

# Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim       Final

Date of Report: May 16, 2019

## Auditor Information

Name: Deborah Striplin

Email: dstriplin@doc.nv.gov

Company Name: Nevada Department of Corrections

Mailing Address: P.O. Box 7011

City, State, Zip: Carson City, NV 89702

Telephone: 775-887-3142

Date of Facility Visit: 9/17 – 9/20, 2018

## Agency Information

Name of Agency:

Governing Authority or Parent Agency (If Applicable):

Washington Department of Corrections

State of Washington, Office of the Governor

Physical Address: 7345 Linderson Way SE

City, State, Zip: Tumwater, WA 98511

Mailing Address: PO Box 41100

City, State, Zip: Olympia, WA 98504-1100

Telephone: 360-725-8213

Is Agency accredited by any organization?  Yes  No

The Agency Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Agency mission: Working Together For Safe Communities

Agency Website with PREA Information:

<http://www.doc.wa.gov/corrections/prea/resources.htm/corrections/prea/default.htm>

## Agency Chief Executive Officer

Name: Stephen Sinclair

Title: Secretary

Email: sdsinclair@doc1.wa.gov

Telephone: 360-725-8810

## Agency-Wide PREA Coordinator

Name: Beth Schubach

Title: Agency PREA Coordinator

Email: blschubach1@doc1.wa.gov

Telephone: 360-725-8789

PREA Coordinator Reports to: Deputy Director of Prisons Command A	Number of Compliance Managers who report to the PREA Coordinator 0
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### Facility Information

**Name of Facility:** Washington State Penitentiary

**Physical Address:** 1313 N. 13th Ave., Walla Walla, Washington 99360

**Mailing Address (if different than above):** [Click or tap here to enter text.](#)

**Telephone Number:** 509-525-3610

**The Facility Is:**  Military  Private for profit  Private not for profit

Municipal  County  State  Federal

**Facility Type:**  Jail  Prison

**Facility Mission:** We, the staff of the Washington State Penitentiary, are a team of dedicated professionals in partnership with our communities and other state and local agencies. We are committed to enhancing community, staff and offender safety through sound security practices, offender change opportunities and successful reintegration. We strive to create and make a difference by promoting a positive prison culture.

**Facility Website with PREA Information:** [www.doc.wa.gov/corrections/prisons/wsp.htm](http://www.doc.wa.gov/corrections/prisons/wsp.htm)

### Warden/Superintendent

**Name:** Donald Holbrook **Title:** Superintendent

**Email:** drholbrook@doc1.wa.gov **Telephone:** 509-526-6300

### Facility PREA Compliance Manager

**Name:** Lori Scamahorn **Title:** Corrections Specialist 2

**Email:** lmscamahorn@doc1.wa.gov **Telephone:** 509-526-6473

### Facility Health Service Administrator

**Name:** Darren Chlipala **Title:** Health Services Manager 3

**Email:** dmchlipala@doc1.wa.gov **Telephone:** 509-526-6401

### Facility Characteristics

**Designated Facility Capacity:** 2,439 **Current Population of Facility:** 2,594

**Number of inmates admitted to facility during the past 12 months** 2,169

<b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:</b>		2,068
<b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:</b>		2,167
<b>Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:</b>		143
<b>Age Range of Population:</b>	<b>Youthful Inmates Under 18:</b> 0	<b>Adults:</b> 18-82
<b>Are youthful inmates housed separately from the adult population?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> NA
<b>Number of youthful inmates housed at this facility during the past 12 months:</b>		0
<b>Average length of stay or time under supervision:</b>		24.2
<b>Facility security level/inmate custody levels:</b>		Maximum/Close/Medium/Minimum
<b>Number of staff currently employed by the facility who may have contact with inmates:</b>		1,114
<b>Number of staff hired by the facility during the past 12 months who may have contact with inmates:</b>		89
<b>Number of contracts in the past 12 months for services with contractors who may have contact with inmates:</b>		0
<b>Physical Plant</b>		
<b>Number of Buildings:</b> 106	<b>Number of Single Cell Housing Units:</b> 2	
<b>Number of Multiple Occupancy Cell Housing Units:</b>	13	
<b>Number of Open Bay/Dorm Housing Units:</b>	0	
<b>Number of Segregation Cells (Administrative and Disciplinary):</b>	294	
<b>Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):</b>		
Institution provided auditor with information of the institution camera locations to include workstations that allow viewing and retention.		
<b>Medical</b>		
<b>Type of Medical Facility:</b>	In-patient infirmary	
<b>Forensic sexual assault medical exams are conducted at:</b>	Providence St. Mary Medical Center	
<b>Other</b>		
<b>Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:</b>	199 volunteers / 49 contractors	
<b>Number of investigators the agency currently employs to investigate allegations of sexual abuse:</b>	739	

# Audit Findings

## Audit Narrative

Deborah Striplin, Nevada Department of Corrections and Department of Justice certified PREA auditor for adult facilities was lead auditor to conduct the Prison Rape Elimination Act (PREA) audit for Washington State Department of Corrections (WADOC) as part of the Western States Consortium. Auditor utilized the "New adult P&J Auditor Report Template" revised 5-2018.

Communication with WADOC agency PREA Coordinator began March 2018 with more frequent communication beginning June 2018 for the upcoming audit of the Washington State Penitentiary (WSP). The Memorandum of Understanding (MOU) and Statement of Work (SOW) between Nevada Department of Corrections and Washington Department of Corrections were signed by executive staff from both agencies June, 2018.

Saturday, August 4, 2018 WADOC agency PREA coordinator hand delivered the WSP flash drive to this auditor during PREA auditor refresher. Pictures of audit notifications were included on the flash drive and included location of posting and date posting of Tuesday, July 17, 2018 which confirmed that the facility posted the pictures by the 6 week time frame. Notification was also placed in the mail room to ensure staff assigned to this post followed policy to treat letters to this auditor as legal mail. July 20, 2018 this auditor received a letter from an offender from WSP further confirming notifications had been posted.

Flash drive included pre-audit questionnaire (PAQ), agency and facility policies, procedures and applicable documentation placed in folders clearly identified. Audit folders were created per each standard and referenced element numbers for applicable standards.

WADOC has multiple policies which are specific to standards and applicable elements. These policies and supporting documents were reviewed and will be noted in part within the applicable standard comment sections of this auditors report.

Friday, August 10, 2018 auditor reviewed Washington State Department of Corrections website, [www.doc.wa.gov](http://www.doc.wa.gov) PREA Report Sexual Misconduct. This auditor sent a "test" email and called the toll free reporting hotline number leaving a test message with my name and phone number. August 10, 2018 a return email response was received confirming that the test email went through. Monday, August 13, 2018 this auditor was contacted by a WADOC staff member confirming the hot line test message was received.

Friday, August 10, 2018 auditor conducted specialized telephonic interview with YWCA of Walla Walla PREA victim advocate Ms. Guardado. When a call is received that an inmate will be transported to St. Mary's Hospital, YWCA advocate is contacted to be present during the Sexual Assault Forensic Exam. The YWCA advocate began on-going telephonic offender advocacy with incarcerated survivors in 2015 and in 2016 she began meeting with clients at WSP. Currently meetings are set at a minimum of every two weeks and she meets with clients in an interview room or office in the unit the offender is housed.

Tuesday, September 11, 2018 auditor conducted a pre-onsite tele-conference with WSP PREA compliance manager and agency PREA coordinator. This conference was an informal introduction for

up-coming on-site audit and discussion of schedule which was emailed to the agency PREA coordinator and PCM on Wednesday, September 12, 2018.

Friday, September 14, 2018 this auditor conducted telephonic specialized interview with WADOC agency head utilizing the PREA interview guide questions. Secretary Sinclair has worked for WADOC for 30 years working his way through the ranks starting out as an Officer at the Washington State Penitentiary and appointed as the WADOC Secretary April 2017. Secretary Sinclair is very engaged and committed to the sexual safety of offenders during their incarceration. When WADOC began PREA implementation he was the moderator for the offender PREA education video (Spanish) which offenders view on the transporting bus.

### **On-site review**

#### ***Monday, September 17, 2018 - 0730***

The Nevada PREA audit team Deborah Striplin, DOJ certified PREA auditor (lead auditor), Kimberely McCoy (support staff) and Nathan Hughes (support staff), PREA compliance managers from Nevada Department of Corrections arrived on-site at WSP. Audit team met with facility during executive staff morning meeting for introductions and then escorted to conference room. Audit team was provided with a PREA audit binder which contained current staff roster, offender roster sorted alphabetically and housing location. Auditor was also provided with rosters of offenders classified into specialized categories for targeted interviews.

Audit team began institution tour at 0830 and was assigned two escorting staff for duration of on-site audit. During the tour, audit team members asked impromptu questions of staff and inmates, noted the placement and coverage of surveillance cameras if they were in the area. Bathrooms and showers were inspected to identify potential cross gender viewing concerns, etc. In inmate work areas, audit team assessed the level of staff supervision and frequency of custody staff tours. Audit team also noted placement of PREA posters and audit notifications around the facility.

Audit team toured the following areas: Areas that the audit team made best practice recommendations or required corrective action are noted in final summary of audit findings or corrective action summary.

- AVT Building M10: Walla Walla Community College Carpentry Class
- CVT-M20 Building – Auto shop
- Motor Pool
- AVT building
- CI warehouse L30
- General Stores Warehouse
- Inmate property

#### **East Complex:**

- Admin building
- Movement Control D50
- East clinic
- Admin staff offices
- Clerical and HR Hallway staff restrooms
- Guske Memorial Craft Center

- Unit 6: PREA posters were posted in day room; however auditors did not see audit notifications. Auditor requested notification be replaced. PCM addressed during on-site visit re-posting audit notifications and required that staff keep posted until October 1, 2018.
- Correctional Industries (CI):
  - License Plate factory, welding shop, dining hall, engineer department, carpentry and observation hallway.
- Plumbing shop
- Engineer bldg
- Laundry
- Rec yard
- Unit 10: Auditors did not see audit notifications, auditor requested notification be replaced. PCM addressed during on-site visit re-posting audit notifications and required that staff keep posted until October 1, 2018.
- Unit 8: Auditors did not see audit notifications, auditor requested notification be replaced. PCM addressed during on-site visit re-posting audit notifications and required that staff keep posted until October 1, 2018.
- South and North dining halls

### **Intensive Management Unit (IMU) - South**

**End of day one facility tour:** Audit team met with PCM and agency PREA coordinator around 5:00 p.m. to talk about 1<sup>st</sup> day tour and concerns noted. Audit team departed the facility around 6:00 p.m.

#### ***Tuesday, September 18, 2018***

Audit team arrived back on-site around 7:15 a.m. meeting in the conference room. Support staff continued facility tour and lead auditor began specialized staff interviews. During the tour, support audit team members asked impromptu questions of staff and inmates, noted the placement and coverage of surveillance cameras if they were in the area. Audit support staff also toured the bathrooms and showers to ensure there were no areas that may have identify potential cross gender viewing concerns. Additionally the audit support team member toured the inmate work area and assessed the level of staff supervision and frequency of custody staff tours. Audit team also noted placement of PREA posters and audit notifications around the facility.

#### ***Continuation of facility tour:***

### **Intensive Management Unit (IMU) - North**

#### **South Complex (bar units):**

- Bar Annex A and B
- Adams
- Ranier
- Baker
- Victor:
- Williams
- South complex recreation and chapel
- South complex offices
- Law library

- BMT

**West Complex:**

- Shift office area
- Kitchen, education, law library and electronic law library
- Community College
- Delta
- Echo
- Golf
- Fox

End of on-site tour

***Specialized interviews conducted on Tuesday, September 18, 2018***

Specialized Staff Interviews: The lead auditor conducted interviews utilizing applicable interview protocols and responses or summarized response were recorded by hand. Interviews were conducted in offices or rooms that allowed for privacy.

Agency PREA coordinator (1)

PREA compliance manager (1)

Human Resources (1)

Incident Review Team (1)

Medical (1)

Mental Health (2)

Retaliation Monitor (1)

Investigative Staff (2)

First Responder (custody) (1)

Total specialized staff interviewed during day 2 of on-site visit: 11

***Wednesday, September 19, 2018***

Audit team arrived on-site at 4:00 am to begin random interviews with staff on all shifts starting with first watch and continuation of specialized staff interviews. Audit team ended the day at 4:00pm. Audit team conducted interviews utilizing applicable interview protocols and responses or summarized response were recorded by hand. Interviews were conducted in offices or rooms that allowed for privacy

Random staff interviews to include custody and non-custody staff: 33

Specialized staff:

Facility Head (1) – interview conducted by lead auditor and observed by one support audit team member

Intermediate/Higher level staff (2)  
Intake Staff (3)  
Contractors (1)  
Volunteers (2)  
First Responder (non custody) (1)  
Staff Who Work in Segregation (2)  
Staff who Perform Risk Screening Assessment (1)

Total specialized staff interviewed during day 3 of on-site visit: 13

**Thursday, September 20, 2018**

Audit team arrived on-site at 7:00 a.m. to begin random and specialized interviews with offenders which included interviewing offender who wrote letter to auditor. Due to a disruptive incident which resulted in a lock down of some units for the remainder of the on-site audit, offenders in Delta, Echo, Fox and Golf could not be interviewed. Auditor handbook required a minimum total of 50 offenders be interviewed, 25 random and 25 specialized interviews were completed with offenders in all other open housing units. Audit team was provided offender rosters which were generated in alphabetical order by housing unit. Audit team reviewed rosters provided for offender specialized interviews and all offenders were randomly selected. Lead auditor did receive a letter from one offender prior to on-site visit, offender was interviewed in a behind glass interview room due to his security level and was counted separately from the required 50 offender interviews.

