

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: January 31, 2018

Auditor Information			
Auditor name: Jillian Shane			
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Email: Jillian.Shane@state.nm.us			
Telephone number: 505-383-2993			
Date of facility visit: September 25-26, 2017			
Facility Information			
Facility name: Olympic Corrections Center			
Facility physical address: 11235 Hoh Mainline, Forks, Washington 98331			
Facility mailing address: (if different from above) Same			
Facility telephone number: 503-562-0099			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Jason Bennett			
Number of staff assigned to the facility in the last 12 months: 117			
Designed facility capacity: 400			
Current population of facility: 377			
Facility security levels/inmate custody levels: Minimum custody			
Age range of the population: 18-65			
Name of PREA Compliance Manager: Lori Lawson		Title: Correctional Program Manager	
Email address: lklawson@doc1.wa.gov		Telephone number: 360-374-8323	
Agency Information			
Name of agency: Washington State Department of Corrections			
Governing authority or parent agency: (if applicable) Washington State Governor's Office			
Physical address: 7345 Linderson Way SW, Tumwater, Washington 985201			
Mailing address: (if different from above) PO Box 41100, Mail Stop 41100 Olympia, Washington 98504			
Telephone number: 360-725-8213			
Agency Chief Executive Officer			
Name: Stephen D. Sinclair		Title: DOC Secretary	
Email address: sdsinclair@doc1.wa.gov		Telephone number: 360-725-8810	
Agency-Wide PREA Coordinator			
Name: Beth L. Schubach		Title: PREA Coordinator	
Email address: blschubach1@doc1.wa.gov		Telephone number: 360-725-8789	

AUDIT FINDINGS

NARRATIVE

Jillian Shane, a U.S. Department of Justice (USDOJ) Certified PREA Auditor conducted the Prison Rape Elimination Act (PREA) on-site audit of the Olympic Corrections Center on September 25 and 26th, 2017. OCC is operated by the Washington Department of Corrections (WADOC). The audit was conducted with the assistance of support staff Bernadette Deats and Robin Bruck. Jillian Shane conducted the documentation review, informal interviews with random staff and inmates, interviews with specialized staff and a portion of the random staff and authored this report. The audit teams conducted the site review together.

The auditor was provided with the Notification of Audit on 07/31/2017 that the facility stated was posted in all housing units and common areas for both staff and inmates to see and utilize. The Notification stated

“ During the following period, this facility will be undergoing an audit for compliance with the U.S. Department of Justice’s National PREA Standards to Prevent, Detect and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) Standards for Prisons and Jails:

September 25-29, 2017

Any person with information relevant to this compliance audit may confidentially* correspond with the auditor by writing to:

Jillian Shane, 615 First Street, Albuquerque, New Mexico

*CONFIDENTIALITY: All written and verbal correspondence and disclosures provided to the auditor are confidential and will not be disclosed unless required by law. There are exceptions when confidentiality must legally be breached. Exceptions include, but are not limited to:

If the person is in immediate danger to her/himself or others (e.g., suicide, homicide)
Allegations of suspected child abuse, neglect or mistreatment;
In legal procedures where information has been subpoenaed by a court of appropriate jurisdiction.

Any correspondence should be clearly identified as “LEGAL MAIL” and handled per DOC 450.100 Mail for Prison Offenders / DOC 450.110 Mail for Work Release Offenders.

cc: Facility Mailroom”

During the facility site review, the audit team observed the posting in all housing areas and throughout the facility in all inmates, visitor and staff assessable areas, providing each an opportunity to contact the auditor. The auditor received zero inmate or staff correspondence prior to the audit.

On 08/09/2017, the auditor received an encrypted flash drive containing all relevant documentation pertaining to the PREA standards and the audit. This included (but is not limited to) the pre-audit questionnaire (PAQ), Agency and facility policies, procedures, memorandums of understanding, contracts, inmate posters and handbooks, memorandums for each standard from the Superintendent, and training documentation. Prior to the on-site review, the auditor reviewed all submitted documentation. In addition, prior to the on-site review, the auditor exchanged numerous emails with the PREA Compliance Manager (PCM) and the Agency PREA Coordinator as they related to follow up questions and concerns regarding the received documentation. The auditor also reviewed the OCC PREA Audit report from their first PREA audit and the WADOC 2015 Annual Assessment and Survey of Sexual Victimization.

Upon entry to the facility, the Audit Team was provided with rosters of all staff and inmates currently in the PREA Audit Report

facility. In addition, specialized rosters were provided that detailed staff on all three shifts. These were used to select the random staff and inmate interviews.

OCC employs approximately 117 staff in both security and non-security functions. In total 17 random staff were interviewed, to include staff on all three shifts and some non-security staff on a Monday through Friday schedule. Staff interviewed while on-site included individuals from each housing area and programming area and were all randomly selected by the audit team.

A telephone interview was conducted by the Auditor with Secretary of Corrections, Stephen Sinclair. During the interview, not only did he answer each question required to be asked, he also spoke in detail of various processes as they related to PREA in terms of investigations, use of data and use of segregation. It was evident to the Auditor that Mr. Sinclair is well versed in his agency processes and policies.

A telephone interview was also conducted with the both Forks Abuse Program who services the facility and the advocate who answers all offender telephone calls via the hotline. Both were extremely complementary regarding the facility and its operations. In addition, both spoke of the excellent partnership that exists between them. The auditor confirmed and discussed the agreement which is in place with WADOC to provide SANE access, advocacy and sexual abuse crisis intervention services to incarcerated survivors. The hotline staff told the auditor that numerous offenders utilize the line for services, to include sexual abuse that may have occurred prior to incarceration. The SANE Coordinator for Forks Abuse Program who was interviewed was the Director, Ann Simpson.

