



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
PRISON/FIELD
FACILITY/SPANISH MANUAL

REVISION DATE
7/22/22

PAGE NUMBER
1 of 9

NUMBER
DOC 570.000

POLICY

TITLE
**SEX OFFENSE TREATMENT
AND ASSESSMENT PROGRAMS**

REVIEW/REVISION HISTORY:

- Effective: 9/1/91
- Revised: 8/20/03
- Revised: 5/28/08
- Revised: 8/16/10
- Revised: 12/7/15
- Revised: 5/19/16
- Revised: 3/25/21
- Revised: 7/22/22

SUMMARY OF REVISION/REVIEW:

Updated terminology throughout
Policy Statement III. - Adjusted for person-centered language
Directive I.A.1. - Added language for clarification

APPROVED:

Signature on file

CHERYL STRANGE, Secretary
Department of Corrections

7/8/22

Date Signed

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REFERENCES:

DOC 100.100 is hereby incorporated into this policy; [RCW 9.94A.670](#); [RCW 9.94A.810](#); [RCW 9.94A.820](#); [RCW 70.02](#); [RCW 72.09.335](#); [RCW 74.09.555](#); DOC 280.510 Public Disclosure of Records; DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting; Sex Offense Treatment and Assessment Programs Operations Protocol

POLICY:

- I. The Sex Offense Treatment and Assessment Programs (SOTAP) provide:
 - A. Risk assessment,
 - B. Prison-based sex offense treatment to incarcerated adults with a history of sexual-related offenses, and
 - C. Community-based treatment to individuals on community supervision who have successfully completed the Prison-based treatment.

- II. The main goals of SOTAP are to:
 - A. Assist individuals in learning how to reduce and manage offense-related risks.
 - B. Provide information to assist the Department and community with managing and monitoring an individual's risk to sexually reoffend.
 - C. Routinely evaluate and align SOTAP with evidence-based practices.

- III. Individuals will only be considered successfully discharged from SOTAP treatment once they have completed both the prison-based and community-based programs.

DIRECTIVE:

- I. Admission Criteria
 - A. To be considered for admission to SOTAP, incarcerated individuals must meet the following qualifying criteria:
 1. Convicted of a sex offense(s) for the current or a previous term of confinement, or convicted of a current or past offense which contains sexual elements or sexually abusive behaviors, and
 2. Eligible for release from Prison.
 - B. To be eligible for treatment, qualified individuals should have at least 24 months to their Earned Release Date (ERD) to complete treatment requirements. Individuals with less than 12 months to their ERD will not be considered.

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1. Individuals sentenced to the Special Sex Offender Sentencing Alternative per RCW 9.94A.670 are not eligible to participate.

C. Individuals must be amenable to treatment by:

1. Engaging in ongoing conversation and exploration regarding their inappropriate/illegal sexual behaviors.

2. Agreeing to attend sex offense treatment, both in Prison and in the community, and follow treatment rules and expectations.

D. Individuals who cannot read or speak English and meet the admission criteria, may be admitted to treatment based on available resources. Case managers will consult with the SOTAP Corrections Specialist (CS) 4 of Operations, who will make a recommendation to the SOTAP Director/designee for admission.

II. Risk Assessment

A. SOTAP will use a Department-approved, validated static risk assessment according to instrument standards to assess an individual's risk to commit future sex offenses, treatment prioritization, resource planning, and classification.

1. Additional risk assessment instruments and measures may be used for individuals requiring a priority code override(s).

III. Program Referral

A. Qualified individuals are automatically referred to SOTAP at the Reception Diagnostic Center (RDC) for eligibility review and amenability screening.

B. Case managers may submit a request through the SOTAP CS4 of Operations to create a SOTAP referral in the electronic file. The status of referrals will only be modified by the SOTAP CS4 of Operations/designee.

1. Requests may be submitted within 48 months to the ERD for individuals who:

a. Were not convicted of a sex offense, but report having committed a sex offense(s) that has not led to a charge/conviction, or who believe they may commit a sex offense(s) upon release.

b. Are identified as low priority through the validated risk assessment.

c. Initially declined treatment or were found not to be amenable and wish to be reassessed for services.

