




STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS
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February 4, 2022

TO: All WCC Staff
All WCC Incarcerated Population

FROM: Shawn Brooks, Incident Commander 

SUBJECT: WCC COVID-19 Update and FAQ

January 6, 2022, Washington Corrections Center (WCC) was placed on Facility Wide Outbreak status and began testing the entire population. Since then, every living unit has been regularly tested in an orderly fashion. Due to delays in receiving test results from the lab, WCC has recently transitioned to the use of Rapid-Antigen Tests. As of February 3, 2022, WCC has had 1005 positive COVID-19 cases within the incarcerated population in the last 30 days, of which 326 are active.

We continue to follow the [Prisons Division Cluster and Outbreak Checklist](#) and remain in restricted movement at this time.

WCC has resumed the classification process for individuals who have been medically cleared. Additionally, inter-facility transports have also resumed for specific individuals as cleared by medical.

Under the advisement of DOC Medical, WCC has been conducting in-unit moves in specifically identified living areas that are hoped to limit further viral spread. Not only does this effort reduce the risk of the population being exposed to the virus that causes COVID-19, but potentially shortens the time the unit will be required to quarantine. The sooner individuals stop testing positive for COVID-19, the sooner the unit can return to normal operations.

Over the next week, every living unit will continue to be administered COVID-19 tests in a systematic fashion, based on an area's identified risk.

Unit statuses are as follows:

- R-1 is on Quarantine Status.
- R-2 A, B, C, F, and G Tiers are on Quarantine Status. D, E, and H Tiers are cleared.
- R-3 is on Quarantine Status.
- R-4 is on Quarantine Status.
- R-5 A/B tiers are on Quarantine Status. R-5 C/D, E/F, G/H tiers are on Medical Isolation Status.

- R-6 A/B, C/D tiers are on Medical Isolation Status. R-6 E/F, G/H tiers are on Quarantine Status.
- Evergreen Hall been placed on Quarantine Status.
- Cedar Hall is on Quarantine Status.
- IMU A and B Tiers are on Medical Isolation status. IMU C, D, E, and F Tiers are on Quarantine Status.
- The RDCF is on Medical Isolation Status.
- G-Unit is on Medical Isolation Status.

It is imperative that everyone continue to wear a surgical mask or appropriate [personal protective equipment \(PPE\)](#). Similarly, it is vital that we continue to follow the [Centers for Disease Control \(CDC\) guidelines](#): ensuring to follow the six (6) foot physical-distancing rule, washing your hands, and keeping high-touch areas of the facility sanitized.

Corrections is committed to everyone's safety. We will continue to communicate with you as we progress through this pandemic.

February 1, 2022 WA DOC Frequently Asked Questions

The following are questions received by the Office of the Corrections Ombuds and provided to the Washington State Department of Corrections for response. We thank the OCO for collecting these FAQ.

1. Can DOC explain what guidelines it's following for quarantine and isolation? Does DOC follow CDC guidelines?

CDC currently recommends a 10-day isolation and 10-day quarantine for residents, regardless of vaccination and booster status in their updated guidance which can be viewed, here: <https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html>. DOC works in collaboration with Washington State Department of Health to regularly update quarantine and isolation protocols. Currently, DOC uses the 10-day guidance for most individuals in isolation and quarantine. However, unvaccinated individuals continue to isolate for 14 days, due to the concern for longer periods of being infectious. A rapid test is being done at the end of isolation to help guide clearance and evaluate the timeframes selected. The guidance changes frequently, and DOC is constantly adapting.

2. What is the status of DOC's consideration of allowing Incarcerated Individuals to receive credit of some nature for time spent in quarantine or isolation such as restoration of good conduct time?

Unfortunately, DOC is not able to grant restoration of earned time. Earned time is strictly dictated by RCW, WAC and DOC policy. It is not within the Secretary's powers to award earned time to individuals for circumstances outside of the confines of RCW 9.94A.729, RCW 72.09.130, WAC 137.30, DOC Policy 350.100. DOC continues to talk with incarcerated individuals, the Statewide Family Council and others to identify ways to make the long periods of restricted movement less difficult.

3. What is DOC's current policy and procedure for staff and incarcerated individual testing? How will DOC ensure the incarcerated individuals are promptly provided the results of their tests?

We have specific criteria outlined for testing of all staff and incarcerated individuals. Also, we may test more frequently based on number of positive results and type of setting. Our headquarters medical staff are in daily communication with each facility to strategize and approach the care for the health and safety of those in our custody.

Incarcerated Testing

All testing of incarcerated individuals is directed by DOC's COVID-19 Screening, Testing, and Infection Control Guideline, currently on version 30, for the following situations:

- When an incarcerated individual is experiencing symptoms of COVID.
- When there has been close contact with confirmed COVID cases.
- When there are confirmed COVID cases in living units and work areas among other incarcerated individuals or staff.
- Prior to transfer between DOC facilities or units.
- Prior to routine medical procedures when required by the provider.

DOC sends all PCR testing out to DOH contracted laboratories across the state. DOC Health Services shares test results with individuals as soon as possible after receiving them. When the DOC has to test an entire unit or facility, sometimes individual test results for those testing negative are delayed so that the DOC can address positive test results in a timely way.

Staff Testing:

All testing and screening of staff members is directed by DOC's Safe Start Plan, currently on version 6. The detailed screening process is also outlined in the Safe Start Plan. Staff who work in prisons are serial tested by Polymerase Chain Reaction (PCR) test once weekly as part of routine prison operations.

Staff may also be rapid antigen tested for the following reasons:

- Returning to work after a medical isolation period of 10 days
- Returning to work after close contact
- If they are a staff member who is traveling to a facility who does not participate in weekly serial testing
- Returning to work after traveling out of state on public transportation
- Response testing during facility outbreaks and/or clusters

4. What is the DOC plan for addressing the food issues at the facilities? What is the DOC plan for ensuring there is not an excessive wait for food and that hot meals are not cold when provided?

DOC continues to experience shortages such as CI food workers, DOC staff and vendor issues that can impact timing and quality of food service. Here are some of the steps we are taking to address food in our facilities.

- Most food service operations will be purchasing additional durable compartment trays and thermal carriers to better support mealtimes in these areas.
- DOC has diverted staff from non-essential operations and provided additional DOC staff resources to ensure food delivery continues.
- Food Service Administration is working with National Food Vendors on a daily basis to procure alternative 'ease-of-use' food items to assist the meal plans developed/directed by the local Incident Command Teams.

- Measures have been taken at locations that have experienced long wait times and cooled food to prevent those circumstances from happening again.
- At all locations, Food Services teams are working diligently to ensure all daily nutritional needs are met.

5. What is DOC doing to ensure non-COVID medical services are being provided and ensuring medical appointments are being scheduled?

There is a shortage of health care resources across the state. That impacts the care that can be provided in the community to all Washington citizens. The shortage in health care staff also impacts non-emergent care in the DOC facilities. Some elective and non-urgent medical care may be deferred while facilities are in outbreak status. This is necessary to ensure that Health Services resources are available to respond to COVID-19. In those cases where care is deferred, urgent and emergent medical care remain available to patients with non-COVID related problems.