The inmate population on the first day of the on-site audit was 377. A total of 33 random inmates were interviewed. These selections included at least two inmates from each housing unit and inmates from each specialized category that were available. The facility reported to the auditor that there were no inmates who were youthful offenders, no inmates with physical disabilities, who were blind, deaf or hard of hearing or LEP, no inmates with cognitive disabilities, no inmates who identified as LGBTI, and no inmates who were segregated for a high risk of victimization.

The Audit Team was also provided a list for each of the required specialty staff and inmate grouping. For the inmate population, these lists included those inmates identified as high risk, those who reported victimization during their risk assessment, and inmates who have reported sexual abuse or harassment. The facility reported that there was currently no inmates who identified as lesbian, gay, bisexual, transgender or intersex, there were no Limited English Proficient inmates, no inmates that were deaf, blind or had limited hearing and no inmates with physical disabilities.

An entrance meeting was conducted in the Superintendents Conference Room. This meeting included: Jason Bennett, Superintendent
Lori Lawson, Correctional Program Manager / PREA Compliance Manager
Scott Speer, Lieutenant
Tracy Hixson, Corrections Specialist / PREA Compliance Specialist
Beth Schubach, Agency PREA Coordinator
Jillian Shane, USDOJ Certified PREA Auditor
Robin Bruck, Support Staff
Bernadette Deats, Support Staff

The audit team was given a tour of all areas of the facility, including the outlying buildings where inmates may be assigned for work details. The Superintendent, PCM, Lieutenant were present for the entire tour. As we entered each area, the Department Heads greeted us and walked us through their area. The audit team spoke informally with staff and inmates during the tour. The team also paid specific attention to the facility's camera placement, monitoring capabilities, mirror placement, and areas of potential opposite gender viewing.

During the facility tour, the audit team advised the staff of a few areas that could possibly be a blind spot or an area of limited viewing. The staff was extremely responsive and immediately submitted work orders to add mirrors to increase visibility for staff. In addition, a few locks were seen that could possibly allow for inmates to lock themselves in an area thus creating an area for staff to not be able to quickly respond in the event of an incident. Again, the staff was extremely responsive and quick in creating work orders to remove areas with locks (these were mostly inmate restroom areas). The audit team noted that shower areas and most restroom areas allowed for inmates to perform bodily functions without being viewed by members of the opposite gender who are staff. Strip search areas were also reviewed and provided appropriate security precautions while prohibiting the viewing of staff of the opposite gender from viewing.

A telephone interview was conducted by the Auditor with Secretary of Corrections, Steven Sinclair. During the interview, not only did he answer each question required to be asked, he also spoke in detail of various processes as they related to PREA in terms of investigations, use of data and use of segregation. It was evident to the Auditor that Mr. Sinclair is well versed in his agency processes and policies.

An out-brief was conducted in the Superintendent's Conference room to review some areas identified for further review and complete a further request for documentation and lastly, to highlight the areas of the facility/PREA standards that stood out as exceeding the standards. The staff included in this meeting included:

Jason Bennett, Superintendent
Lori Lawson, Correctional Program Manager / PREA Compliance Manager
Scott Speer, Lieutenant
Ginger Price, Security Specialist
Teresa Anderson, Correctional Unit Supervisor
Jamie Kerschner, Correctional Unit Supervisor
Mark Thomas, Correctional Unit Supervisor
Tracy Hixson, Corrections Specialist / PREA Compliance Specialist
Carol Hanson, Administrative Assistant
Beth Schubach, Agency PREA Coordinator
Jillian Shane, USDOJ Certified PREA Auditor
Robin Bruck, Support Staff
Bernadette Deats, Support Staff

After the on-site portion of the audit, the Auditor utilized the Auditor Compliance Tool for Adult Prisons and Jails as a guide to determine compliance with each standard. The auditor utilized information from the PAQ was provided prior to the audit, information observed from the tour and documents collected while on-site, and lastly, information obtained from both the staff and inmate interviews to complete the review and determination of compliance.

DESCRIPTION OF FACILITY CHARACTERISTICS

Olympic Corrections Center opened in 1967 as the Clearwater Honor Camp. The staff at Olympic Corrections Center (OCC) have experienced many changes, adapting to the departments mission as it has changed over the years. Originally a single unit facility, OCC added two additional offender living units a quarter mile down the road from the original Clearwater Unit. The Ozette Unit was built in 1981 and the Hoh Unit added in 1991. Currently OCC is capable of housing 400 adult male offenders and the 2016 average daily population was 391. Each living unit at OCC serves its own unique purpose in the Departments vision "Working Together for Safe Communities".

OCC leases the 70 acres on which the facility resides from the Department of Natural Resources (DNR). OCC works very closely with DNR, designating the Clearwater Unit as a DNR Unit. Offenders housed in Clearwater

are screened to work on off-site crews assisting in year-round work through the community and surrounding areas. DNR workers thin the forest, plant trees, do road-side clean up and assist in cutting trails and fighting wildfires.

The Hoh Unit serves as the new offender orientation unit, or intake unit. With the exception of DNR, most facility jobs are filled from the Hoh unit, such as: Community Service Crews, Correctional Industries, Warehouse, Maintenance and Wastewater Treatment Plant. Some offenders hold jobs and participate in part-time education and the rest participate in full-time educational programs.