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d. Seek readmission to SOTAP, including those who:

- 1) Participated in SOTAP during a previous term of confinement
- 2) Left SOTAP before completion
- 3) Completed SOTAP and had community supervision revoked
- 4) Were previously unsuccessfully discharged from treatment or had time added to their sentence by the Indeterminate Sentence Review Board (Board)

2. Individuals sentenced to a term of confinement less than 24 months must request treatment upon arrival at the RDC.

C. Individuals may be referred by the Board or the SOTAP Risk Assessment Unit at any time.

D. Referrals will be closed for individuals who decline to participate during the amenability screening.

1. Individuals who decline may be referred to alternative SOTAP programming. Alternative programming will be mandatory and does not qualify as sex offense treatment.

a. Refusal to participate in alternative programming will result in a 557 violation.

IV. Admission Priority

A. Individuals will be prioritized for treatment per RCW 72.09.335 and within available resources. The SOTAP CS4 of Operations, in coordination with SOTAP Program Managers, will schedule admission dates based on the:

1. ERD,
2. Eligibility criteria for treatment,
3. Proposed release location,
4. Risk level identified through the assessment, and
5. Length of time needed to successfully complete Prison-based treatment based on medical/mental health needs.

B. Individuals approved for SOTAP participation and refuse transfer to a treatment facility will receive a 557 violation.

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C. The case manager will notify the SOTAP CS4 of Operations/designee if the custody level changes and/or the individual becomes ineligible to participate at the facility providing SOTAP treatment before transfer.

V. Treatment Services

A. The assigned treatment provider will schedule an intake appointment to review and sign the following:

1. DOC 02-025 Sex Offense Treatment and Assessment Programs Limits of Confidentiality
2. DOC 02-330 Sex Offense Treatment and Assessment Programs Informed Consent for Prison Treatment
3. DOC 02-402 Sex Offense Treatment and Assessment Programs Informed Consent for Community Treatment

B. A Department-approved, validated needs assessment will be completed according to instrument standards on all SOTAP participants to assess treatment needs, specialty group programming, establish the Sex Offense (SO) Risk Category in the electronic file, and identify targeted interventions related to the individual criminogenic risk factors linked to sexual recidivism.

C. SOTAP clinical personnel will adhere to the approved clinical treatment program, including all written materials and established manuals/protocols, and use cognitive behavioral principles of intervention during the course of treatment.

D. The SOTAP Psychologist 4 may conduct research, and will provide clinical consultation and prepare comprehensive reports using psychological testing for program participants, as needed and when clinically relevant.

1. The SOTAP Psychologist 4 is not the primary mental health care provider for SOTAP participants, but will consult with mental health employees/contract staff regarding any mental health-related concerns.

E. Individuals on community supervision who have completed Prison-based treatment will continue Department-approved treatment services in the community. Individuals returning to community supervision after additional confinement time will be assessed by the SOTAP Director/designee and Community Program Manager to determine appropriateness for continued treatment.

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1. In areas where SOTAP services are unavailable, SOTAP may contract with certified sexual deviancy providers to provide community-based treatment.
2. Community-based treatment will be provided for at least 12 months, unless directed by the SOTAP Community Program Manager.

VI. Refusing or Failing to Maintain Programming

- A. Individuals who withdraw from treatment will be considered refusing to participate and subject to disciplinary action.
 1. If an individual reconsiders participation, a request to return must be submitted to the SOTAP Program Manager/designee within 3 business days of the withdrawal notice.
- B. Individuals may be unsuccessfully discharged from treatment for the following reasons and will be subject to disciplinary action:
 1. Intentional violation of confidentiality of other participants
 2. Fighting or assaultive behavior
 3. Prohibited sexual behavior with others
 4. Behaviors that are disruptive to the orderly operation of the program or the secure and orderly operation of the facility
 5. Classification into Close or Maximum custody, unless granted an override by the Headquarters Classification Unit
 6. Lack of progress in treatment, as determined by the SOTAP Program Manager
 7. Use of alcohol, cannabis, or illicit substances
 8. Missing more than 3 group or individual sessions without contacting the provider
- C. Individuals who are unsuccessfully discharged from treatment may appeal to the SOTAP Director/designee. Appeals must be submitted within 3 business days of the unsuccessful discharge notice.