Audit team conducted private interviews with inmates in offices or interview rooms behind glass for offenders who were classified at a higher security level for safety.

Random Offenders: 32

Disabled (physical): (1)

Disabled (limited sight/blind/deaf/hard hearing): (1)

Limited English Proficient (LEP) (3)

Cognitively Impaired: (2)

Transgender/Intersex: (4)

Gay/Bi-Sexual: (7)

Inmates who reported sexual abuse in confinement: (4)

Inmates who reported sexual abuse during risk assessment: (3)

Inmates in administrative segregation for risk of sexual victimization: (N/A did not have any housed in segregation during on-site audit. Added to other specialized interview

Youthful Inmate: (N/A – none housed at WSP. The 4 required were added to other specialized areas



Total: specialized interviews – 25

**Total interviews completed pre audit, on-site audit and post audit:**

Specialized Staff: 27

Random Staff: 33

Specialized Offenders: 25

Random Offenders: 32

Letter received from offender pre audit:

Offender interviewed. Not included in offender interview totals.

End of day 4 - Audit team departed facility at 5:00 p.m.

***Friday, September 21, 2018***

Audit team arrived on-site at 7:00 a.m. to conduct on-site documentation review and/or reviewing the Offender Management Information System (OMNI) and tested inmate phone system by calling the PREA hotline and OVCA number. Audit team reviewed camera and monitoring in the facility central control office and conducted an out brief the facility executive staff at 12:30 p.m. and departed at 1:30 p.m.

Document review:

Retaliation Monitoring

Risk assessments for intake 72 and 30 day follow up

Mental health offers and referrals

Transgender/intersex reviews conducted twice a year

HR new hire, promotion and 5 year background check

**Post-Audit Phase**

Monday, September 24, 2018

Specialized interview with Agency Contract Administrator was conducted via teleconference.

Following the on-site portion of the audit, the lead auditor gathered written information, documentation and feedback from the team members. Lead auditor worked with agency PREA coordinator and facility PCM post audit to clarify information after on-site visit and was provided information no later than the next business day if not sooner.

Tuesday, September 25, 2018 the lead auditor received a letter from an offender regarding his PREA allegation. Lead auditor contacted WSP PREA compliance manager and agency PREA coordinator and was advised that this was an open investigation. The PREA compliance manager provided the initial report for review but no other information could be provided due to the case being referred and investigated by local law enforcement. Thursday, October 11, 2018 the lead auditor and one support audit staff completed phone conference with WSP Superintendent, facility PREA compliance manager

and agency PREA coordinator for a status check on the investigation and was advised that the case is still open.

**Interim Audit Report:** The interim report identified policies and other documentation provided by to the auditor for each standard and reviewed. Staff and/or offender interviews that were conducted and what observations were made during the on-site audit review of the facility in order to make a determination of compliance for each standard provision. An undated interim report was provided to agency PREA Coordinator and PCM on November 2, 2018 day 41 for review. Auditor received an email with questions and concerns on Monday, November 5, 2018 which was the 45<sup>th</sup> day. Auditor was on-site at another audit and did not have information to review or respond to questions. Auditor contacted PRC to notify that the dated interim report would be past the 45 day timeline and reason for delay. Dated interim report was emailed Tuesday, November 13, 2018.

Sunday, December 2, 2018 the corrective action plan from the agency PREA coordinator was emailed to this auditor. Over the 5 month time frame this auditor was in communication with the agency PREA Coordinator and facility PREA compliance specialist receiving documentation and photos if required for a specific physical plant correction. May 1, 2019 WSP completed all areas identified in the corrective action plan and meet compliance for this audit.

**Final audit report:**

## Facility Characteristics

The Washington State Penitentiary (WSP) opened in 1886 and is located on 540 acres of farmland near the City of Walla Walla. Four separate facilities exist within the institution—each of which houses a different custody level of offender.

**East Complex**—Minimum Custody—Unit 6, 8 and 10

**South Complex**—Medium Custody—Victor and William Units; Barker, Adams and Rainier Units (BAR)

**West Complex**—Close Custody—Delta, Echo, Fox and Golf Units

**IMU North and South**—Maximum Custody

Custody staff includes Correctional Officers, Sergeants, Lieutenants, and two Correctional Captains. Correctional Officers are assigned a variety of posts – they work in living units, shift operations, response and movement, mail room, property room, master control, tool control, medical, recreation, education, food service, perimeter patrol, towers, etc.

WSP has a controlled system which allows movement only at designated times to specified locations. These movements are coordinated through movement control points and the offender living units. The facility also operates on a quadrant system that runs individually for control of Security Threat Groups so they do not come into contact with each other.

Facility programs:

Academic and Partnership programs: Auto body, information technology, building and maintenance technology, getting it right, book keeping, dog training and adoption programs, diesel mechanics, graphic design, heating ventilation and air conditioning (HVAC) and welding.

Correctional industries jobs: License plates, metal shop, laundry, field crops, recycle and transportation/warehouse.

## Summary of Audit Findings

The on-site portion of the audit went very well. Facility staff were helpful, responsive and hospitable to the audit team. The audit team thanks the superintendent for taking time out of his schedule during one afternoon of the on-site visit to spend with the audit team. During this time audit team was able to see how well the superintendent interacted with his staff and the level of professionalism he displayed. Additionally, audit team thanks the staff members who were designated to escort the audit team during the on-site visit. They were very knowledgeable, extremely helpful and are an asset to the facility.

Staff at WSP should be commended on their commitment and dedication at maintaining compliance with the PREA standards.

### **Best practice recommendations:**

East Complex Correctional Industries (CI) bldg: This auditor recommended that WSP replace the cameras with a new system or upgrade the current system to be operational.

Recommend that form 02-382 be revised changing homosexual to Gay/Lesbian. Form was updated 9/19/18.

CVT-M20 Building – Auto shop: Offender restroom marked to identify that is offender only.

Recommendation: 115.41 (g): When sexual abuse investigations are completed and closed as unsubstantiated, consider on a case by case basis that they add a just cause risk assessment to policy and practice.

**Number of Standards Exceeded:** 0

**Number of Standards Met: 45**

115.11, 115.12, 115.13, 115.14, 115.15, 15.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.93, 115.401

**Number of Standards Not Met: 0**

**Summary of Corrective Action (if any)**

**115.13 (a) (5)**

AVT Building M10:

Back class room window was covered with card board. Auditor received an email with an attached photo showing that the card board had been removed.

Restrooms needed to be labeled to clearly identify staff and offender bathrooms. Auditor received an email with an attached photo that the doors had been labeled.

Slider lock on the inside of the staff restroom needed to be removed and replaced with a key entry lock. Auditor received an email with an attached photo to support removal of slide lock with a key entry lock.

Motor Pool: Blind spot noted in the oil room. Auditor received an email with an attached photo that the facility installed a mirror.

AVT building: Staff bathroom lock was changed to allow key entry. Blind spot on the right side of the paint booth was blocked off.

CI warehouse L30: Janitor closet was labeled for easy identification

General Stores Warehouse J70: The offender janitor supplies which were located in the staff restroom were relocated to the offender restroom.

**East Complex:**

East clinic: Staff restroom labeled correctly (was noted as offender) and lock was changed to key entry.

Admin staff offices: Office A20-3-014 had a solid door, facility installed window.

Clerical and HR Hallway staff restrooms: Door was key entry but had slide lock on the inside, this was removed.

Plumbing shop: Miscellaneous items stacked on window shelf were removed to see clearly into area.

Engineer bldg.: 2<sup>nd</sup> floor staff bathroom door replaced with key entry lock.

Unit 8: Janitor closet (both sides) on the 2<sup>nd</sup> tier blind spot. Facility installed a mirror for staff to view in the room.

**South complex:** Staff lactation: After the CAP was developed, the purpose of the room changed to PREA related evidence holding and labeled as restricted area.

Offender restroom lock changed to allow key entry.

**West Complex:** Shift office area restroom did not allow access if locked from the inside. Lock was changed to allow key entry.

Community College: Restroom did not allow access if locked from the inside. Lock was changed to allow key entry.

East and West were missing PREA audit notifications. PCM addressed during on-site visit re-posting audit notifications and required that staff keep posted until October 1, 2018.

Delta, Echo, Golf and Fox: Restroom did not allow access if locked from the inside unless you had a hex key and staff in the unit did not know where the hex key was located. The facility provided hex keys to all supervisors and one is located in the unit booth. Staff working in the unit were provided information and signed a roster to support they know where the hex key is located.

#### **115.15 (d)**

East Complex CI Laundry: One offender toilet in open restroom area did not provide privacy for offenders. Privacy wall installed, photo provided to auditor.

#### **115.41**

During the audit time frame the facility had identified that they had some of offenders who had not been assessed within compliance of agency policy and this standard. Once identified the facility took action and made substantial improvements prior to on-site visit, however, the auditor requested to monitor for continued compliance. Auditor placed this standard on corrective action plan for minimum period of 3 months to review monthly tracking reports. Beginning November 1, 2018 and ending January 18, 2019 the facility PCM emailed copies of the WSP risk assessment tracker for auditor to review time frame of 72 and 30 day assessments. The monthly tracking report was for intake of offenders for the previous month, this auditor reviewed offenders admitted to WSP for the months of October, November and December, 2018. This auditor reviewed the assessment tracker sheets, selected random offenders and sent an email with the selected offender names to the PCM for a screen shot of OMNI PREA Risk Assessments (PRA) to verify dates matched the tracking report. WSP met substantial compliance during the corrective action time frame and met compliance with this standard.

#### **115.51**

**West Complex:** Intensive Management Unit (IMU) - Pod 3-H was missing PREA poster on the upper tier exercise room #4. The missing posters were replaced.

**Victor:** B dayroom – no PREA posters. The missing posters were replaced.

#### **Intensive Management Unit (IMU) - South**

South unit Pod 3-H was missing PREA poster on the upper tier exercise room #4. The missing posters were replaced.

**South Complex (bar units):** Bar Annex A and B:

(A) dayroom – Auditors did not see audit notifications, auditor requested notification be replaced. PCM addressed during on-site visit re-posting audit notifications and required that staff keep posted until October 1, 2018

(B) Support staff did not see PREA posters. The missing posters were replaced.

**Williams:** B dayroom

Auditors did not see audit notifications, auditor requested notification be replaced. PCM addressed during on-site visit re-posting audit notifications and required that staff keep posted until October 1, 2018.

**115.81**

During the audit time frame the facility identified some offenders that were received during intake who had not been offered mental health pursuant to 115.41. Once the deficiency was identified the facility took action and made substantial improvements prior to on-site visit audit. With the deficiency being identified during the audit time frame this auditor requested to monitor for another minimum of 3 months to further support maintained compliance. Beginning November 1, 2018 and ending January 18, 2019 the facility PCM emailed copies of the WSP risk assessment tracker to this auditor. This auditor reviewed the assessment tracking sheet for offenders admitted to WSP for the months of October, November and December, 2018 and selected random offenders, sent an email with the offender names to the PCM. The PCM provided a screen shot of OMNI PREA Risk Assessments (PRA) and copies of DOC 13-509 to verify dates matched the tracking report. WSP met substantial compliance during the corrective action time frame and meet compliance with this standard.

## PREVENTION PLANNING

### Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

**115.11 (a)**

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  Yes  No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?  Yes  No

**115.11 (b)**

- Has the agency employed or designated an agency-wide PREA Coordinator?  Yes  No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy?  Yes  No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?  
 Yes  No

### 115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)  Yes  No  NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
 490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
 490.860 Prison Rape Elimination Act (PREA) Investigations (6/1/18)

Additional supporting documentation.

Prison Division organizational chart  
 WSP organizational chart  
 Agency PREA coordinator position description  
 490.800 II. Responsibilities (A thru C)

Policy 490.800 Zero Tolerance statement reads: The Department recognizes the right of offenders to be free from sexual misconduct. The Department has zero tolerance for all forms of sexual misconduct. The Department will impose disciplinary sanctions for such conduct, up to and including dismissal for staff. Incidents of sexual misconduct will be referred for criminal prosecution when appropriate. The Department does not recognize consensual sexual contact between staff and

offenders as a defense against allegations of sexual misconduct. The Department recognizes the right of staff and offenders to be free from retaliation for reporting sexual misconduct. The Department has zero tolerance for all forms of retaliation against any person because of his/her involvement in the reporting or investigation of a complaint. Retaliation may be subject to corrective/disciplinary action.

Policy 490.800 outlines the agency PREA coordinator responsibilities. Compliance was further supported after conducting PREA coordinator specialized interview and in reviewing the agency PREA coordinator position description.