The Ozette Unit is the largest of the living units. It houses all Drug Offender Sentencing Alternative (DOSA) offenders participating in the Therapeutic Community Program. Offenders housed in Ozette are required to participate in full time programming, five days a week while maintaining employment in positions such as Unit Custodians, Food Service workers and Maintenance. Some even participate in night time educational programs. Ozette not only houses DOSA offenders but is also the location of the Secured Housing Unit, which has 13 double bed cells.

In addition to the living units, OCC has a food service complex, a waste water treatment plant and composting area, a warehouse, the fire trailer and community service crew check out complex, a recreation complex, a medical clinic, the therapeutic community complex which includes the chapel, a maintenance complex, staff training complex and offender education complex.

There are 141 staff at OCC (DOC, contract staff from Peninsula Community College, ABHS (Chemical Dependency) and Correctional Industries dedicated to striving for excellence and acting in a professional manner to achieve a safe working environment for staff and offenders. OCC's goal is to help offenders modify their negative behaviors, gain skills and develop a good work ethic to become productive members of society, ultimately resulting in safer communities.

SUMMARY OF AUDIT FINDINGS

Number of standards exceeded: 3

Number of standards met: 40

Number of standards not met: 0

Number of standards not applicable: 0

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) Standard 115.11 (a) requires that that an agency shall have a written policy maintaining zero tolerance towards all forms of sexual abuse and sexual harassment and outline the agency's approach to preventing, detecting, and responding to such conduct. WDOC has three Department Wide policies that detail the agency's zero tolerance and their prevention, detection and response to all forms of sexual abuse and harassment. This include DOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*; DOC Policy 490-850, *Prison Rape Elimination Act Response*; and DOC Policy 490.860, *Prison Rape Elimination Act Investigation*. While the latter two policies focus on the thorough detailed approaches, DOC policy 490.800 states, "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". Each of these policies is accessible to all staff, offenders and the public.
- (b) WDOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* outlines the agency level PREA Coordinator's roles and responsibilities (page 3 and 4). The WDOC maintains a fulltime PREA Coordinator position, which is an upper-level, agency wide position, as required by this subsection of the standard. This position reports directly to the Assistant Secretary of the Administrative Operations Division. The PREA Coordinator is responsible for oversight of the development, implementation and maintenance of all PREA-related strategies throughout the agency. The Headquarters and DOC organizational charts were reviewed which illustrated this position and the organizational hierarchy.
- (c) WDOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* outlines the facility level PREA Compliance Manager roles and responsibilities (page 3 and 4). Olympic Corrections Center maintains a full time PREA Compliance Manager position, which is an upper-level, agency wide position, as required by this subsection of the standard. This position reports directly to the Warden of OCC. The PREA Coordinator is responsible for oversight of the development, implementation and maintenance of all PREA-related strategies throughout the facility. The facility organizational chart and position description were reviewed which illustrated this position duties and the facility hierarchy. After review of all documentation, responses from the Agency and facility, and the on-site portion of this audit review, it was evident to the auditor that the Facility far exceeds this standard as well as the Agency. The Agency PREA Coordinator is extremely well versed in PREA, is extremely responsive, knows each facility inside and out, is aware of each case Statewide, and is respected inside and outside of the State of Washington as a mentor and person to go to for advice on the subject. In addition, the facility Superintendent and PCM were also extremely knowledgeable and have participated in internal and external PREA audits, training, and reviews. The knowledge base, support, adherence to and belief in the PREA standards is unmatched.

Standard 115.12 Contracting with other entities for the confinement of inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) DOC Policy 490.800, *Prison Rape Elimination Act (PREA) Prevention and Reporting*, states that 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.
- (b) DOC Policy 490.800, *Prison Rape Elimination Act (PREA) Prevention and Reporting*, states that 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.

Also reviewed to illustrate compliance with these provisions was: Documentation of contract language (template/shell) for applicable facilities; A memo from Secretary regarding violator jail bed contracts not included in WADOC compliance determinations based on payment of per diem and housing for short term only; DOJ ruling regarding Pioneer Human Services residential treatment centers not falling under; Standards and memo that WADOC will monitor population makeup.; contract with American Behavioral Health Systems for housing offenders in a residential treatment center; Memo from Work Release Oversight and compliance Administrator regarding placement of an offender in this facility with the contract; a memo regarding contract negotiations with Clark County Work Release Program Administrator; Contract with the GEO Group for housing of offenders in out of state beds; Interagency agreement with the Rehabilitation Administration for housing youthful offenders; RCW 72.02.410 providing statutory authority for the housing of youthful offenders in an RA Facility; Contract with Yakima County Jail for the housing of overflow offenders; Contract monitoring memo from WADOC PREA Coordinator.

All contract language reviewed by the auditor, as referenced above, included the contracting agencies obligation to adopt and comply with the PREA standards and the obligation of WADOC to monitor the contract and facility to ensure compliance that the contract is complying with the PREA standards.

The WADOC has contracted with Pioneer Human Services to provide residential substance abuse treatment services to offenders on supervision in the community. According to the definition of Community Confinement Facility as per the PREA standards, the facility would appear to fall under the requirement. However, the USDOJ has ruled that such a facility must house a population of 50% offender before the standards will apply. WADOC reports that should the total offender population rise above 50%, the contract will at that time be modified to require the contractor to maintain compliance with the PREA standards and will also include the required monitoring by WADOC.

for future contracts and/or contract renewals. In addition, the contract monitoring is now common practice. In addition, WADOC has current monitoring information for all facilities with the exception of Clark County Work Release. The county has not yet received a DOJ PREA audit as required in their contract. As a result, we are in the process of transferring all WADOC offenders out of the facility, which is scheduled to be complete by 12/31/2017. We will suspend the contract until such time as the county achieves compliance with the standards as demonstrated in the completion of an audit by a DOJ certified auditor.

