality is poor. Juvenile detention is clearly an afterthought." "Focus is on adult inmates, not juveniles."</i>	9 (16.1%)
<b>Training used to be better:</b> Quality of training has declined; materials are now outdated^ <i>"Quality of training has drastically decreased." "Training quality has gone downhill over past several years."                      "Curriculum needs to be updated." "Academy uses outdated materials." "PowerPoints are outdated."</i>	8 (14.3%)
<b>Instructors are not subject matter experts:</b> Instructors lack knowledge and experience^^ <i>"The academy courses are not taught by subject matter experts or people with experience working with youth."                      "The training is poorly organized with outdated material taught by people who are not subject matter experts."</i>	7 (12.5%)

**Notes:**

N=56; nine respondents skipped this question.

\* Jail respondents were more likely to discuss "high quality" and "acceptable quality" (p-value < 0.05).

^ JDC respondents were more likely to discuss "missing content" and "training used to be better" (p-value < 0.05).

^^ "Juvenile training is inadequate" and "instructors are not subject matter experts" were exclusively mentioned by JDC respondents.

### Exhibit A9

#### General Feedback on CJTC Courses: Themes from Open-Ended Responses

Themes	Frequency
<b>Limited availability:</b> Long waitlists and limited availability of CJTC courses have created problems <i>"CJTC needs to open more academies and start getting the backlog cleared up. If this persists, jails are going to have a real problem with having a lot of non-certified officers working and that creates a liability issue for jails and counties."</i>	12 (21.4%)
<b>Poor coordination:</b> CJTC needs to improve how it collaborates and communicates with JDCs* <i>"There should be more collaboration between CJTC and JDCs to establish a curriculum." "The level of communication is poor, with important information not sent until the last minute, or significant changes made without notification."</i>	7 (12.5%)
<b>Regionalize training facilities:</b> It would be better to have regional training facilities <i>"We support regional correctional academies." "Should have regional training with CJTC oversight."                      "It may be that the expansion of more regional training opportunities will help resolve the situation."</i>	5 (8.9%)

**Notes:**

N=56; 22 respondents skipped this question.

\* The theme "poor communication" was exclusively mentioned by JDC respondents.

## IV. Regionalization and Important Issues

This appendix shows the results from survey questions related to “*regionalization*” and “*important issues*.”

### Regionalization

The survey asked respondents questions about their attitudes toward regionalization. The survey defined regionalization as “*the creation and use of facilities that serve multiple counties and cities*.”

This information is particularly relevant given the results from [Section IV](#). For example, two-thirds of respondents expressed concern over the declining physical condition of local facilities. Most agree that constructing new facilities would be better than investing in renovating current facilities. Thus, regionalization represents a potential strategy for addressing these concerns. However, most respondents held negative or ambivalent attitudes toward regionalization.

The survey asked respondents how much they agreed or disagreed with the following statement: “*I think regionalization is a good idea for my county*” ([Exhibit A10](#)). Roughly half of respondents indicated they did not believe regionalization was a good idea for their county.

#### **Exhibit A10**

##### Attitudes Toward Regionalization

Measure	Western WA		Eastern WA	
	Jails	JDCs	Jails	JDCs
<i>“I think regionalization is a good idea for my county.”</i>				
Agree	2 (11.1%)	0 (0%)	4 (23.5%)	1 (14.3%)
Neutral	10 (55.6%)	2 (14.3%)	5 (29.4%)	1 (14.3%)
Disagree	6 (33.3%)	12 (85.7%)	8 (47.1%)	5 (71.4%)

**Notes:**

Western jails (N=18); western JDCs (N=14).

Eastern jails (N=17); eastern JDCs (N=7).

We found that jail and JDC respondents often held different opinions on whether regionalization was a good idea for their county. A clear majority of JDC respondents (17 out of 21) disagreed with this statement. However, responses were more mixed for jail respondents. Among jail respondents, about 43% (15 out of 35) selected “*neutral*” and 40% (14 out of 35) selected “*disagree*.”<sup>98</sup>

### Feelings About Regionalization

We asked respondents the following open-ended question: “*Please describe how you feel about regionalization*.” After coding responses based on common themes, we chose to organize the presentation of results based on whether respondents agreed, felt neutral, or disagreed with the statement: “*I think regionalization is a good idea for my county*.”

<sup>98</sup> In exploratory analyses, we examined whether differences in region or institutional size were associated with how jail respondents answered this question. However, there were no clear differences by size or region.