Tuesday, September 18, 2018 targeted interview with the PREA Coordinator who stated that she works Monday through Thursday, 10 hours each day (4, 10's), and indicated that she has time to manage her PREA responsibilities. Auditor was provided a copy of the organizational chart supporting the upper level authority and her ability to coordinate and have oversight of the agencies commitment to sexual safety and compliance with PREA standards. The agency coordinator does not supervise the facility PREA compliance managers; however, she works closely with and chairs the agency PREA advisory council. The agency PREA advisory council consists of 30 members with representative staff from every facility, to include but not limited to; agency PREA coordinator, facility PREA compliance managers, mental health, and investigators. She has consistent communication with committee members via phone, emails and in person. In addition the committee members meet every other month as a group.

Policy 490.800 outlines facility PREA compliance manager (PCM) responsibilities. Auditor was provided a copy of the facility organizational chart supporting the level of authority, which was further supported during the PCM specialized interview during on-site visit. Facility PCM has worked for WADOC for 37 years and has been the PCM for four (4) years and stated that she has sufficient time and authority to coordinate the facilities efforts for PREA and offender sexual safety within the facility.

## **Standard 115.12: Contracting with other entities for the confinement of inmates**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### **115.12 (a)**

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  Yes  No  NA

### **115.12 (b)**

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)  Yes  No  NA



## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

Additional supporting documentation.

Copy of contract page Article V – PREA – sexual misconduct

Memo from agency head

RCW 72.01.410 – Children under eighteen convicted of crime amounting to felony-placement.

490.80 reads in part: Contracted Confinement of Offenders. Any new or renewed contracts for the confinement of offenders will include the requirement that the contracted facility comply with federal PREA standards and allow the Department to monitor PREA compliance. The Department will not enter into contracts with facilities that fail to comply with PREA standards, except in emergent situations. The Department will document all attempts to find an alternate facility that meets PREA standards

Auditor conducted telephonic interview with the agency contracts administrator who stated that PREA requirements are contained within contract templates. The contracts administrator stated that she does not monitor the contractors for the compliance and her Division is only responsible to ensure that the PREA requirements are contained within the documents. She reported that the Agency PREA Coordinator is responsible for the monitoring the contracted agency for compliance. Auditor reviewed agency PREA coordinator position description task 15 which reads: Monitoring of compliance of public and private entities contracted with, to house offenders (e.g. jails, in-patient chemical dependency treatment providers, private correctional agencies, interstate compacts, etc.) and oversight of identified corrective action within established timeframes.

WADOC currently has contracts with the following public and private agencies for the housing of offenders under its jurisdiction:

American Behavior Health Systems for housing offenders in residential treatment (community confinement centers)

K8254. Agreement commenced July 1, 2009 and has been amended several times extending the contract end date. Currently the contract is in effect through June 30, 2019.

Rehabilitation Administration for housing youthful offenders – State of Washington Department of Corrections and Department of Social and Health Services Inter-Agency Agreement

K10491: This agreement was signed between agencies December 2015 and does not have an end date, agreement is open ended.

Yakima County Jail for housing of over flow female offenders

K10470: Agreement commenced February 12, 2014 and has been amended several times extending the contract end date. Currently the contract is in effect through December 31, 2018.

## Standard 115.13: Supervision and monitoring

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No  NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

#### 115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  
 Yes  No  NA

#### 115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?  Yes  No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?  Yes  No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?  Yes  No

#### 115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?  Yes  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No

- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

110.110 Work Release Management Expectations (8/1/14)  
110.100 Prison Management Expectations (6/8/18)  
300.500 Work Release Screening (10/10)  
400.200 Post Orders/Operations Manuals and Post Logs (10/17/11)  
400.210 Custody Roster Management (5/15/15)  
420.370 Security Inspections (10/16/13)  
490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

Additional supporting documentation:

Memos from Superintendent dated  
Memo from Superintendent to agency PREA coordinator  
Screen shot of shift summary  
Screen shot of action taken due to minimal staffing  
Copy of unit log reflecting supervisor's tours completed

Auditor triangulated information in determining compliance with this standard. During facility tour there were some minor blind spots concerns and areas where staff and offenders could be isolated. While these were minor physical plant issues, they still could create an area for potential sexual abuse. Based on these concerns WSP was placed into non-compliance for physical plant concerns. During the corrective action time frame these areas were corrected and action taken by the facility is noted in the corrective action summary of this report.

The Superintendent indicated during his interview that the facility has a staffing plan in place and that staffing levels are adequate to protect inmates against sexual abuse. This is assessed by reviewing staffing levels based on the dynamics of the current inmate population including custody levels, video monitoring capabilities, and all of the requirements identified within this standard. The facility does not have any judicial findings of inadequacy, findings of inadequacy from federal investigative agencies or findings of inadequacy from internal or external oversight bodies. DOC 400.800 section VI. Staffing

Plans reads as follows: Each Superintendent and Work Release Community Corrections Supervisor. (CCS) will use the PREA Compliant Staffing Plan template maintained on the PREA Audit SharePoint site to develop, maintain, and annually review a staffing plan that includes an objective analysis of the facility's staffing needs and established staffing model. Prisons, this review should be in conjunction with the post audit conducted per DOC 400.210 Custody Roster Management. Reviews will document consultation with the PREA Coordinator, who will be provided with a copy of the completed PREA Compliant Staffing Plan.

During the interview with the agency PREA coordinator, she indicated that she is consulted with annually for the staffing plan reviews. Additionally, this auditor reviewed 2016 and 2017 annual reports which are also posted on the agency website:

<http://www.doc.wa.gov/corrections/prea/resources.htm/corrections/prea/resources.htm#reports>

(d) In addition to reviewing DOC 110.100, DOC 400.200, DOC 420.370 and supporting proof of practice documentation this auditor completed the specialized intermediate and higher level facility staff interview. DOC 110.100 reads in part: Superintendents will ensure that each member of the facility executive management team makes unannounced tours of selected areas of the facility at least weekly. Employees are prohibited from alerting one another that these tours are occurring, except when necessary for the legitimate operational functions of the facility. At a minimum, the following must be toured each week: Restrictive housing units, Food Services, including mainline operations, Health Services, and Off-site work crews. Facility executive management team members will routinely modify their work schedules to conduct tours and interact with employees on all shifts. Tours will include observation of performance related to core processes to ensure operational practice is aligned with reported performance.

- 115.13 (d) Unit shift logs were reviewed during on site tours. Unannounced tours were conducted and documented in log book.

Specialized interview with supervisor conducting announced rounds:

Assistant superintendent has worked for WADOC for 31 years and conducts unannounced rounds on all shifts to include coming in on weekends. She stated that she is not announced, should she hear that staff alerted other staff it would be addressed with the staff member to remind them the importance of the unannounced visit and reason staff should not be alerted. This was further confirmed during random and impromptu interviews with staff who also stated that they do not alert other staff when supervisors are conducting tours.

115.13 (a) East Complex, Correctional Industries: Staff members conduct regular tours to include using observation hallway which allows for staff to view into all CI areas and some of the cameras were no longer operational. Auditor made best practice recommendation noted in the summary of this audit report.

115.13 (a) (5) – Areas identified and placed on corrective action plan. Action taken is noted in the corrective action summary of this report:

CVT-10 Building

Motor Pool

AVT building

CI warehouse L30 (janitor closet)

General Stores Warehouse J70

**East Complex:**

East clinic:

Admin staff offices

Clerical and HR Hallway staff restrooms:

Plumbing shop

Engineer bldg.

Unit 8

**South complex:**

Staff lactation room

Offender restroom

**West Complex:**

Shift office.

Community College

Echo

East and West units were missing PREA audit notifications. PCM addressed during on-site visit re-posting audit notifications and required that staff keep posted until October 1, 2018.

Golf

Fox

**Standard 115.14: Youthful inmates**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.14 (a)**

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

**115.14 (b)**

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

#### 115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

320.500 Youthful Offender Program

Additional supporting documentation

RCW 72.01.410 Child under eighteen convicted of crime amounting to felony-placement.

K10491: This agreement was signed between agencies December 2015 and does not have an end date, agreement is open ended.

While the agency has a policy, this standard is not applicable as WSP does not house youthful offenders.

## Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?  
 Yes  No

### 115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20, 2017.)  Yes  No  NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.)  Yes  No  NA

### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female inmates?  
 Yes  No

### 115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?  Yes  No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?  Yes  No

### 115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?  Yes  No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that



information as part of a broader medical examination conducted in private by a medical practitioner?  Yes  No

### 115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  Yes  No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

420.310 Searches of Offenders (1/1/14)  
420.312 Body Cavity Search (10/27/14)  
420.325 Searches and Contraband for Work Release (4/20/15)  
320.265 Close Observation Areas (4/28/17)  
490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting  
490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments

Additional supporting documentation.

Memos from Superintendent  
Copy of strip search log  
Photos of wall plaques to notify gender of staff working in the area  
Screen shots of Pat Search annual in-service training

Element (b) is not applicable to WSP

WADOC 420.310 reads that strip searches of male offenders require that one of the employees conducting the search be male. If the second person conducting the strip search is female, she will position herself to observe the employee doing the strip search, but will not be in direct line of sight with the offender. During interviews with random staff and inmates supported policy as written. Staff stated

female custody staff members are positioned to watch male custody staff for safety but are positioned in a way that they will not be able to view genitalia while the offender is unclothed. Offenders stated during interviews that female staff members do not view them if they are unclothed.

DOC 490.800 reads: An announcement will be made indicating “Man on unit” or “Woman on unit” by anyone who does not identify with the facility’s gender designation, loud enough and often enough to reasonably be heard by the occupants of a housing unit, including the living area (e.g., where incarcerated individuals sleep), or any common area designated for offenders to disrobe or change their clothing (e.g., bathrooms, showers). Onsite interviews with staff and offenders supported and confirmed compliance with agency policy and standard. Cross gender announcement were also completed during audit team facility tour and when audit team entered housing units to conduct interviews with staff and offenders.

DOC 490.800 reads: Employees/contract staff who may conduct pat searches will be trained in cross-gender searches and searches of transgender and intersex offenders. Audit team on-site interviews of random staff concerning pat searches of Transgender/Intersex offenders, staff reported that they had knowledge on how to conduct pat searches of Transgender and Intersex offenders but had not conducted a pat search of a Transgender/Intersex offender. Specialized interviews with transgender offenders were conducted with none of them reporting any issues with pat searches by staff. Auditor reviewed 2014 Pat Search training slides which includes but not limited to; search of female, male and inter-sex/transgender offender. WADOC is in the process of updating pat search training curriculum.

East Complex Unit 6: Cells were old bar style and offenders have privacy curtain which is utilized when offenders are using the toilet. Lead audit asked one inmate to show how long the curtain was to ensure it provided privacy for the offender. When curtain was pulled it provided privacy for the offender while still allowing staff to view into the cell for offender safety. This supported compliance to prevent cross gender viewing and privacy for offender.

Area identified and placed on corrective action plan. Action taken is noted in the corrective action summary of this report:

#### **115.15 (d)**

East Complex CI Laundry: One offender toilet in open restroom area did not provide privacy for offenders.

### **Standard 115.16: Inmates with disabilities and inmates who are limited English proficient**

#### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.16 (a)**

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?  Yes  No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)?  Yes  No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  Yes  No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision?  Yes  No

## 115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?  Yes  No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No

### 115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

310.000 Orientation for Offenders (8/27/12)  
 450.500 Language Services for Limited English Proficient (LEP) Offenders (1/14/13)  
 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
 690.400 Offenders with Disabilities (4/25/17)

Additional supporting documentation.

Memos from Superintendent  
 DOC sign language Contract Interpreters log (7/7/18)  
 Copy of Correctional Specialist 3 (Deaf Services Coordinator) position description  
 Screen shots of DOC Americans with Disabilities Act staff training  
 Facilitator guide for offenders with limited intellectual capabilities  
 PREA brochure in Spanish  
 Memo regarding access to interpreters  
 Sample of Offender case note screen shot noting the use of interpreters

### Interpreter service contracts:

Contract Summary – Washington State Department of Enterprise Services for Interpreter Services for in-person interpretation:

Contract # 03514 current start date 7/1/17 with a final term date of 6/30/2023

Contract Summary – Washington State Department of Enterprise Services for telephone based interpreter services:

Contract # 05614 current start date 3/5/17 with a final term date of 6/30/2020

Sign Language contracts:

K8652 – WADOC with Michelle Mile, commencement date 9/1/2010 extension expiration date 8/31/18.  
K10329 – WADOC with Lynn Chun, commencement date 7/1/2013 extension expiration date 9/30/19.  
K10357 – WADOC with Courtney Coddington, commencement date 8/1/2013 extension expiration date 7/31/20.  
K10831 – WADOC with Andrew Gault, commencement date 4/20/15 extension expiration date 6/30/19.  
K11255 – WADOC with Sarah Pettigrew, commencement date 6/25/18 extension expiration date 6/30/20.  
K11283 – WADOC with Echo Zard, commencement date 9/1/16 extension expiration date 8/31/18.  
K11309 – WADOC with Catherine Roy, commencement date 10/1/16 extension expiration date 9/30/18.  
K11310 – WADOC with Luanne Conner, commencement 10/1/16 extension expiration date 9/30/18.  
K11255 – WADOC with Elizabeth Baxter, dba Beth Dexter Interpreting Service, commencement date 1/1/17 extension expiration date 12/31/18.  
K11511 – WADOC with Dawn Trouve, commencement date 4/17/17 extension expiration date 4/16/19.  
K11734 – WADOC with Donna Walker, commencement date 3/1/18 extension expiration date 2/28/20.  
K11255 – WADOC with Lanae Sanchez, commencement date 3/1/18 extension expiration date 2/28/20.  
K11747 – WADOC with Lucinda Marie Porter, dba Cindy Porter, commencement date 4/1/18 extension expiration date 3/31/20.  
K11760 – WADOC with David Morrison, commencement date 4/25/18 extension expiration date 4/24/20.  
K11783 – WADOC with Melissa Klindlworth Sole Proprietor, commencement date 6/1/18 extension expiration date 5/31/20.