For the corrective action, the WADOC PREA Coordinator forwarded to the auditor on January 16, 2018 documentation which confirmed the removal of all DOC offenders from the Clark County Jail. A memo, dated December 19, 2017 was sent to the Sheriff of Clark County which details the importance of PREA compliance and outlines a telephone call that occurred between the Sheriff and the WADOC Work Release Supervisor. The Jail intends to and is working towards compliance with PREA and is expected to have an audit completed in late 2018. Until that time, the WADOC will temporarily suspend housing in this facility and will look forward to continued partnership in the future.

Standard 115.13 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 490.200, *Prison Rape Elimination Act Prevention and Reporting*, states that ‘Each Superintendent and Work Release Community Corrections Supervision 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 staff needs and established staffing model’. The template includes all elements of this provision such as Generally accepted detention and correctional practices; Any judicial findings of inadequacy; Any Findings of inadequacy from federal investigative agencies; Any findings of inadequacy from internal or external oversight bodies; All components of the facilities physical plant (including “blind spots” or areas where staff or inmates may be isolated; The composition of the inmate population; The number and placement of supervisory staff; Institution programs occurring on a particular shift; Any applicable state or local laws, regulations or standards; The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and Any other relevant factors.

In addition, WADOC Policy 110.100, *Prison Management Expectations*, states that superintendants will compile quarterly reports on the following and submit to their Deputy Director...compliance with the staffing plan, listing all vacancies open 30 days or more, and actions taken to fill or mitigate to ensure continuity of services.

- (b) WADOC requires that each facility document deviations from their staffing plan including vacancies, program closures, and/or filling of mandatory posts. WADOC policy 110.100 states that Superintendents will compile quarterly reports on the following and submit to their Deputy Director: Major incidents and developments in each department or administrative unit; population data; compliance with the staffing plan, listing all vacancies over 30 days or more, and actions taken to fill or mitigate to ensure continuity of services; assessment of employee morale via personal activities;

assessment of offender morale via grievance statistics and major incidents; major problems and plans for solving them; and Government Management Accountability and Performance assignments and status of action plans.

- (c) WADOC Policy 490.200, *Prison Rape Elimination Act Prevention and Reporting*, states that ‘Each Superintendent and Work Release Community Corrections Supervision 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 staff needs and established staffing model’. The template includes all elements of this provision such as Generally accepted detention and correctional practices; Any judicial findings of inadequacy; Any Findings of inadequacy from federal investigative agencies; Any findings of inadequacy from internal or external oversight bodies; All components of the facilities physical plant (including “blind spots” or areas where staff or inmates may be isolated; The composition of the inmate population; The number and placement of supervisory staff; Institution programs occurring on a particular shift; Any applicable state or local laws, regulations or standards; The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and Any other relevant factors.
- (d) As outlined in Policy DOC 420.370, *Security Inspections*, the Superintendent will develop a rotation schedule to ensure weekly visits are conducted of all living areas and activity areas to encourage informal contact with personnel and offender and to informally observe living and working conditions. Employees in this rotation should include associate superintendents; captains/senior security managers; correctional program managers; and other designated department heads and managers. In addition, WADOC Policy 110.100 states that superintendents will ensure that each member of the facility executive team make unannounced tours of selected areas of the facility at least weekly. Employees are prohibited from altering one another that these tours are occurring, except when necessary for the legitimate operational functions of the facility. Lastly, WADOC policy 400.200 states that ‘correctional staff will maintain a permanent log, providing a shift report that records routine information, emergency situations, unusual instances, and area visits by executive staff and designated Department heads in the post log.

Standard 115.14 Youthful inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) and (c) OCC has demonstrated compliance with all elements of this standard. Agency wide, this standard would only apply to Washington Corrections Center (WCC) and the Washington Corrections Center for Woman (WCCW). OCC houses adult male felons and does not house female offenders nor does it house youthful offenders. If a youthful offender arrived at OCC, it would be based on an exigent circumstance and that offender would be placed in an area where safety of the youthful offender was the priority and an immediate transfer to WCC would be made.

WADOC Policy 320.500, *Youthful Offender Program*, states that pending a transfer to a JRA facility, the youthful offender will be assigned a cell separate from adult offenders, within an intensive management or segregation unit or infirmary. The youthful offender would not be housed with or participate in a program or activity with any adult offender. The youthful offender will be under direct supervision by two custody staff whenever he or she leaves their cell. Lastly, the policy states that sight and sound separation with adult offenders will be minimal and brief. In the past twelve months, there have been no (zero) youthful offenders housed at OCC.

Standard 115.15 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC policy 420.310, *Searches of Offenders*, states that staffing will meet the follow gender requirements, unless waiting for an employee of the designated gender may result in serious bodily injury to the offender, the employee or others:
- a. Strip searches of female offenders will be conducted by female employees.
 - b. Strip searches of male offenders require that one of the employees conducting the strip search is 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.

The facility indicated that in the previous twelve months, there have not been any cross gender strip searches or cross gender visual body cavity searches conducted at OCC.

In addition, WADOC Policy 420.312, *Body Cavity Search*, states that all participants in a body cavity search process will be the same gender as the offender.

Lastly, WADOC policy 420.310, *Searches of Offenders*, states that all strip searches will be documented before the search or as soon as possible after the completion of an emergent strip search. The documentation must contain at a minimum: the date of the search; name of the offender; DOC number; reason for search; and names and gender of employees conducting the search. Strip search logs were reviewed in multiple areas of the facility and were completed by staff daily.