VII. Treatment Records and Confidentiality

- A. SOTAP employees/contract staff will maintain treatment records and treatment-related material in the individual's electronic treatment file.
 1. Throughout the course of treatment, SOTAP clinical personnel will document clinical progress notes in the individual's electronic file per established SOTAP standards and timeframes.

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2. Psychological testing and reports completed by the SOTAP Psychologist 4 will be maintained in a secure location separate from the treatment file.
 - a. Psychological testing, including raw scores, will only be disclosed as authorized by law.
 3. Treatment records will be handled as confidential, protected health information.
 4. Reports of sexual misconduct will be reported and handled per DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting.
- B. Disclosure with Client Authorization
1. Unless authorized by law, individuals will sign DOC 02-406 Sex Offense Treatment and Assessment Programs Release of Confidential Information to share relevant information with other parties (e.g., family members, private treatment providers).
 - a. Individuals may revoke a disclosure authorization by submitting a written request to the SOTAP Psychologist 4/Program Manager at any time before a disclosure is made per RCW 70.02.040.
 2. Individuals may submit a request to examine or obtain a copy of their own treatment records, including psychological testing results.
 - a. Requests to examine records will be submitted in writing to the SOTAP Psychologist 4/Program Manager. A response will be made within 15 business days of receiving the request.
 - 1) Psychological records should be reviewed in the presence of the SOTAP Psychologist 4 or, if unavailable, a duly qualified and licensed mental health provider.
 - 2) Examination may be denied if the SOTAP Psychologist 4 concludes the results are likely to cause substantial harm to the individual, including self-harm or psychological deterioration, misuse or misrepresentation of testing data, or for any reason identified per RCW 70.02.090.
 - b. Requests for copies of test results and/or treatment records will be submitted per DOC 280.510 Public Disclosure of Records.
- C. Disclosure without Client Authorization

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1. In the course of official duties, access to the SOTAP psychological file is granted to SOTAP employees and Department mental health providers.
2. Risk assessment reports will be made available to SOTAP employees/contract staff.
3. Information provided by individuals and described in any non-psychological reports prepared by SOTAP clinical personnel will be shared with Department employees/contract staff and criminal justice entities on a need-to-know basis.
4. Information may be disclosed and/or exchanged with health services providers in the community to ensure the continuity of care per RCW 70.02.050(1)(a) and RCW 74.09.555.
5. Psychological reports will be disclosed without the individual's permission when required by law or court order. Reports will also be released to fulfill the Department's obligation to warn or to protect the public on a need-to-know basis.
6. Psychological reports will be released to the Board upon written request. A copy of such requests will be placed in the treatment and psychological files.
7. Records may be disclosed in other circumstances, as permitted by court order, RCW 70.02.050, RCW 70.02.900, or other statute.

VIII. Quality Assurance

- A. SOTAP employees/contract staff will follow the SOTAP Operations Protocol for risk assessments and treatment services/documentation. The protocol will be reviewed yearly and updated as needed.
- B. Designated SOTAP employees/contract staff who may conduct risk assessments will:
 1. Within available resources, be certified by an approved trainer in the use of the validated risk assessment as close to their start date as training is available.
 2. Participate in ongoing training and recertification when available.
 3. Participate in at least quarterly interrater reliability exercises to ensure adherence to established risk assessment tool standards.

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- C. Within available resources, the SOTAP Clinical Quality Assurance and Training Manager will engage in regular, ongoing quality assurance activities.

DEFINITIONS:

The following words/terms are important to this policy and are defined in the glossary section of the Policy Manual: Sex Offense. Other words/terms appearing in this policy may also be defined in the glossary.

ATTACHMENTS:

None

DOC FORMS:

- DOC 02-025 Sex Offense Treatment and Assessment Programs Limits of Confidentiality
- DOC 02-330 Sex Offense Treatment and Assessment Programs Informed Consent for Prison Treatment
- DOC 02-402 Sex Offense Treatment and Assessment Programs Informed Consent for Community Treatment
- DOC 02-406 Sex Offense Treatment and Assessment Programs Release of Confidential Information