DOC 310.000 reads: When a literacy or language problem exists, staff will assist the offender in understanding the material per DOC 450.500 Language Services for Limited English Proficient (LEP) Offenders. Spanish speaking offenders will attend a Spanish version of the orientation program. The Spanish orientation will notify offenders of the Spanish translated materials and services that are available. Each facility will develop processes for non-Spanish speaking Limited English. Proficiency offenders, including those requiring sign language interpretation, to receive orientation in a language they understand per DOC 450.500 Language Services for Limited English Proficient (LEP) Offenders.

Specialized offender interviews supported compliance with agency policy and standards. Offenders confirmed that they received information and understood how to report and their right to be free from sexual abuse, sexual harassment and retaliations. Staff was available to provide interpretation during interviews with LEP offenders. During on-site audit tour, the audit team identified some areas in housing units that were missing the PREA Spanish posters. Information was passed the PCM to address.

DOC 490.800 III Offender Accommodations reads: Professional interpreter or translation services, including sign language, are available to assist offenders in understanding this policy, reporting allegations, and/or participating in investigations of sexual misconduct per DOC 450.500 Language Services for Limited English Proficient (LEP) Offenders. Offenders are not authorized to use

interpretation/translation services from other offenders, family members, or friends for these purposes. Staff interpreters/translators will only be used for these purposes in exigent circumstances. Americans with Disabilities Act (ADA) accommodations will be provided per DOC 690.400 Offenders with Disabilities.

WSP did not have any offenders who were deaf or blind. Offenders who had limited sight or limited hearing were selected; however audit team did not require the use of sign language services for those with limited hearing. All offenders reported that they had received information in a format that they understood and were able to communicate with staff if they had any questions or concerns.

## Standard 115.17: Hiring and promotion decisions

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  Yes  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?  Yes  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No

#### 115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?  Yes  No

#### 115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check?  Yes  No
- Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?  Yes  No

#### 115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?  Yes  No

#### 115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?  Yes  No

#### 115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?  Yes  No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?  Yes  No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  Yes  No

#### 115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  Yes  No

#### 115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)  Yes  No  NA

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
420.320 Terrorism Activity (9/12/11)  
800.005 Personnel Files (11/1/13)  
810.015 Criminal Record Disclosure and Fingerprinting (11/1/17)  
810.800 Recruitment, Selection and Promotion (11/1/17)

### Additional supporting documentation

Memos from Superintendent  
Roster of staff hired or promoted during audit time frame  
Copy of DOC 03-502 Sexual Misconduct Disclosure  
Copy of contract shell for agency and individual service providers  
Copy of spreadsheet for all WSP based contractors  
Copy of spreadsheet for all contracted sign language of interpreters  
Examples of DOC 03-506, Sexual Misconduct and Institutional Employment / Service Disclosure forms for contractors  
Screen shot of PREA 101 curriculum regarding continuing affirmative duty to report

Auditor triangulated information in determining compliance with this standard. After reviewing agency policy, specialized interview with supervisor of facility HR division, reviewing supporting documentation provided prior to audit and on-site review of 5 year background check tracking sheet the facility meets full compliance with this standard.

Policy 490.800 reads in part: To the extent permitted by law, the Department will not knowingly hire, promote, or enlist the services of anyone who: Has engaged in sexual misconduct in a Prison, jail, lockup, community confinement facility, juvenile facility, or other institution as defined in 42 U.S.C. 1997, Has engaged in sexual misconduct with an offender on supervision, Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or Has been civilly or administratively adjudicated to have engaged in the activity described above. The Department will consider any incidents of sexual harassment in determining whether to hire, promote, or enlist the services of anyone who may have contact with offenders.

Specialized interview with human resources staff member was conducted during on-site visit with the facility HR supervisor who has worked for the WADOC for 27 years. HR supervisors reported that they



completed NCIC and FBI background checks on all new employees and contractors and follows up on dispositions if a positive response returns which does not have one noted.

(d) WADOC contracts for nursing staff working within WADOC facility: Contracts were reviewed contain PREA requirements for contractors who work in a facility.

K11280 – Contract between the State of Washington, Department of Corrections and Management Registry. Agreement commenced on August 1, 2016 and effective through June 30, 2018. July 1, 2018 contracted was amended and is in effect through June 30, 2020.

K11279 – Contract between the State of Washington, Department of Corrections and Accountable Healthcare Staffing. Agreement commenced on August 1, 2016 and effective through June 30, 2018. July 1, 2018 contracted was amended and is in effect through June 30, 2020.

K11281 – Contract between the State of Washington, Department of Corrections and Cell Staff. Agreement commenced on August 1, 2016 and effective through June 30, 2018. Currently the contract has not been amended to continue services after June 30, 2018.

(e) Agency exceeds in part after review of policy DOC 810.015. Agency conducts criminal background checks annually for correctional staff as part of weapons qualifications. This was further supported during interview the with facility HR staff supervisor.

## Standard 115.18: Upgrades to facilities and technologies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes    No    NA

#### 115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes    No    NA

### Auditor Overall Compliance Determination

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

**Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

Additional supporting documentation

Documentation demonstrating the consideration of PREA and the facility's ability to protect offenders from sexual abuse during physical plant project design

Email regarding camera in a unit

Approval request for unit cameras

Auditor triangulated information in determining compliance with this standard. After reviewing agency policy, reviewing supporting documentation provided prior to audit and sspecialized interview with Superintendent wherein he stated that they did take PREA into consideration during the design process the facility meets compliance with this standard.

Policy 490.800 reads in part: The Department will consider possible effects on its ability to protect offenders from sexual misconduct when: Designing or acquiring a new facility Planning substantial expansions or modifications of existing facilities, and Installing or updating video monitoring systems, electronic surveillance systems, or other monitoring technology.

Since the last PREA audit of WSP which was completed May, 2016 the facility has been approved for a new program building in the South complex and construction was in very early stages during on-site visit. Auditor was provided with documentation that did consider the agency's ability to protect offenders from sexual abuse during the design process.

Cameras were installed in unit 6 and in the bar units to enhance the facilities ability to protect offenders from sexual abuse.

## RESPONSIVE PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence

for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  
 Yes  No  NA

#### 115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  Yes  No  NA
  
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  Yes  No  NA

#### 115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate?  Yes  No
  
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No
  
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?  Yes  No
  
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

#### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No
  
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?  Yes  No
  
- Has the agency documented its efforts to secure services from rape crisis centers?  
 Yes  No

#### 115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?  Yes  No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  Yes  No

#### 115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)  Yes  No  NA

#### 115.21 (g)

- Auditor is not required to audit this provision.

#### 115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.]  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)

600.000 Health Services Management (8/25/14)

600.025 Health Care Copayment Program (7/14/15)

610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct (10/14/16)

Additional supporting documentation  
Memos from Superintendent

Facility case database for all open investigations during audit documentation period  
Excerpt from “A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents, Second edition, April 2013 (entire document was also provided)  
Sexual Assault Evidence Collection: Uniform Evidence Protocol  
Forensic Medical Exam Procedure for DOC Health Care Staff  
Forensic Medical Exam Procedure for Transporting Staff  
Crime Scene Containment/Preservation/Processing Checklist (DOC 16-357)  
Crime Scene Log (DOC 16-358)  
Report (DOC 05-384)  
Spreadsheet for all designated advocates and hospitals for forensic exams  
Email communication between WSP PREA compliance manager and community advocate noting offenders transported for SAFE during audit time frame.  
Memo from Walla Walla Police Department to WSP Superintendent  
Copy of Mutual Aid Agreement between State of Washington, Washington State Patrol and State of Washington Department of Corrections K8487 (contract extension 7/1/17 – 6/30/20)  
Copy of PREA/Crime Victims Advocate Meeting Minutes  
Memo from Asst. Secretary of Health Services to All Health Services Staff  
Copy of Interagency Agreement (K11494) between The State of Washington Department of Corrections and Department of Commerce Office of Crime Victims Advocacy (current contract valid 7/1/17 – 6/30/19)  
OCVA and WADOC Sexual Assault Support and Information Line offender brochure (English and Spanish)  
Copy of In-Person Victim Advocacy Services Guide  
Copy of PREA advocate qualifications

Policy 490.850 address's the agency response to allegations of sexual abuse which includes but not limited to: Aggravated Sexual Assault checklist, PREA response and containment check list and crime scene security log.

Sexual Assault Forensic Exam (SAFE) are conducted by Sexual Assault Nurse Examiners (SANE) at Providence St. Mary's Medical Center in Walla Walla, Washington. All emergency room staff are trained in the SANE response process.

Specialized telephonic interview with YWCA of Walla Walla PREA victim advocate Ms. Guardado. When a call is received that an inmate will be transported to St. Mary's Hospital, YWCA advocate is contacted to be present during the Sexual Assault Forensic Exam. The YWCA advocate began on-going telephonic offender advocacy with incarcerated survivors in 2015 and in 2016 she began meeting with clients at WSP. Currently meetings are set at a minimum of every two weeks and she meets with clients in an interview room or office in the unit the offender is housed.

(f,g) The Walla Walla Police Department is the primary investigator for sexual abuse investigations. If they decline to conduct a criminal investigation, the Washington State Patrol could conduct the criminal investigation at the request of the Superintendent.

## **Standard 115.22: Policies to ensure referrals of allegations for investigations**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### 115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  Yes  No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  Yes  No

### 115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?  Yes  No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Yes  No
- Does the agency document all such referrals?  Yes  No

### 115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).]  Yes  No  NA

### 115.22 (d)

- Auditor is not required to audit this provision.

### 115.22 (e)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)

## 490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

### Additional supporting documentation

Facility complaint log

Copy of Mutual Aid Agreement between State of Washington, Washington State Patrol and State of Washington Department of Corrections K8487 (contract extension 7/1/17 – 6/30/20)

Memo from Walla Walla Police Department to WSP Superintendent

Screen shot of agency website Prison Rape Elimination Act

WSP PREA cases referred to Law Enforcement 7/1/17 – 6/30/18

Designated facility staff members who have completed specialized training conduct administrative investigations. Criminal investigations are conducted by outside law enforcement.

Auditor triangulated information in determining compliance with this standard. After reviewing agency policy, supporting documentation provided prior to audit and specialized interview with the Superintendent and facility investigators the facility meets compliance with this standard. During interviews with Superintendent and PCM, both stated that they have a great working relationship with the Walla Walla Police Department and communicate regularly to include meeting with them. Meeting minutes were provided to the auditor and supported the interviews. Auditor was provided with the facility allegation/investigation tracking log and closed investigations for this audit time frame which was reviewed confirming that investigations are completed.

Policy 490.860 I reads in part: The Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department. Investigations will be completed even if the offender is no longer under Department jurisdiction or authority and/or the accused staff, if any, is no longer employed by or providing services to the Department. Allegations may be referred to law enforcement agencies for criminal investigation.

Policy 490.800 IV reads in part: Meeting with local law enforcement. Each Superintendent and the Work Release Administrator will meet at least annually with applicable law enforcement officials to: Review investigation requirements detailed in federal PREA standards, establish procedures for conducting criminal investigations related to PREA allegations, and establish points of contact and agree upon investigatory update procedures. Meetings with law enforcement will be documented in meeting minutes.

(e) WADOC does not have the Department of Justice conduct investigations, as such, this element is not applicable.

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?  Yes  No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  Yes  No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  Yes  No

#### 115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility?  Yes  No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?  Yes  No

#### 115.31 (c)

- Have all current employees who may have contact with inmates received such training?  Yes  No



- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?  Yes  No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?  Yes  No

### 115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

Additional supporting documentation

Memo from Superintendent

Copy of staff online annual PREA training

Auditor triangulated information provided by reviewing, policy, supporting documentation and random staff interviews to determine compliance with this standard.

Training curriculum was provided to the auditor for review which included staff training roster confirming substantial compliance with this standard. WADOC staff have completed PREA training staff utilizing computer based E-learning program for refresher with new staff completing the E-learning program and receiving an in class instruction during the agency academy. WADOC recently reviewed and revised their annual in-service PREA training and will be conducting an in-class scenario based instruction.

On-site random interviews with staff provided auditor the 3<sup>rd</sup> part in determining compliance. Staff stated that they complete PREA in-service E-learning training annually and have good knowledge and understanding of the training received. All staff stated how they respond to and report should they receive an allegation of sexual abuse or imminent threat of sexual abuse. Some of the staff interviewed stated that they had recently attended or were scheduled for the in class PREA instruction for 2018/2019.

(b) This element was marked no as WADOC exceeds this standard element as they provide training to all staff in the new academy and every year during in-service training. All staff are trained regardless of which facility they are assigned to or gender of offender that they supervise.