- (b) This provision of the standards is compliant as OCC is a facility for adult male felons and does not house female offenders. The facility does and has always exceeded 50 offenders. WADOC Policy 420.310, *Searches of Offenders*, states that pat searches will be conducted by trained employees/contract staff. Pat searches of female offenders will only be conducted by female employees/contract staff, except in emergent circumstances.
- (c) WADOC policy 420.310, *Searches of Offenders*, states that if a strip search is conducted that does not

meet the above mentioned gender requirements (in provision a) for staffing, a confidential report will be completed in IMRS and submitted before the end of shift. The distribution of this report will include the PREA Coordinator. In addition, WADOC Policy 420.312, *Body Cavity Search*, states that all participants in a body cavity search process will be the same gender as the offender. The facility indicated that in the previous twelve months, there have not been any cross gender strip searches or cross gender visual body cavity searches conducted at OCC. Strip search logs were reviewed on-site throughout the facility in the visitation area, the transportation office and the secured housing unit, as these are places that most commonly require strip searching of inmates. All were extremely detailed in detailing the reason for the search, the inmate names and number, the staff gender and the staff roles (as staff can be the one searching or the one observing). WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that Offenders will be provided with the opportunity to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their buttocks, breasts, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. This includes viewing via surveillance systems. Policy also indicates that notices will be posted in the living units and infirmaries which indicate that personnel of both genders could be present in the unit. These were also observed during the tour. Lastly, policy states that an announcement will be made indicating ‘man on the unit’ or ‘woman on the unit’, loud enough and often enough to reasonably be heard by the occupants of that area.

The WADOC and OCC follow a directive from former Assistant Secretary Sinclair regarding announcements in offender living areas. The Hoh Unit has an automatic paging system announcement. When pushed, offenders are alerted in English and Spanish, that females are entering this housing unit. It has been cleared for installation in the Clearwater and Ozette Housing units as well.

WADOC Policy 320.265, *Close Observation Areas*, states that direct observation assignments will be conducted by an officer of the same gender as the offender, except in emergent circumstances. In the event that an opposite gender officer is assigned, a report will be completed by the Shift Commander in the IMRS system before the end of the shift. Distribution of this report will include the PREA Coordinator. In the past twelve months, there were two instances of an opposite gender staff member being assigned to a duty as outlined above. The documentation was provided and reviewed by the auditor to illustrate the emergent circumstances.

- (d) OCC does not physically examine transgender or intersex offenders for the sole purpose of determining the offender’s genital status. This is outlined in policy WADOC 490.820, and further states that if the offender’s genital status is unknown, it will be determined by health care providers during conversations with the offender, by reviewing medical records, or if necessary, as part of a broader medical examination conducted in private by a health care practitioner. The facility indicated to the auditor that in the twelve month preceding the audit, OCC has not housed any transgender or intersex inmates.
- (e) All staff who may perform pat searches at OCC has received pat search training. This training was reviewed by the auditor and included information about conducting cross gender pat searches, searches of transgender and intersex inmates, and searches of both male and female offenders. All staff received this training online in February 2014 and all new staff since that time receives this training in the Correctional Worker Core. This training requirement is also outlined in WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 310.000, *Orientation for Offenders*, states that offenders will receive orientation information, both orally and in writing, in a manner that is clearly understood by offenders. This information will, at a minimum include information on the Prison Rape Elimination Act and all subsequent related policies and procedures, applicable state and federal laws and this will include potential criminal penalties; information on the department's zero-tolerance stance; definitions and examples of prohibited and/or illegal behaviors that might constitute sexual misconduct; self-protection strategies; prevention and intervention; examples of conduct, circumstances and behaviors that may be precursors to sexual misconduct; various ways sexual misconduct may be reported; that all allegations of sexual misconduct are taken seriously and investigated thoroughly; confidentiality in cases of sexual misconduct; treatment and counseling; staff requirements to report allegations; protection against retaliation; and disciplinary actions for making false reports. Policy also states that when a literacy or language problem exists, staff will assist the offender in understanding the material per DOC Policy 450.500, *Language Services for Limited English Proficient 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.

WADOC Policy 450.500, *Language Services for Limited English Proficient Offenders*, states that the Department will provide interpretation (oral) and translation (written) services through Department and/or Contract services at all Department facilities and Field Offices. The Department will also provide guidelines for interpretation and translation services for LEP offenders under Department jurisdiction. Lastly, WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that offenders are not authorized to use interpretation/translation services from other offenders, family members or friends for PREA related purposes.

The facility advised the auditor that during the audit review period, twelve months prior to the on-site portion of the audit, there were no accommodation requests related to the provisions of this standard for any offenders who were deaf or hard of hearing, blind or had low vision or those who had any intellectual, psychiatric or speech disabilities. Should an accommodation be requested, the offender will be provided with the appropriate resources needed to participate in their orientation. Thirteen contracts were provided to the auditor for sign language interpreter services along with contracts demonstrating continuous access to services. Also reviewed by the auditor was the position description for Deaf Services Coordinator demonstrating agency resources to assist and support of those inmates who may be hard of hearing. Lastly, also provided to the auditor and reviewed were PREA brochures and materials that were developed to meet the needs of offenders with limited intellectual capabilities to ensure availability of applicable information.