### Exhibit A11

#### Feelings Toward Regionalization: Themes from Open-Ended Responses

Themes	Frequency
Neutral toward regionalization	
<b>Mixed feelings:</b> Respondent does not endorse or reject regionalization; feels ambivalent or neutral <i>"Regionalization is definitely more cost effective for local jurisdictions, but locally located facilities are optimal for accessibility to services." "I would be okay with it." "Indifferent."</i>	9 (16.1%)
<b>Complexity:</b> Regionalization raises logistical concerns that do not have clear solutions <i>"Because of our funding structure, the various jurisdictional courts, attorneys—this would be very difficult to manage." "Facilities need to be where courts, families, and probation offices are located." "It would be complicated." "Creates a myriad of issues with court appearances, access to counsel, transport, etc."</i>	7 (12.5%)
<b>County size and geography:</b> Opinion on regionalization depends on county characteristics/location <i>"Regional facilities make sense for counties with small populations." "It depends on where the facility is located." "A regional facility would not be feasible because of geographical constraints/dynamics that encompass both counties."</i>	4 (7.1%)
Reject regionalization	
<b>Negative feelings:</b> Respondent expressed a negative opinion of regionalization <i>"This is a horrible idea." "We do not support regionalization." "Regionalization is a terrible idea."</i>	21 (37.5%)
<b>Barriers to family contact:</b> Regionalization will reduce family contact due to increased distance <i>"Currently, families can visit regularly and family therapy can continue because everything is local." "Local is better for family contact." "Regionalization would make it very difficult on family reunification."</i>	12 (21.4%)
<b>Bad for youth:</b> Shifting to regional facilities will have especially negative consequences for youth <i>"Regionalization of detention facilities would be a mistake with far reaching implications for detained youth." "Regionalization would be terrible for the well-being of youth in detention." "Negative impact for youth."</i>	11 (19.6%)
<b>Access to local services:</b> Individuals will be disconnected from services in their home community <i>"I feel that youth are better served in their local community near family, school, and local providers to ensure continuity of care and lessen trauma." "If out of county, connection to services would need to be reestablished." "There would be impacts to continuum of care if youth are not in their local community for visits by known providers."</i>	10 (17.9%)
<b>Transportation issues:</b> Regionalization will greatly increase the complexity and cost of transportation <i>"It would increase costs due to transportation needs." "Counties will need receiving centers and transport teams." "Unless agreements can be made to handle the vast majority of court appearances in a way other than physical transportation of the jail resident to a courtroom, regionalization will require a massive transportation effort."</i>	7 (12.5%)

**Notes:**

In the column labeled "Frequency," we show the number of write-in responses coded as having the associated theme and the corresponding percentage for the full sample (N=56).

**Support Regionalization.** Seven respondents (six jail, one JDC) agreed that regionalization was a good idea for their county. Five respondents expressed purely positive feelings toward regionalization. Three respondents indicated that their institution was already regionalized. Unfortunately, these respondents did not provide detailed answers regarding why they supported regionalization.

**Neutral Toward Regionalization.** Exhibit A11 (top panel) shows results for the 18 respondents (15 jail, three JDC) who felt neutral toward the notion that regionalization was a good idea for their county.

Nine respondents reported mixed feelings about regionalization. For example, one eastern respondent noted they worked for a regional jail that serves two counties and six cities. On the one hand, the respondent characterized the arrangement as “successful.” On the other hand, the respondent noted that it “presents challenges as user contracts have to be completed with both counties and all cities, which can lead to contentious negotiations over daily bed rates and overall correctional needs.”

Seven respondents commented on the complexity of transitioning from local to regional facilities. Many of these respondents expressed concern that regionalization would create logistical problems that did not have clear solutions.

Finally, four respondents argued that regionalization had different advantages and disadvantages depending on the size, location, and geography of the counties involved. These respondents seemed in favor of regional facilities that were centrally located among small counties. However, respondents also noted that for some counties, the geography of Washington State was a barrier to regionalization.

*Reject Regionalization.* Exhibit A11 (bottom panel) shows qualitative results for 31 respondents (14 jail, 17 JDC) who disagreed that regionalization was a good idea for their county.

Twenty-one respondents expressed purely negative feelings toward regionalization. In contrast with respondents who expressed positive feelings toward regionalization, those who expressed negative feelings frequently provided more elaborate and detailed responses.

These respondents all seemed in agreement that the essential benefit of using local facilities is that confined individuals are located in close proximity to their home community, which confers a variety of advantages (e.g., ready access to family and local services). In general, respondents were critical of regionalization because they believed confined individuals would be placed in regional facilities far from their home community, which would remove these advantages. For example, 12 respondents argued that regionalization would result in decreased contact between confined individuals and their families. In particular, JDC respondents warned about the consequences this would have on youth in detention.

Indeed, JDC respondents expressed the strongest opposition to regionalization. Two themes—“bad for youth” and “access to local services”—were exclusively discussed by JDC respondents. These respondents raised a variety of concerns about the prospect of sending youth to regional detention facilities.