DOC 490.800 X. Training Requirements reads in part: All new employees, contract staff, and volunteers will receive initial PREA training upon hire/assignment, followed by annual refresher training. When initial training is not conducted prior to assignment, the individual will sign DOC 03-478 PREA Acknowledgment and will complete training at the earliest opportunity. Zero tolerance for sexual misconduct and related retaliation, Preventing and detecting sexual misconduct, including: Communicating effectively with offenders, including lesbian, gay, bisexual, transgender, intersex, and/or gender non-conforming offenders. Gender-specific issues. Examples of conduct, circumstances, and behaviors that may be precursors to sexual misconduct. Avoiding inappropriate relationships with offenders. Recognizing signs of possible/threatened sexual misconduct and staff involvement. Recognizing predatory behavior and common reactions of sexual misconduct victims. The dynamics of sexual misconduct in confinement. Reporting sexual misconduct, including: Reporting methods, Mandatory reporting for youthful offenders and offenders classified as vulnerable adults, and Disciplinary consequences for staff's failing to report. Responding to sexual misconduct, including first responder duties. Confidentiality requirements. Staff will acknowledge their understanding of the training. For online training, acknowledgment will be included in the electronic course. For in-person training, acknowledgment will be documented by signing the course roster, which will include a statement verifying participant understanding.

## Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?  Yes  No

### 115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?  Yes  No

### 115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?  Yes  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
 530.100 Volunteer Program (11/1/17)  
 700.400 Class IV Off-Site Work Crew (6/1/13)

Additional supporting documentation

- Memo from Superintendent
- Contract shell for agency and individual service providers
- Spreadsheet from headquarters (HQ) individual responsible for oversight of contracted sign language interpreters and training completion dates
- Spreadsheet for facility based contractors and general PREA training completion dates
- Spreadsheet detailing all vendors working at the facility within the audit documentation period and the date they signed the PREA acknowledgment form.
- PREA brochure for Staff, Contractors, and Vendors
- Random samples of vendor PREA Acknowledgment forms
- Random examples of individual training transcripts for volunteers confirming completion of required training

Auditor triangulated information provided reviewing policy, supporting documentation and specialized interviews with contractors and volunteers while on-site to determine compliance with this standard.

Volunteer and Contractors stated to auditor or support staff that they had received PREA training and complete refresher training annually. All those interviewed stated that they understood and explained the process of how to report if an offender reported that they had been sexually abused or harassed. Volunteers or contractors who do not complete the annual refresher as required are removed from entry into the facility until they have successfully completed the training.

DOC 490.800 X reads in part: Training Requirements reads in part: All new employees, contract staff, and volunteers will receive initial PREA training upon hire/assignment, followed by annual refresher training. When initial training is not conducted prior to assignment, the individual will sign DOC 03-478 PREA Acknowledgment and will complete training at the earliest opportunity. Zero tolerance for sexual misconduct and related retaliation, Preventing and detecting sexual misconduct, including: Communicating effectively with offenders, including lesbian, gay, bisexual, transgender, intersex, and/or gender non-conforming offenders. Gender-specific issues. Examples of conduct, circumstances, and behaviors that may be precursors to sexual misconduct. Avoiding inappropriate relationships with

offenders. Recognizing signs of possible/threatened sexual misconduct and staff involvement. Recognizing predatory behavior and common reactions of sexual misconduct victims. The dynamics of sexual misconduct in confinement. Reporting sexual misconduct, including: Reporting methods, Mandatory reporting for youthful offenders and offenders classified as vulnerable adults, and Disciplinary consequences for staff's failing to report. Responding to sexual misconduct, including first responder duties. Confidentiality requirements. Staff will acknowledge their understanding of the training. For online training, acknowledgment will be included in the electronic course. For in-person training, acknowledgment will be documented by signing the course roster, which will include a statement verifying participant understanding.

WADOC contracts for nursing staff working within WADOC facility: Contracts were reviewed and contain PREA requirements for contractors who work in a facility.

K11280 – Contract between the State of Washington, Department of Corrections and Management Registry. Agreement commenced on August 1, 2016 and effective through June 30, 2018. July 1, 2018 contract was amended and is in effect through June 30, 2020.

K11279 – Contract between the State of Washington, Department of Corrections and Accountable Healthcare Staffing. Agreement commenced on August 1, 2016 and effective through June 30, 2018. July 1, 2018 contract was amended and is in effect through June 30, 2020.

K11281 – Contract between the State of Washington, Department of Corrections and Cell Staff. Agreement commenced on August 1, 2016 and effective through June 30, 2018. Currently the contract has not been amended to continue services after June 30, 2018.

## Standard 115.33: Inmate education

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  Yes  No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  Yes  No

#### 115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  Yes  No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  Yes  No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?  Yes  No

### 115.33 (c)

- Have all inmates received such education?  Yes  No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?  
 Yes  No

### 115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  Yes  No

### 115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?  
 Yes  No

### 115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

310.000 Orientation for Offenders (8/27/12)

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

Additional supporting documentation

Memo from Superintendent

Statewide Offender Handbook Excerpt (entire handbook also provided)

Offender PREA brochure English and Spanish

Spreadsheet detailing offenders received and date orientation completed

Examples of orientation completion documentation

PREA orientation video transcript

Facilitator guide for offenders with limited intellectual capabilities

WSP procedure regarding documentation of the provisions of targeted offender orientation

Auditor triangulated information provided reviewing policy, supporting documentation, interviews with random and specialized offenders to determine compliance with this standard.

Offenders stated they had received PREA training with the majority providing information to auditors that had also received PREA training while housed at other facilities and on the bus during transport. Offenders understood the information provided and how to report. Specialized interviews with offenders who are limited English proficient or disabled received education in formats that they could read and understand.

## **Standard 115.34: Specialized training: Investigations**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.34 (a)**

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA

#### **115.34 (b)**

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA

- Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA
  
- Does this specialized training include sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA
  
- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA

#### 115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  Yes  No  NA

#### 115.34 (d)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

880.100 Corrections Training and Development (10/17/11)

Additional supporting documentation

Memo from Superintendent

Agency spreadsheet for staff that completed PREA Workplace Investigation Training

Sample documentation of trained investigators confirming completion of training

WAC 139-05-240 outlining requirements of the basic law enforcement academy  
HB 1109 Supporting Victims of Sexual Assault

Training curriculum provided:

Responding to Sexual Misconduct for Appointing Authorities  
PREA Investigations Booster training  
Washington State Department of Corrections Workplace and PREA Investigations Training

Auditor triangulated information provided reviewing policy, supporting documentation and specialized interviews with investigators to determine compliance with this standard.

WADOC developed specialized training curriculum for staff who may be assigned to conduct administrative PREA investigations. Two facility investigators who have completed PREA specialized training and PREA investigations during this audit time frame were selected for specialized interviews. Interviews were conducted at separate times in interview area's that allowed for privacy. Staff members stated that they had received the training to include regular PREA training. WADOC staff members are not sworn peace officers and would never use Miranda. Investigators are familiar with Garrity and when it applies for investigations involving staff members.

Additionally, WADOC developed specialized training curriculum for Appointing Authorities. Investigations are assigned by Appointing Authority to designated investigators in the facility or the Appointing Authority can request that the investigation be completed by a trained investigator from other facilities. At the completion of the investigation the Appointing Authority reviews and determines one of the three findings.

Policy 490.860 C. reads in part: Investigators will be assigned by the Appointing Authority/designee and must be trained per DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

## Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?  Yes  No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?  Yes  No



- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?  Yes  No

#### 115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)  Yes  No  NA

#### 115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?  Yes  No

#### 115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?  Yes  No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct (10/14/16)

880.100 Corrections Training and Development (10/17/11)

#### Additional supporting documentation

Memo from Superintendent

PREA for Health Services training curriculum

Spreadsheet listing all regular medical practitioners and contract staff showing completion dates for PREA Health Services and general PREA training

Documentation of random samples of completed training

Auditor triangulated information provided reviewing policy, supporting documentation and specialized interviews with medical and mental health staff to determine compliance with this standard.

Specialized interviews the medical and mental health staff were conducted separately in room for privacy. Staff reported that they have completed the specialized training to include PREA training in compliance with 115.31.

(b) is not applicable as facility staff do not conduct SAFE. These are conducted by SANE at the Providence St. Mary's Medical Center in Walla Walla, Washington

Policy 490.800 F. reads in part: Health Services employees/contract staff, with the exception of medical records, clerical, pharmacy personnel, the Dietary Services Manager, and the Psychologist assigned exclusively to sex offender treatment programming, will be trained in: Detecting and assessing signs of sexual misconduct, responding effectively and professionally to sexual misconduct victims, completing DOC 02-348 Fight/Assault Activity Review, preserving physical evidence, reporting sexual misconduct, and counseling and monitoring procedures.

## SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

### Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  Yes  No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?  Yes  No

#### 115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  
 Yes  No

#### 115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?  
 Yes  No

#### 115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?  Yes  No

#### 115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?  Yes  No

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?  Yes  No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?  Yes  No

#### 115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?  Yes  No

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Request?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?  Yes  No

#### 115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?  Yes  No

#### 115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)  
490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)  
280.310 Information Technology Security (11/27/17)  
280.515 Electronic Data Classification (8/22/11)

Additional supporting documentation

Memo from Superintendent  
PREA risk assessment tracker (PRA)  
Sample of initial PRA's  
Screen prints from Offender Management Network Information (OMNI) system  
DOC 07-019 PREA risk assessment form  
OMNI PREA risk assessment (PRA) assessor and reviewer user guide  
PREA risk assessment (PRA) training curriculum  
Memo from WADOC Deputy Secretary

Auditor triangulated information provided reviewing policy, supporting documentation, specialized interviews with staff and random interviews with offenders to determine compliance with this standard.

While the policy and interviews supported that risk screening assessments were completed the supporting documentation for proof of practice found that there were some offenders who were not seen within time frames required. During the audit time frame the facility had identified that they had some of offenders who had not been assessed within compliance of agency policy and this standard. Once identified the facility took action and made substantial improvements prior to on-site visit, however, the auditor requested to monitor for continued compliance. This auditor placed this standard on corrective action plan for minimum period of 3 months to review monthly tracking reports. Corrective action taken is noted in the corrective action summary of this report.

Specialized staff interviews and offender interviews completed on-site. During on-site visit WSP received offenders which allowed audit support staff to monitor the process, further supporting proof of practice. Offenders stated during interviews that they had been asked the PREA questions as defined in agency policy 490.820.

Policy 490.820 reads in part:

Intake PRAs: Classification Counselors and designated Work Release employees will complete a PRA within 72 hours of arrival for all offenders arriving at any Department facility. This includes offenders returning to a facility from out-to-court status. Facilities will establish procedures to ensure completion within 72 hours, even on weekends and holidays

Follow-Up PRAs: A follow-up PRA will be completed between 21 and 30 calendar days after the offender's arrival at the facility.

(d) During on-site visit auditor reviewed WSP 6 month assessment review tracking for all Transgender offenders which confirmed compliance,

Policy 490.820 VII. Transgender and Intersex Offenders reads in part: Review committees will reassess placement and programming assignments every 6 months using DOC 02-385 Protocol for Housing Review for Transgender and Intersex Offenders to review any threats to the offender's safety.

(g) reads in part "when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization."

WADOD policy 490.820 (e) reflects that a for cause assessment is completed for substantiated allegations of offender on offender sexual abuse/assault or staff sexual misconduct.

## Standard 115.42: Use of screening information

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?  Yes  No

#### 115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate?  Yes  No

#### 115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or

female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?  Yes  No

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?  Yes  No

#### 115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?  Yes  No

#### 115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?  Yes  No

#### 115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  Yes  No

#### 115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?  Yes  No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?  Yes  No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?  Yes  No

#### Auditor Overall Compliance Determination

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

300.380 Classification and Custody Facility Plan Review (3/7/18)  
490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)

Additional supporting documentation

Memo from Superintendent  
Learning Management System (LMS) for PREA risk assessment for housing assignments  
PREA risk assessment for housing assignment user guide  
Random examples of Chrono entries  
Protocol For The Housing of Transgender and Intersex Offenders (DOC 02-384)  
Protocol Housing Review For Transgender and Intersex Offenders (DOC-385)  
WSP Operational Memorandum 490.820  
Documentation regarding work, education and programming assignments taking into account PREA risk assessment

Auditor triangulated information provided reviewing policy, supporting documentation and information received during specialized staff and offender interviews to determine compliance with this standard.

115.42 (f) Unit 10: During the tour auditor had some concerns regarding the showers if they had a Transgender offender housed in this unit. PCM stated that they have shower plan for Transgender/Intersex offenders if they are housed in this unit. At the time of the on-site tour this unit did not have any Transgender/Intersex offenders assigned.

Specialized interviews with Transgender offenders were completed during on-site visit. Offenders stated that they are able to shower privately and are not housed in dedicated areas based on how they identify. Auditor reviewed WSP Operational Memorandum which reads that Transgender and Intersex Offenders will be assigned to a housing unit that has individual showers. During on-site tour of the facility multiple housing unit which have individual showers which allow for privacy.

Specialized interview with PCM she stated that the agency and facility have policy and procedures where staff review the transfer manifest. WSP PCM will arrange for a phone interview with Transgender offenders who are on the list to transfer to WSP prior to transfer. During the phone conversation they will discuss the facility and how the offender feels about transferring to WSP. After the completing the review the information will be provided to the Deputy Secretary to approve or deny transfer.