- (b) In addition to all of the above referenced policy and procedures relating to this standard and this provision, the facility offers many avenues to utilize the above. Offenders are able to view the PREA Orientation video in English or Spanish. The video is also closed captioned for offenders who may be hard of hearing. Offenders who are visually impaired are able to listen to the video. The audit team was able to review the video and observe all elements of the standard and listed above in section (a) of this standard. If an offender is Spanish speaking only, arrangements will be made with the PREA Compliance Specialist to provide a special viewing of the PREA orientations video in Spanish. The Agency also contracts with a language line that is available to translate PREA materials in languages other than Spanish.
- (c) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that offenders are not authorized to use interpretation/translation services from other offenders, family members or friends for PREA related purposes. Staff interpreters or translators will only be used for these purposes in exigent circumstances. During the twelve months preceding the audit, there were no instances where an interpreter was required in the course of a PREA allegation being reported or investigated, nor with inmate education.

Standard 115.17 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that the Department has established staffing practices as follows: 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 USC 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. All staff (employees, contractors, or volunteers), prospective staff at the time of hire and wherever an employee is considered for promotion are required to complete a Sexual Misconduct Disclosure form and sign an acknowledgment that all answers and statements are true and complete.
- (b) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that 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.
- (c) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that the Department will obtain information through one or more of the following: Washington Crime

Information Center/National Crime Information Center (NCIC) records checks; employment/volunteer applications; reference checks; personnel file review; and contract disclosure statements. Further, WADOC policy 810.015, *Criminal Record Disclosure and Fingerprinting* states that all applicants will be background checked before initial appointment or promotion. The Department will provide guidance to hiring authorities consistent with RCW 9.94A.640 concerning disclosure and use of information about prior criminal convictions and subsequent incarcerations of employees, contract staff and volunteers.

- (d) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that 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. This includes contractors or contract staff.
- (e) WADOC policy 810.015, *Criminal Record Disclosure and Fingerprinting* states that the designated unit/employee will establish a process to ensure that criminal background checks are run for all current volunteers, contract staff, and unarmed employees at least every five years. Annual criminal background checks are required for as part of weapons qualification for all armed employee as per DOC 410.235, *Use of Force Training and Qualifications* and DOC 410.930, *Community Corrections Use of Force Training*.
- (f) Staff do not complete self-evaluations.
- (g) WADOC policy 810.015, *Criminal Record Disclosure and Fingerprinting* states that failure to fully divulge criminal information on the part of an individual subsequently employed, promoted, or authorized to provide services for the Department may be cause for disciplinary action, up to and including dismissal or termination of services.
- (h) WADOC Policy 800.005, *Personnel Files*, states that to the extent possible, institutional employers seeking employment verification will be provided all available information on substantiated allegations of sexual misconduct or harassment. Employment verifications requests from institutional employers will be directed to the Appointing Authority, who will coordinate the review and response. Interviews with HR staff indicated that they do cooperate with and respond to all outside agency requests. WADOC does not require HR staff to log or record those sent to other agencies.

Standard 115.18 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that the Department will consider possible effects on its ability to protect offenders from sexual misconduct when designing or acquiring a new facility or when planning substantial expansions or modifications of

existing facilities. Since the time of the previous audit, the facility and Agency advised the auditor that there have been no building modifications nor have any new buildings been designed or acquired.

- (b) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that the Department will consider possible effects on its ability to protect offenders from sexual misconduct when installing or updating video monitoring systems, electronic surveillance systems, or other monitoring technology. In April 2017, a vacant area which was previously used for offender clothing was repurposed to expand the Therapeutic Community program area, the Ozette Living Unit, the Warehouse and the Carpentry Shop. Based on the 2015 Vulnerability Assessment and additional walkthroughs by the Superintendent, the Chief of Security and other Executive Management Staff, areas of vulnerability and safety were identified and addressed.

The PAQ indicated that there has been an update to video monitoring systems, electronic surveillance systems, or other monitoring technology since the last audit but the facility was not able to local proof of practice documentation. Staff involved was interviewed while the auditor was on-site and it was evident that various meetings were held which discussed the addition of cameras and the inclusion of sexual safety in the process. All new additions were reviewed and they allowed for viewing of inmate areas for safety and security while allowing the offenders to still shower, change clothes and use facilities without being viewed by members of the opposite gender. In addition, the staff advised that they are currently in the process of discussing the addition of more cameras. The facility was able to provide the auditor with emails and documentation illustrating that PREA staff was involved and considered in the placement of cameras.

In addition, to support this standard, the auditor reviewed the annual vulnerability assessments that are completed by each facility. Video monitoring and physical plant are reviewed during each assessment and recommendations are made. These will be reviewed with PREA staff, security supervisors, unit staff and the executive management team at the facility.

Standard 115.21 Evidence protocol and forensic medical examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 490.850, *Prison Rape Elimination Act (PREA) Response*, states that the Department will respond to allegations of sexual misconduct to support and provide assistance to the alleged victim, enhance security, and maximize the ability to obtain evidence to use in investigations and criminal prosecutions where applicable. During the audit review period, there were six offender on offender sexual assault/abuse matters or staff sexual misconduct investigations, none of which required referrals to law enforcement. All investigations included a Uniform Evidence Protocol and/or Crimes Scene Containment/Preservation/Processing Checklist. If there was a criminal element in any cases, the Jefferson County Sheriff's Office and/or the Washington State Patrol is responsible for the collection of

evidence in a criminal investigation.