Finally, seven respondents discussed “transportation issues.” These respondents noted that individuals who have contact with the criminal justice system are often in transit between police, courts, and periods of confinement in jails/JDCs. It is common for local governments to either consolidate these institutions into a single facility or in separate facilities within the same compound.<sup>99</sup> As a result, the transportation process for local facilities is relatively simple and inexpensive. Respondents expressed concern that this process would become more complicated and expensive with regionalization, as facilities would have to dedicate more resources to transporting individuals longer distances.

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<sup>99</sup> For example, the county jail may be located inside the sheriff’s office, or the local detention center may be in the same building as the juvenile court.



## Summary

The survey provides insight into respondent attitudes toward regionalization (i.e., the creation and use of facilities that are designed to serve multiple counties/cities). We found that most respondents were not supportive of regionalization.

We also found evidence of institutional variation in attitudes toward regionalization. The majority of JDC respondents were firmly opposed to regionalization and expressed concern about the potential harm of removing youth from their local community.

In contrast, a slight majority of jail respondents felt “neutral” toward regionalization. These respondents speculated that regionalization could be effective under limited circumstances or when used for specific purposes.<sup>100</sup> However, respondents also noted that regionalization posed a variety of daunting logistical problems that could not be easily addressed.

Finally, it is worth noting that a small number of jails and JDCs already operate regional facilities in Washington State. To learn more about regionalization, future research could target these institutions to gain deeper insight into the dynamics associated with operating a regional facility.

## Important Issues

To close out the survey, we asked respondents a final open-ended question: “What are important issues related to jails and juvenile detention centers across Washington that you think people should know about?” We present information on the four most common themes that emerged in Exhibit A12.

### Exhibit A12

#### Important Issues for Jails and JDCs: Themes from Open-Ended Responses

Themes	Frequency
<b>High standards, low support:</b> Standards continue to increase, but funding and support remain low <i>“In corrections, there are high expectations and little support.” “Many counties do not have the funding to keep up with how the state wants jails to operate.” “If the State is going to mandate standards then funding should follow.”</i>	16 (28.6%)
<b>Complex needs:</b> The confined population’s physical and behavioral health needs keep increasing <i>“Nowadays jails are expected to act as detox, drug rehab, medical, and mental health facilities.” “This is where youth get stabilized when they are detoxing, malnourished, pregnant, sick, traumatized.” “Jails were not intended to be mental health or medical facilities, but over time that is exactly what happened.”</i>	16 (28.6%)
<b>Staffing and compensation:</b> Staffing shortages and low pay are interconnected problems <i>“Staffing is #1 problem. Need to have incentives to bring people to this line of work.” “COs deserve more pay.” “FTE vacancies due to lack of applicants and low wages.” “Staffing is an issue.”</i>	13 (23.2%)
<b>Deteriorating facilities:</b> Old facilities are deteriorating and require major construction* <i>“Facilities are old and in need of modernization.” “Very limited capitol funds to improve or replace aging facilities.” “We are seeing the building continue to deteriorate at a faster rate than improvements can be made.”</i>	7 (12.5%)

#### Notes:

N=56; 20 respondents skipped this question.

\* The theme “deteriorating facilities” was exclusively mentioned by jail respondents.

<sup>100</sup> For example, one respondent proposed that it could be beneficial to establish regional facilities in strategic locations to serve individuals with serious medical or behavioral health needs.

Around 29% of respondents discussed *"high standards, low support."* All of these respondents noted that their institution was in need of additional support and funding beyond what was available through local sources. Several respondents expressed the belief that Washington was holding local detention facilities to increasingly high standards but not taking steps to improve access to support or funding.

About 29% of respondents also discussed the *"complex needs"* of the confined population. All of these respondents noted that the physical and behavioral health needs of individuals in jails and JDCs have intensified in recent years. Several respondents commented on the growing discrepancy between the original purpose of their institution (e.g., providing a secure environment for pretrial detention) and the reality of housing individuals with extensive health issues. Indeed, a common sentiment among respondents was that their institution was functionally serving as a mental health facility and detox center.

Around 23% of respondents commented on *"staffing and compensation."* These respondents identified staffing shortages among correctional officers (COs) as a critical problem for their institution. Several respondents emphasized that it was difficult to address this problem because their institution lacked the funding necessary to increase CO compensation, which they believed was key to resolving CO recruitment and retention issues.

Finally, seven jail respondents mentioned *"deteriorating facilities."* These respondents noted that their jail facility was old and physically declining. While some respondents indicated that their facility would benefit from renovation, others expressed that the buildings were in such poor condition that it was necessary to construct a new facility.

### Summary

We ended the survey by inviting respondents to describe important issues facing jails and JDCs across Washington. Overall, the main themes we identified suggest that many jails and JDCs may benefit from additional support to keep pace with the evolving demands of modern corrections.

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