Policy 490.820 VII. reads in part: Housing and programming will be reviewed, initially and prior to any transfer, by a local review committee for all offenders who identify as transgender or intersex. Reviews will be documented on DOC 02-384 Protocol for the Housing of Transgender and Intersex Offenders, which will be scanned into a secure site in the electronic imaging system accessible only by the PREA



Compliance Manager/Specialist and the Correctional Program Manager/CCS or higher rank initial housing reviews will be completed within 10 business days of disclosure by the offender of transgender or intersex status. If DOC 02-384 Protocol for the Housing of Transgender and Intersex Offenders is approved by the Prisons Command A Deputy Director indicating transfer to a facility, the receiving facility will complete Part II of the form. The receiving facility review committee will conduct an interview with the offender, arranged by sending facility staff. The interview may be conducted telephonically or in person, as applicable.

## Standard 115.43: Protective Custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?  Yes  No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?  Yes  No

#### 115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?  Yes  No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?  Yes  No

#### 115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?  
 Yes  No
- Does such an assignment not ordinarily exceed a period of 30 days?  Yes  No

#### 115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?  Yes  No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?  Yes  No

#### 115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

320.255 Restrictive Housing (10/26/16)  
 320.260 Secured Housing Units (10/26/16)  
 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)

Additional supporting documentation  
 Memo from Superintendent  
 WSP Housing assignment of Offenders designated as Potential Victims

Auditor triangulated information provided reviewing policy, supporting documentation and information received during specialized staff and offender interviews to determine compliance with this standard.

Specialized interviews conducted with offenders with who reported sexual abuse in confinement or history of sexual victimization, stated that they were not housed in protective segregation involuntarily.

During this audit time frame and while on-site WSP did not involuntarily house a victim of sexual abuse in protective custody.

## REPORTING

### Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?  Yes  No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?  Yes  No

#### 115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?  Yes  No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the inmate to remain anonymous upon request?  Yes  No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?  Yes  No

#### 115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?  Yes  No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  Yes  No

## 115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

450.100 Mail for Prison Offenders (12/27/17)

450.110 Mail for Work Release Offenders (11/21/15)

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

490.850 Prison Rape Elimination Act (PREA) Response (8/02/18)

#### Additional supporting documentation

Memo from Superintendent

WAC 137-020

DOC policy excerpt – definition of legal mail to include PREA coordinator

Statewide offender handbook

PREA brochure and posters (English and Spanish)

Memorandum of Understanding (MOU) with Colorado DOC for external reporting

Memorandum from agency ADA compliance manager

Facility complaint log – methods allegations were reported

Log for allegations received by and for Colorado DOC

PREA 101 curriculum

Brochure for staff, contractors, and volunteers.

Auditor triangulated information provided reviewing policy, supporting documentation, reviewing the state-wide offender handbook, interviews with staff and offenders to determine compliance with this standard.

During on-site tour auditor of the facility the audit team observed PREA reporting posters (English and Spanish), OCVA (victim advocacy posters – English and Spanish) and the outside agency reporting Colorado form in most housing units. During facility tour audit team observed some areas which needed posters. At the end of the facility tours on day 1 and day 2 the facility PCM was notified which areas needed posters or Colorado forms. Specific areas which were missing the posters or Colorado forms were corrected by the facility and is noted in narrative/summary sections of this report. This did

not require placement on corrective action plan as the facility was able to correct prior to the interim report.

While interviewing offenders most reported that they would call the PREA reporting line, while some stated that they would feel comfortable reporting to staff. Some of the offenders who were interviewed stated that they were not aware of the "Colorado" form. Other offenders referenced the "Colorado" form during informal and formal interviews and all staff referenced the Colorado form when interviewed informally or formally.

## Standard 115.52: Exhaustion of administrative remedies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.  Yes  No  NA

#### 115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)  Yes  No  NA

- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  
 Yes    No    NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  Yes    No    NA

#### 115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  
 Yes    No    NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)  Yes    No    NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)  
 Yes    No    NA

#### 115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes    No    NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)  
 Yes    No    NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)  Yes    No    NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)  
 Yes    No    NA

- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  Yes  No  NA

### 115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
550.100 Offender Grievance Program (1/3/18)

#### Additional supporting documentation

Memo regarding handling of grievances  
Facility allegation/complaint log  
Documentation of grievance responses for random allegations received  
State-wide offender handbook

Auditor triangulated information provided reviewing policy, supporting documentation, reviewing the state-wide offender handbook and specialized interview with PCM to determine compliance with this standard.

When an offender submits an allegation through the grievance system, the grievance is forward to the PREA triage process and the offender is notified of that action via the grievance response. Offenders who submitted allegations during preparation 12 month time frame was provided for auditor review. During the audit time frame no offenders filed an emergency grievance reporting a PREA allegation.

Specialized interview with PCM further supported agency policy and compliance with this standard. During interviews with offenders they stated that they could file an allegation on a grievance.

(e) Third party grievances are accepting and will be processed as if the offender filed the grievance himself. The procedure is noted in the Offender Grievance Program Manual.

Policy 490.800 reads in part: Offender grievances, including emergency offender complaints, per DOC 550.100 Offender Grievance Program and the Offender Grievance Program Manual. Copies of grievances alleging sexual misconduct will be forwarded immediately to the applicable authority per the PREA Reporting Process attached to DOC 490.850 Prison Rape Elimination Act (PREA) Response. The offender will be notified via the grievance response that the allegation was forwarded for review for a possible PREA investigation. The PREA Coordinator/designee will notify the appropriate grievance staff of the determination on whether the allegation meets the definition of sexual misconduct. If the allegation does not, the offender may refile the grievance per DOC 550.100 Offender Grievance Program.

## **Standard 115.53: Inmate access to outside confidential support services**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### **115.53 (a)**

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?  Yes  No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?  Yes  No
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

### **115.53 (b)**

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?  Yes  No

### **115.53 (c)**

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?  Yes  No



- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

Additional supporting documentation

Poster and brochures regarding victim advocacy support (OCVA), English and Spanish

WCSAP brochure regarding statewide community based victim advocacy services

Memo regarding parameters of advocacy support in prison

In person victim advocacy services guide

Documentation of meeting with local victim advocates

Auditor triangulated information provided reviewing policy, supporting documentation and specialized interview with PCM and YWCA advocate.

Specialized telephonic interview with YWCA of Walla Walla PREA victim advocate Ms. Guardado. When a call is received that an inmate will be transported to St. Mary's Hospital, YWCA advocate is contacted to be present during the Sexual Assault Forensic Exam. The YWCA advocate began on-going telephonic offender advocacy with incarcerated survivors in 2015 and in 2016 she began meeting with clients at WSP. Currently meetings are set at a minimum of every two weeks and she meets with clients in an interview room or office in the unit the offender is housed. If one of the offender she has been meeting with transfers to another facility she will reach out to the advocate in the county where the offender will be transferring or has transferred to.

Specialized interview with PCM this auditor was able to learn more about the relationship which supported the interview with the victim advocate.

The working relationship between WSP and YWCA is exceptional. Having such a strong relationship reflects the facilities commitment to not only those who are survivors of sexual abuse while incarcerated but to all survivors of sexual abuse.

Policy 490.800 reads in part: Community Victim Advocates

Sexual assault support services may be obtained through the Office of Crime Victims Advocacy (OCVA). Offenders may call 1-855-210-2087 toll-free Monday through Friday 8:00 a.m. - 5:00 p.m. to

reach an OCVA PREA Support Specialist. Calls will not be monitored or recorded, and an IPIN will not be required. Abuse of the toll-free phone line will be reported to the Superintendent or the Work Release Administrator for action as needed. In-person consultations may be available to supplement phone based support for eligible offenders. Communication between the offender and the OCVA PREA Support Specialist is confidential and will not be disclosed unless the offender signs an authorization to release information.

## Standard 115.54: Third-party reporting

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  Yes  No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
350.550 Reporting Abuse and Neglect/ Mandatory Reporting (5/12/14)

#### Additional supporting documentation

Memo for Superintendent  
Staff, Contract Staff and Volunteer brochure and poster  
Statewide offender handbook  
Medical PREA poster (English and Spanish)  
Facility complaint log for allegations received during this audit period  
Incident Management Report System (IMRS) reports and triage to assign  
RCW 74.34.020 defining vulnerable adults  
Interagency agreement with Washington State Department of Social and Health Services (DSHS)  
Listing of offenders classified as vulnerable adults

Audit team observed PREA reporting information in public areas during facility tour. Reviewing the state-wide Offender Handbook it includes the information should an offender want to provide the reporting information to a family member, friend, etc. Auditor reviewed the agency public website which listed ways family, friends, etc. can report a PREA allegation on behalf of the offender.

Policy 490.800 reads in part: Visitors, offender family members/associates, and other community members can report allegations by calling the PREA hotline, writing a letter to the PREA Coordinator, or sending an email to [DOCPREA@doc.wa.gov](mailto:DOCPREA@doc.wa.gov).

## OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

### Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?  Yes  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?  Yes  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?  Yes  No

#### 115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?  Yes  No

#### 115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?  Yes  No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?  Yes  No

#### 115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?  Yes  No

#### 115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
350.550 Reporting Abuse and Neglect/Mandatory Reporting (6/18/18)

Additional supporting documentation

Memos for Superintendent  
Staff, Contract Staff and Volunteer brochure  
PREA zero tolerance poster  
Statewide Offender Orientation Handbook  
PREA poster for medical/mental health areas  
WSP Offender Complaint log  
RCW 74.34.020

Interagency Agreement Between The Washington State Department of Corrections and Washington State Department of Social and Health Services (DSHS) / Adult Protective Services (APS)

Auditor triangulated information which included reviewing agency policy(s), supporting documentation and information learned through specialized staff, random staff, contractor, and volunteer interviews to determine compliance with this standard.

All staff, contractors and volunteers interviewed knew their responsibility to report all allegations or suspicions of sexual abuse and sexual harassment. All custody staff stated that they would report immediately to their supervisor and that they would not share the reported information to other staff except for those that needed to know such as an investigator. Contractors and volunteers stated that they would immediately notify custody staff and would not discuss with others.

During specialized interviews with medical and mental health staff, they explained how they inform the offenders of their duty to report and the limits of confidentiality. Additionally, when mental health staff

meet with the offender it is part of the process to explain the clinicians legal obligation to report certain information.

Policy 490.850 reads in part: Information related to allegations/incidents of sexual misconduct is confidential and will only be disclosed when necessary for related treatment, investigation, and other security and management decisions.

Staff receiving any information regarding an allegation or incident of sexual misconduct must deliver the information confidentially and immediately per the PREA Reporting Process

(d) is not applicable, WSP does not house any offender under the age of 18.

## Standard 115.62: Agency protection duties

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance. WADOC policies are also available on the agency website <http://www.doc.wa.gov/corrections/prea/resources.htm>

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)

490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)

Additional supporting documentation

Memo for Superintendent

Report of all offenders who have scored potential victim during audit time frame

Examples of monitoring plans and housing assignment reviews

Documentation and response check list showing immediate action taken to address potential risk

Auditor triangulated information which included reviewing agency policy(s), supporting documentation and information learned through staff interviews to determine compliance with this standard.

During interviews with custody staff they explained what they would do if they received information that an inmate was at imminent risk of sexual abuse. Staff stated that they would separate the victim and abuser and report the information to the Shift Commander which is the procedure in agency policy.

## Standard 115.63: Reporting to other confinement facilities

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?  Yes  No

#### 115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  Yes  No

#### 115.63 (c)

- Does the agency document that it has provided such notification?  Yes  No

#### 115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation

Memos from Superintendent

List of allegations received by WSP about another facility or jurisdiction

List of allegations in which an allegation about WSP was received by another facility or jurisdiction

Random sample of documentation of notification provided

Auditor triangulated information which included reviewing agency policy(s), supporting documentation and information learned through specialized interview with Superintendent to determine compliance with this standard.

Policy 490.850 reads in part: The Appointing Authority will notify the appropriate Appointing Authority or facility administrator within 72 hours of receipt of an allegation when the alleged incident: Occurred in another Department location or another jurisdiction. Involved a staff who reports through another Appointing Authority.

Auditor reviewed proof of practice documentation which was completed within 72hrs of receiving the report. During the audit documentation time frame, WSP completed 12 notifications to other confinement facilities and received 24 notifications of allegations from other facilities or agencies.

Specialized interview with the Superintendent he explained the process of what actions he takes when sending or receiving a notification.

## Standard 115.64: Staff first responder duties

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?  
 Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?  Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?  Yes  No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?  Yes  No

#### 115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
420.365 Evidence Management for Work Release (1/1/14)  
420.375 Contraband and Evidence Handling (1/8/16)

Additional supporting documentation  
Memo from Superintendent  
First response actions brochure  
WSP PREA cases noting first responder

Auditor triangulated information which included reviewing agency policy(s), supporting documentation and information learned through staff random and specialized interviews to determine compliance with this standard.

During interviews with staff they were able to explain their role in response to a sexual abuse allegation. In addition to immediately contacting their supervisor, staff were able to explain actions they would take to keep the victim safe and separate from aggressor. They would ask that the victim not cleanse, change clothes or use toilet to help preserve evidence. The scene(s) would be secured to prevent contamination until local law enforcement arrived to process the crime scene. The supervisor would initiate PREA response protocol.

DOC 490.850 reads in part: For allegations of aggravated sexual assault, the Shift Commander/CCS/designee will initiate the Aggravated Sexual Assault Checklist (Attachment 1), and the PREA Response Team will conduct a coordinated, multidisciplinary response to the allegations.

## Standard 115.65: Coordinated response

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### 115.65 (a)



- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)

Additional supporting documentation

Memo from Superintendent

WSP PREA response plan table of contents

Auditor triangulated information which included reviewing agency policy(s), supporting documentation and information learned through staff random and specialized interviews to determine compliance with this standard.

Prior to on-site audit this lead auditor made note that the PREA response plan for WSP is located in the South, West and East Complex shift offices. While touring the facility support staff asked shift supervisors in the unit where the PREA response plan was located and if they could view it. Shift supervisors showed the support staff where it was located.

Policy 490.850 reads in part: PREA Response Plan. Each Prison, Work Release, and Field Office will maintain a PREA Response. Plan providing detailed instructions for responding to allegations of sexual misconduct. The PREA Response Plan will consist of 4 sections composed of the documents listed in PREA Response Plan Contents (Attachment 7). The plan will be maintained by the PREA Compliance Manager/Specialist: In the Shift Commander's office for Prisons.

## Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining

agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?  Yes  No

#### 115.66 (b)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Memo from Superintendent to auditor was provided which included copies of the collective bargaining agreements between the state of Washington and Teamsters Local union 117.

Teamsters Local Union 117 effective July 1, 2017 – June 30, 2019

Article 8, Discipline – auditor reviewed this section and determined that the agreement meets compliance with this standard.

The Washington State Department of Corrections is an interest only arbitration system. This process has no impact on the agency's ability to remove an alleged staff abuser from contact with any offender during the course of an investigation or upon determination of whether, and to what extent, discipline is warranted.

### Standard 115.67: Agency protection against retaliation

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?  Yes  No
- Has the agency designated which staff members or departments are charged with monitoring retaliation?  Yes  No

#### 115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?  Yes  No

#### 115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?  Yes  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?  
 Yes  No

### 115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?  
 Yes  No

### 115.67 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation

Memo from Superintendent

Sample DOC 03-503 PREA Monthly retaliation monitoring reports

Facility complaint log

Auditor triangulated information which included reviewing agency policy(s), supporting documentation and specialized interview with PCM and PREA compliance specialist to determine compliance with this standard.

WSP PREA compliance specialist monitors and maintains the facilities retaliation tracking monitoring sheet. This auditor reviewed the retaliation monitoring sheet on-site with the PREA compliance specialist who stated that she completes periodic checks with the classification counselors who meet with the offenders at a minimum of every 30 days. The review provided this auditor with additional proof of practice further supporting substantial compliance with this standard.

During interviews with random and specialized offenders they all understood that they had the right to be free from retaliation by staff or other offenders if they reported sexual abuse or cooperated with a PREA investigation.

Policy 490.860 reads in part: Retaliation against anyone for opposing or reporting sexual misconduct or participating in an investigation of such misconduct is prohibited. Individuals may be subject to disciplinary actions if found to have engaged in retaliation, failed to report such activities, or failed to

take immediate steps to prevent retaliation. Staff and offenders who cooperate with an investigation will report all concerns regarding retaliation to the Appointing Authority. The Appointing Authority will take appropriate measures to address the concerns. When an investigation of offender-on-offender sexual assault/abuse or staff sexual misconduct is initiated, the Appointing Authority/designee of the facility where the alleged victim is housed will monitor to assess indicators or reports of retaliation against alleged victims and reporters. If another Appointing Authority is assigned to investigate, s/he or his/her designee will notify the applicable Appointing Authority to initiate monitoring.

## Standard 115.68: Post-allegation protective custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)

Additional supporting documentation  
Memo from Superintendent

During this audit documentation time and while on-site WSP did not have any offenders housed in segregated or restricted housing following a report of sexual abuse.

Policy 490.820 reads in part: Placement in Administrative Segregation for more than 24 hours should only occur if no suitable alternative housing exists and will last only until alternative placement can be made. Each alternative considered, along with the reason(s) it was determined unsuitable, will be documented in a PREA Housing chrono entry. In the rare event that placement lasts more than 30 days, a review will be conducted every 30 days to determine the continued need for the placement.

Offenders on this type of placement will have access to programming and job assignments to the extent possible. When unavailable, the reason and duration will be documented in the offender's electronic file.

## INVESTIGATIONS

### Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA

#### 115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  Yes  No

#### 115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  Yes  No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?  
 Yes  No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  Yes  No

#### 115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?  Yes  No

#### 115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?  Yes  No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?  Yes  No

#### 115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  Yes  No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?  Yes  No

#### 115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?  Yes  No

#### 115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?  Yes  No

#### 115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?  Yes  No

#### 115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?  Yes  No

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

400.360 Polygraph Testing of Offenders (2/9/15)  
420.365 Evidence Management for Work Release (1/1/14)  
420.375 Contraband and Evidence Handling (1/8/16)  
490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

### Additional supporting documentation

- Memos from Superintendent
- Facility case listing for all investigations opened or closed during audit documentation period
- Washington State Department of Corrections master log of trained investigators
- Examples of training records for random investigators
- Examples of investigation reports
- Law enforcement referral log detailing allegations and outcomes of referrals
- Investigator curriculum
- Mutual aid agreement established with the Washington State Patrol
- Screen shots of WADOC public website
- Appointing authority training curriculum related to law enforcement investigations
- Local Review Committee tracking
- State Records Retention Schedule

Auditor triangulated information which included reviewing agency policy(s), supporting documentation, packets of closed allegations for audit documentation time frame and specialized interview with facility investigators and Superintendent to determine compliance with this standard.

Auditor received offender letter regarding his PREA allegation upon returning from on-site audit. This auditor had not received the investigation and reached out to agency PREA coordinator who advised that this was an open investigation which had been referred to local law enforcement for investigation. Auditor was provided with a copy of the initial report, referral to mental health and retaliation tracking information. October 11, 2018 this auditor had a teleconference to discuss the status of the investigation with Superintendent, agency PREA coordinator, WSP PCM and audit team support staff member.

WADOC only conducts administrative investigations in which Garrity would apply if the allegation involves a staff member.



Criminal Investigations are completed by Walla Walla Police Department. Should Walla Walla Police Department decline to conduct the criminal investigation, the Appointing Authority or designee would complete a referral to the Washington State Patrol.

Two facility investigators that were interviewed were able to explain the investigation process for administrative investigations. Investigators are fact finders and through the gathering of evidence (if any) and interviews with victim, suspect and any witness's they write a report stating the facts of the case. Once the investigation has been completed the report is submitted to the facility PCM for review. After the review by the PCM has been completed, the case is reviewed with the Appointing Authority. The Appointing Authority determines if the investigation meets preponderance of evidence (51% or more) to substantiate a case closure finding. If the investigation resulted in less than preponderance of evidence the case closure finding would be unsubstantiated. If the allegation was determined not to have occurred this would be closed as unfounded. Investigators stated that investigations will continue even if the offender or staff member was no longer at WSP.

Policy 490.860 reads in part: The Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department. Investigations will be completed even if the offender is no longer under Department jurisdiction or authority and/or the accused staff, if any, is no longer employed by or providing services to the Department. Allegations may be referred to law enforcement agencies for criminal investigation.

## **Standard 115.72: Evidentiary standard for administrative investigations**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.72 (a)**

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?  Yes  No

#### **Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation  
Memos from Superintendent

RCW 72.09.225 regarding actions to be taken with employees or contractors who have engaged in sexual contact with offenders  
Appointing Authority curriculum  
Facility case datasheet

Auditor triangulated information which included reviewing agency policy(s), supporting documentation, closed investigations and specialized interview with Superintendent to determine compliance with this standard.

The Appointing Authority determines if the investigation meets preponderance of evidence (51% or more) to substantiate a case closure finding. If the investigation resulted in less than preponderance of evidence the case closure finding would be unsubstantiated. If determined that the allegation could not have occurred this would be closed as unfounded.

Policy 490.860 reads in part: For each allegation in the report, the Appointing Authority will determine whether the allegation substantiated. The allegation was determined to have occurred by a preponderance of the evidence.

## Standard 115.73: Reporting to inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  Yes  No

#### 115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  Yes  No  NA

#### 115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate's unit?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate

has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Yes  No

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  Yes  No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (e)

- Does the agency document all such notifications or attempted notifications?  Yes  No

#### 115.73 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation  
Memos from Superintendent  
Facility case data sheet

Law enforcement referral log  
Documentation of applicable offender notifications regarding staff sex

Auditor triangulated information which included reviewing agency policy(s), supporting documentation, closed investigations and specialized interview with Superintendent to determine compliance with this standard.

Auditor was provided with investigation reports packets which included notifications to offenders when allegations had been completed.

Policy 490.860 reads in part: Once the Appointing Authority has made a determination, the alleged victim will be notified of the findings. The Appointing Authority/designee of the facility where the offender is housed will inform the offender of the findings in person, in a confidential manner. Notification may be provided in writing if the offender is in restrictive housing. If the offender has been released, the Appointing Authority will inform the offender of the findings in writing to the offender's last known address as documented in his/her electronic file.

## DISCIPLINE

### Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  Yes  No

#### 115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  Yes  No

#### 115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?  Yes  No

#### 115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

450.050 Prohibited Contact (11/21/15)

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation

Memo from Superintendent

RCW 72.09.225 state law regarding Custodial Sexual Misconduct

WAC 357-40-010 disciplinary actions Appointing Authorities may take

Memorandum from agency Secretary regarding WADOC disciplinary processes and presumptive discipline

Collective Bargaining Agreement – Teamsters Local Union 117

Auditor triangulated information which included reviewing agency policy(s), supporting documentation, closed investigations and specialized interview with Superintendent to determine compliance with this standard.

During the audit time frame there was one substantiated allegation involving a staff member, however the employee resigned during the open investigation.

Policy 490.860 reads in part: When a substantiated allegation is criminal in nature, the Appointing Authority/designee will notify Law enforcement, unless such referral was made previously during the course of the investigation, and Relevant licensing bodies.

Policy 450.050 Restriction Process for Staff Sexual Misconduct/Harassment. Presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender, except an offender who is the staff's non-victim family member, are as follows: Substantiated allegations of sexual intercourse, as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting, will result in: Permanent restriction on visitation, which may be appealed after 3 years. An 18 month restriction on telephone and mail communication, including eMessaging. All other substantiated allegations of staff sexual misconduct will result in a one year restriction on telephone and mail communication, including eMessaging, and a 2 year restriction on visitation. At the

time the allegation is substantiated, the Appointing Authority will ensure notification is made to the mailroom, Visiting, and the Intelligence Officer to ensure the restrictions are put in place. With Deputy Director or Work Release/Residential Administrator approval, the Appointing Authority may grant a request for an exception to the presumptive restrictions, but only when extraordinary circumstances support the request and granting the requested exception will not undermine the Department's zero tolerance of all forms of sexual misconduct. Before exception or lifting of restriction will be considered, the offender must submit a signed DOC 21-067 Request for Visitation/Release, confirming s/he is freely participating in communication with the individual. Appointing Authorities will consult with the Deputy Secretary for possible pursuit of a no contact order between the individual and the offender.

## Standard 115.77: Corrective action for contractors and volunteers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  Yes  No

#### 115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

450.050 Prohibited Contact (11/21/15)

## 490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

### Additional supporting documentation

Memo from Superintendent

RCW 72.09.225 state law regarding Custodial Sexual Misconduct

Memo regarding termination of volunteers with applicable criminal backgrounds

During this audit time frame WSP did not have any substantiated investigations involving contractors or volunteers.

Policy 490.860 reads in part: When a substantiated allegation is criminal in nature, the Appointing Authority/designee will notify Law enforcement, unless such referral was made previously during the course of the investigation, and Relevant licensing bodies.

Policy 450.050 Restriction Process for Staff Sexual Misconduct/Harassment. Presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender, except an offender who is the staff's non-victim family member, are as follows: Substantiated allegations of sexual intercourse, as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting, will result in: Permanent restriction on visitation, which may be appealed after 3 years. An 18 month restriction on telephone and mail communication, including eMessaging. All other substantiated allegations of staff sexual misconduct will result in a one year restriction on telephone and mail communication, including eMessaging, and a 2 year restriction on visitation. At the time the allegation is substantiated, the Appointing Authority will ensure notification is made to the mailroom, Visiting, and the Intelligence Officer to ensure the restrictions are put in place. With Deputy Director or Work Release/Residential Administrator approval, the Appointing Authority may grant a request for an exception to the presumptive restrictions, but only when extraordinary circumstances support the request and granting the requested exception will not undermine the Department's zero tolerance of all forms of sexual misconduct. Before exception or lifting of restriction will be considered, the offender must submit a signed DOC 21-067 Request for Visitation/Release, confirming s/he is freely participating in communication with the individual. Appointing Authorities will consult with the Deputy Secretary for possible pursuit of a no contact order between the individual and the offender.

## Standard 115.78: Disciplinary sanctions for inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?  Yes  No

#### 115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?  Yes  No

#### 115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?  Yes  No

#### 115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?  Yes  No

#### 115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?  Yes  No

#### 115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?  Yes  No

#### 115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)  
 Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

460.000 Disciplinary Process for Prisons (6/1/18)

450.050 Prohibited Contact (11/21/15)

460.135 Disciplinary Procedures for Work Release (5/24/16)

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)



## 490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

### Additional supporting documentation

Memo from Superintendent

WAC 137-28, WAC 137-28-310, WAC 137-28-360, WAC 137-25-020; detailing offender disciplinary process

Facility case data sheet

Documentation of offender discipline for substantiated PREA investigations

Documentation of offender discipline for infractions

During the audit documentation time frame six (6) offenders received disciplinary infractions for substantiated allegations of inmate on inmate sexual harassment. One (1) offender was not disciplined based on the mental health of the suspect.

Policy 490.860 reads in part: Offender Discipline - Prison and Work Release offenders may be subject to disciplinary action per DOC 460.050 Disciplinary Sanctions or DOC 460.135 Disciplinary Procedures for Work Release for violating Department PREA policies. For substantiated allegations against an offender, an infraction must be written against the perpetrator for the applicable violation listed: 635 - Committing sexual assault against another offender, as defined in Department policy (i.e., aggravated sexual assault or offender-on-offender sexual assault) 637 - Committing sexual abuse against another offender, as defined in Department policy 659 - Committing Sexual harassment against another offender, as defined in Department policy.

## MEDICAL AND MENTAL CARE

### Standard 115.81: Medical and mental health screenings; history of sexual abuse

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)  
 Yes  No  NA

#### 115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)  Yes  No  NA

#### 115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?  Yes  No

#### 115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?  Yes  No

#### 115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)

630.500 Mental Health Services (4/28/17)

610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct

#### Additional supporting documentation

Memo from Superintendent

Listing of offenders who required referral to mental health

Examples of 13-509 PREA Mental Health Notification forms for offenders who declined or requested follow up meeting

Health information management protocols

Random sample of incoming transport / job screening checklists

Auditor triangulated information provided reviewing policy, supporting documentation, specialized interviews with staff and random interviews with offenders to determine compliance with this standard.

While the policy and interviews with staff supported that mental health referrals were completed during intake, the mental health referral form provided for the supporting documentation for proof of practice found that there were some offenders who said yes to sexual abuse who were not referred at that time of intake.

During the audit time frame the facility identified some offenders that were received during intake who had not been offered mental health pursuant to 115.41. Once the deficiency was identified the facility took action and made substantial improvements prior to on-site visit audit. With the deficiency being identified during the audit time frame this auditor requested to monitor for another minimum of 3 months to further support maintained compliance. Corrective action taken is noted in the corrective action summary of this report.

(c) is not applicable

## **Standard 115.82: Access to emergency medical and mental health services**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.82 (a)**

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?  
 Yes  No

#### **115.82 (b)**

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?  Yes  No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  Yes  No

#### **115.82 (c)**

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?  Yes  No

#### **115.82 (d)**

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  
 Yes  No

### **Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
600.000 Health Services Management (8/25/14)  
600.025 Health Care Co-Payment Program (7/24/15)  
610.300 Health Services for Work Release Offenders (6/22/15)

Additional supporting documentation

Memo from Superintendent

Aggravated Sexual Assault Checklist and health services documentation

Documentation of offender's trust account demonstrating offenders are not charged for services.

Auditor triangulated information which included reviewing agency policy(s), supporting documentation, closed investigations and specialized interviews with medical and mental health staff to determine compliance with this standard.

During interviews with medical and mental health staff they stated that evaluations and treatments plans are completed to include referrals for continued care. All staff stated that offenders receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

Policy 490.850 reads in part: Medical and mental health services - All medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender.

- Forensic exams will be performed only at designated health care facilities in the community by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. If a SAFE/SANE is not available, the examination can be performed by a qualified medical practitioner.

Policy 600.000 reads in part: Medical and mental health services allowed under the Offender Health Plan related to sexual misconduct as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting will be provided at no cost to the offender.

Policy 610.300 reads in part: Offenders who are victims of sexual misconduct which took place while incarcerated will receive information and access to services and treatment for sexually transmitted infections (STIs) and emergency contraception as medically appropriate

## Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  Yes  No

### 115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?  Yes  No

### 115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care?  Yes  No

### 115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)  Yes  No  NA

### 115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)  Yes  No  NA

### 115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?  Yes  No

### 115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  Yes  No

### 115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)  
 Yes    No    NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
600.000 Health Services Management (8/25/14)  
600.025 Health Care Co-Payment Program (7/24/15)  
610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct (10/14/16)  
610.040 Health Screenings and Assessments (6/12/18)  
610.300 Health Services for Work Release Offenders (6/22/15)  
630.500 Mental Health Services (4/28/17)

#### Additional supporting documentation

Memo from Superintendent  
Documentation of referral and follow-up with medical/mental health  
Offender Health Plan documenting services provided to offenders  
Documentation of completion of Mental Health evaluation

Auditor triangulated information which included reviewing agency policy(s), supporting documentation, closed investigations and specialized interviews with medical and mental health staff to determine compliance with this standard.

During interviews with medical and mental health staff they stated that evaluations and treatments plans are completed to include referrals for continued care. All staff stated that offenders receive the same level of care within WSP and that it is consistent with the community level of care. Referrals to mental health are completed for both victim and abusers.

During on-site visit this auditor was conducting a specialized interview with an offender and during discussion this auditor felt the offender may need to talk with someone. The auditor asked the offender if he would like to see someone from mental health or arrange a meeting with the advocate. The offender stated that he already meets with mental health staff at WSP who he has a good rapport with and he was interested in also speaking to the advocate. At the conclusion of the interview this auditor spoke with staff to have someone meet with him that day and a call was placed to OCVA.

Elements (d) and (e) are not applicable as WSP does not house female offenders.

Policy 490.850 reads in part: Medical and mental health services - All medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender.

Policy 600.000 reads in part: Medical and mental health services allowed under the Offender Health Plan related to sexual misconduct as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting will be provided at no cost to the offender.

Policy 630.500 reads in part: A mental health provider will assess the need for mental health services in cases where the offender reports sexual abuse or has been identified as a victim or perpetrator of sexual abuse and is requesting mental health services.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?  Yes  No

#### 115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation?  Yes  No

#### 115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?  Yes  No

#### 115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?  Yes  No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?  Yes  No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  Yes  No

- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?  Yes  No

### 115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation

Memo from Superintendent

Spread sheet listing cases for this audit documentation time frame

HQ Local Review Committee log

Auditor triangulated information which included reviewing agency policy(s), supporting documentation, closed investigations and specialized interview with Associate superintendent to determine compliance with this standard.

Auditor reviewed closed investigation reports which included the Local Review Committee reviews (sexual abuse incident review). Specialized interviewed conducted with one of the two Associate Superintendents, who is one of the committee member for local review. During the interview he stated that they do consider wither the incident or allegation was motivated by race; ethnicity; gender identity; lesbian/ gay, bisexual, transgender, or intersex identification status, or perceived status; or gang affiliation. The committee members also examine that area and look at the staffing level and if they do



not have monitoring technology in the area. Currently WSP has submitted request for legislative approval for new video monitoring or upgrades to current equipment.

Policy 490.860 reads in part: Multidisciplinary PREA Review - For each substantiated or unsubstantiated finding of offender-on-offender sexual assault/abuse and staff sexual misconduct, the Appointing Authority/designee will convene a local PREA Review Committee to examine the case. Unfounded investigations and any investigation of sexual harassment may be reviewed at the discretion of the Appointing Authority. For Prisons, if the Superintendent of the facility where the allegation took place is not the Appointing Authority, the Superintendent or his/her designee will be on the committee. The committee will meet every 30 days, or as needed. The committee will be multidisciplinary and include facility management, with input from supervisors, investigators, and medical/mental health practitioners. Hearing Officers cannot serve as a PREA Review Committee member for any violation(s) for which they conducted the hearing. The committee will review policy compliance, causal factors, and systemic issues using DOC 02-383 Local PREA Investigation Review Checklist.

## Standard 115.87: Data collection

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  Yes  No

#### 115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?  Yes  No

#### 115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?  Yes  No

#### 115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?  Yes  No

#### 115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)  Yes  No  NA

#### 115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)  
 Yes    No    NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policies related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.800 Prison Rape Elimination Act (PERA) Prevention and Reporting (5/22/18)  
 490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation  
 Memo from Superintendent  
 Most recent Survey of Sexual Victimization Summary

Auditor reviewed agency public website  
<http://www.doc.wa.gov/corrections/prea/resources.htm/corrections/prea/resources.htm>. Agency has annual reports posted beginning year 2013 up to current DOJ BJS reporting year of 2017. Review of 2017 annual report confirmed compliance with this standard.

Auditor reviewed agency policies which meet compliance with this standard. The agency PREA coordinator collects data for allegations of sexual misconduct and aggregates information annually.

During specialized interview with agency PREA coordinator who stated that at the end of the calendar year data gets summarized, sent to each facility for additional information. Each division within the facilities will review and update areas if they had any changes during the current year. February of the next calendar year data from the previous year is pulled to complete the annual report.

(e) not applicable as WADOC does not have offenders located in a private facility.

## Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?  Yes  No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?  Yes  No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?  Yes  No

#### 115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?  Yes  No

#### 115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?  Yes  No

#### 115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation

During specialized interview with agency PREA coordinator who stated that at the end of the calendar year data gets summarized, sent to each facility for additional information. Each division within the facilities will review and update areas if they had any changes during the current year. February of the next calendar year data from the previous year is pulled to complete the annual report.

DOC 490.860 C. reads: The PREA Coordinator will generate an annual report of findings. The report will include: An analysis of PREA prevention and response for the Department and for each facility, including high-level summary information and detailed facility data analysis. Findings and corrective actions at facility and Department levels. An assessment of the Department's progress in addressing sexual misconduct, including a comparison with data and corrective actions from previous years. The report requires Secretary approval. Approved reports will be made available to the public through the Department website. Information may be redacted from the report when publication would present a clear and specific threat to facility security, but the report must indicate the nature of the material redacted.

## Standard 115.89: Data storage, publication, and destruction

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  
 Yes  No

#### 115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?  Yes  No

#### 115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  Yes  No

#### 115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The State of Washington Department of Corrections (WADOC) has the following policy related to and meeting compliance with this standard. Auditor was provided with policies and applicable supporting documentation which was reviewed for standard compliance.

490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)  
280.310 Information Technology Security (11/27/17)  
280.515 Electronic Data Classification (8/22/11)

Additional supporting documentation

Memo from Superintendent  
Screen shot of agency's external website – PREA  
State Records Retention Schedule

Auditor reviewed agency policies which meet compliance with this standard. The agency PREA coordinator collects data for allegations of sexual misconduct and aggregates information annually.

The agency policy, Appointing Authority and agency PREA coordinator adhere and maintain all records associated with allegations of sexual misconduct according to the Records Retention schedule. The Appointing Authority will maintain the original PREA case record and the agency PREA coordinator maintains an electronic file. This auditor reviewed the Office of the Secretary of State (SOS) Washington State Archives, Department of Corrections Records Retention Schedule (December 2013) to determine compliance. Disposition authority number (DAN) 13-09-68455 investigations – Prison Rape Elimination Act (PREA). Retention and disposition action: Retain for 50 years after close of investigation then destroy.

Prior to destruction, investigation files will be reviewed to ensure the accused has been release from incarceration or Department employment for a minimum of 5 years.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.401 (a)

- During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (*Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.*)  Yes  No

#### 115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a “no” response does not impact overall compliance with this standard.*)  Yes  No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.)  Yes  No  NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.)  Yes  No  NA

#### 115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?  Yes  No

#### 115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Yes  No

#### 115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  Yes  No

#### 115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

WADOC started being audited for PREA compliance in 2014 upon DOJ auditors being trained and certified. Since 2014 WADOC has ensured that 1/3 of their facilities were audited during each audit cycle. This was verified by reviewing the agency public website <http://www.doc.wa.gov/corrections/prea/resources.htm/corrections/prea/resources.htm>.

This auditor was provided with PREA audit questionnaire, agency policies and proof of practice documentation if applicable via USB prior to on-site audit.

During on-site audit the PREA audit team had access to and observed all areas of the facility. The agency PREA coordinator and WSP PREA compliance manager were extremely helpful and provided information and documentation to the team. This auditor followed the auditor handbook for offender sampling interview requirements of interviews and utilized interview protocols as a guide when completing staff and offender interviews.

Auditor did receive correspondence which was sent as if there were communicating with legal counsel.

(o) Specialized interview was conducted with community victim advocate. During the interview advocate spoke very highly of the relationship between her and the WSP staff. She also spoke of how much of an improvement she has seen with the culture change over the last two (2) years of her coming into WSP to meet with incarcerated survivors.

## Standard 115.403: Audit contents and findings

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

Auditor reviewed agency public website <http://www.doc.wa.gov/corrections/prea/resources.htm/corrections/prea/resources.htm>. Audit reports were posted prior to 90 days of the issuance of the final report and all facilities were audited in compliance with the standards.



## AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

*Deborah Striplin*

May 16, 2019

**Auditor Signature**

**Date**