- (b) WADOC Policy 490.850, *Prison Rape Elimination Act (PREA) Response*, states that the Department will respond to allegations of sexual misconduct to support and provide assistance to the alleged victim, enhance security, and maximize the ability to obtain evidence to use in investigations and criminal prosecutions where applicable. A memorandum was provided and reviewed by the auditor from the Agency PREA Coordinator which states that the WADOC used the following publications as the basis for developing their sexual misconduct investigation evidence protocols: A National Protocol for Sexual Assault Medical Forensic Examinations Adults I Adolescents, Second Edition, US Department of Justice, Office on Violence Against Women; April 2013 and Recommendations for Administrators of Prisons, Jails, and Community Confinement Facilities for Adapting the US Department of Justice's A National Protocol for Sexual Assault Medical Forensic Examinations Adults I Adolescents, Second Editions, US Department of Justice, Office on Violence Against Women; April 2013. These documents were also provided to the auditor.
- (c) WADOC Policy 490.850, *Prison Rape Elimination Act (PREA) Response*, states that forensic exams will be performed by a Sexual Assault Forensics Examiner (SAFE) or a Sexual Assault Nurse Examiner (SANE) where possible. If a SAFE/SANE is not available, the examination can be performed by a qualified medical practitioner. OCC has had no incidences that required a forensic medical exam in the twelve month preceding the audit. However, should an incident occur, the Forks Community Hospital, who have SANE/SAFE staff, would be contacted to let them know that an offender would be transported to their facility for a forensic examination. On June 17, 2017 there was an in person meeting with Forks Community Hospital Staff and PREA Compliance Manager Laura Paul from Clallam Bay Corrections Center (CBCC). CBCC also utilizes the Forks Community Hospital for forensic medical examinations. The meeting minutes from the SANE nurses meeting were reviewed to ensure compliance. In addition, a memorandum from the Assistant Secretary of Health Services was provided. In the memo, the Assistant Secretary advised that he has directed the Health Services staff, in coordination with the Shift Commander, to call ahead to the hospital, when SANE is needed. If the hospital states that no SANE is available, the facility can divert to another hospital that has a SANE available or send the patient to that hospital to be seen by a qualified medical practitioner in the ER and document the attempts to obtain a SANE. The documentation must confirm that the ER at the hospital has other qualified medical practitioners able to provide the examination. WADOC Policy 490.850 states that all medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender while s/he is housed in a Department or contracted facility. In addition, this same language is in WADOC Policy 600.00, *Health Services Management* and WADOC Policy 600.025, *Health Care Co-Payment Program*.
- (d) WADOC Policy 490.800, *Prison Rape Elimination Acts Prevention and Reporting*, states that sexual assault support services may be obtained through the Office of Crime Victim Advocacy (OCVA). Offenders may call 1-855-210-2087 toll free Monday through Friday to reach the OCVA PREA Support specialist. Calls will not be monitored or recorded and an Inmate Personal Identification Number (IPIN) will not be required. Abuse of the toll free phone line will be reported the Superintendent or the Work Release Administrator for action as needed. In person consultations may be available. Lastly, the policy states that co OCC has had no instances that required a forensic medical examination conducted in which a community victim advocate was used. Should an incident occur, however, a designated PREA victim advocate from the Forks Abuse Program is available. An MOU is in place with the Office of Crime Victims Advocacy (OCVA) which details the services that will be provided. OCVA posters and brochures were also provided for the auditor to review and were seen throughout the facility in common areas and in staff offices.

- (e) OCC has had no instances that required a forensic medical examination conducted in which a community victim advocate was used. However, should an incident occur, the designated victim advocate from Forks Abuse Program would be contacted. The facility, through policy 490.850, *Prison Rape Elimination Act Response*, has a detailed and thorough Aggravated Sexual Assault Checklist which is used for sexual acts perpetrated by either staff or an offender that occurred within the previous 120 hours and involves penetration or exchange of body fluids.
- (f) WADOC is responsible for conducting all administrative investigations related to PREA matters. WADOC staff does not have law enforcement powers or certification, and, as such, are not authorized to conduct any type of criminal investigation. Washington Administrative Code (WAC) requires that all felonies be reported to law enforcement authorities. WAC 139-05-240 outlines the requirements of the basic law enforcement academy and 139-05-250 outlines the basic law enforcement curriculum. All law enforcement agencies are required to provide the appointing authority of the requesting facility with a copy of the investigation report once any criminal investigation has been completed.

Standard 115.22 Policies to ensure referrals of allegations for investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) WADOC is responsible for conducting all administrative investigations related to PREA matters. WADOC staff does not have law enforcement powers or certification, and, as such, are not authorized to conduct any type of criminal investigation. Washington Administrative Code (WAC) requires that all felonies be reported to law enforcement authorities. WAC 139-05-240 outlines the requirements of the basic law enforcement academy and 139-05-250 outlines the basic law enforcement curriculum. All law enforcement agencies are required to provide the appointing authority of the requesting facility with a copy of the investigation report once any criminal investigation has been completed. OCC submitted a memorandum to the auditor from the Superintendent that states that they have investigated all allegations referred to the facility by the DOC PREA Unit. WADOC Policy 490.860, *Prison Rape Elimination Act, Investigation* states that the Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department. In the year preceding this audit, there were no cases referred to law enforcement.
- (c) The auditor was provided information that is made available on the WADOC website which details how the investigation process and referral process work. In addition, a memo was provided of a meeting with WADOC and the Jefferson County Sheriff’s Office. In the meeting, the Sheriff’s Office stated that they are committed to investigating complaints and crimes. The Deputy present discussed expectations for crime scene preservation and evidence collection processes to ensure cooperation.
- (d) The Chief of Investigative Operations submitted a memo to the auditor that stated that the WADOC is

responsible for conducting all administrative investigations related to PREA. WADOC staff does not have law enforcement powers or certification and, as such, are not authorized to conduct any type of criminal investigation. Washington Administrative Code (WAC) requires that all felonies be reported to law enforcement authorities. WAC 139-05-240 outlines the requirements of the basic law enforcement academy and 139-05-250 outlines the basic law enforcement curriculum. All law enforcement agencies are required to provide the appointing authority of the requesting facility with a copy of the investigation report once any criminal investigation has been completed.

WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that each Superintendent will meet at least annually with applicable law enforcement officials to review investigation requirements detailed in federal PREA standards; to establish procedures for conducting criminal investigations related to PREA allegations; and establish points of contacts and agree upon investigatory update procedures. These will be documented with meeting minutes. In addition, a MOU is in place between WADOC and the Washington State Patrol, which was reviewed by the auditor.

- (e) This provision of the standard is not applicable, as currently, no investigations are conducted by any Department of Justice component.

Standard 115.31 Employee training

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) & (c) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that 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 a PREA Acknowledgment form, review PREA policies, and will complete training at the earliest possible opportunity. Training will address but will not be limited to:
 - a. Reviewing this policy and related operation memorandums
 - b. Zero tolerance for sexual misconduct and related retaliation
 - c. Preventing and detecting sexual misconduct, including, communicating with LGBTI 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
 - d. The dynamics of sexual misconduct in confinement
 - e. Reporting sexual misconduct (including methods, mandatory reporting for youthful offender and vulnerable adults and disciplinary consequences for staffs failing to report
 - f. Responding to sexual misconduct, including first responder duties and
 - g. Confidentiality requirements

Training rosters were provided prior to the audit which detailed the training completion date for each staff member at the facility in addition to examples of individual training transcripts.

- (b) The training used at OCC details information regarding the needs of both male and female offenders. This is done for all initial and in-service training classes, so all staff receive both. Part of this training, which was reviewed, also included information regarding the needs/reactions of both male and female offenders.
- (d) According to a memorandum from the Program Administrator for the Training and Development Unit to the Auditor, the WADOC provides general PREA training to employees, contract staff, and volunteers through the Learning Management System. This an electronic, on-line training venue in which participants log into in order to complete required training. The system tracks participation, scores obtained on quizzes, and completion of training requirements. A function within this system requires participants to acknowledge that they understand the PREA training they just completed. If a participant does not confirm their understanding of the material, it is not registered as having been completed. The participant is then directed to obtain additional information through listed resources, contact supervisors, and/or retake the training in order to confirm their understanding.

Any in training that is conducted, as per WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, acknowledgments will be documented by signing the course roster, which will include a statement verifying participant education.

Standard 115.32 Volunteer and contractor training

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that 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 a PREA Acknowledgment form, review PREA policies, and will complete training at the earliest possible opportunity. Training will address but will not be limited to:
 - a. Reviewing this policy and related operation memorandums
 - b. Zero tolerance for sexual misconduct and related retaliation
 - c. Preventing and detecting sexual misconduct, including, communicating with LGBTI 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
 - d. The dynamics of sexual misconduct in confinement

- e. Reporting sexual misconduct (including methods, mandatory reporting for youthful offender and vulnerable adults and disciplinary consequences for staffs failing to report
- f. Responding to sexual misconduct, including first responder duties and
- g. Confidentiality requirements

OCC currently has 14 contractors. Of those, 13 have completed their annual PREA training as required. The one contractor is currently attending CORE training.

OCC currently has 19 volunteers, all of which have completed the annual PREA training as required.

- (b) All contractors and volunteers are trained on the same PREA 101 lesson plan that all staff are trained on. Vendors and service providers with limited unescorted contact with offenders are not required to attend PREA training, but must sign a PREA Acknowledgment form, as per WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*. A vendor log was provided to the auditor which also shows that the vendors are offered a PREA Brochure upon arrival at OCC. This log also identifies which vendors require more than just the brochure.

In addition, as per WADOC policy 530.100, *Volunteer Program*, states that before contact with offenders, occasional individual or group service volunteers must complete the PREA Acknowledgment form.

- (c) Samples of the PREA Acknowledgment form were provided to the auditor in advance of the audit to review. OCC maintains a list of all contractors and volunteers who are cleared and authorized to enter the facility. This list was reviewed on site and staff were aware of where to get the list and that they can only let into the facility volunteers or contractors who were cleared to have contact with inmates. While on-site, an interview was conducted with the facility Volunteer Coordinator. She was extremely well versed in the topic of PREA and she was able to describe, in detail, the entire process for a volunteer worker at this facility. Each volunteer will have an NCIC ran, receive online documents to review and sign, and take a volunteer training class as well which contains PREA information, prior to entering the facility.

While on-site, two interviews were also conducted with a Contracted Staff member in education and a Contracted Staff member who works in the Therapeutic community. They were each very detailed in their information on first responder duties and all the PREA education that they received. They each feel as if security staff is very supportive of them in their duties and respond when they have needs or suggestions.

Standard 115.33 Inmate education

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that offenders will be provided PREA related information on the Departments zero tolerance stance and ways to report sexual misconduct. Information will be presented in a manner allowing offenders to ask questions of the staff member facilitating the orientation. Policy also states that during intake at any prison, offenders will be given an informational brochure provided by the PREA Coordinator.
- (b) In addition, WADOC Policy 310.00, *Orientation for Offenders*, states that offenders will receive orientation information, both orally and in writing, in a manner that is clearly understood by offenders. PREA is part of this orientation.
- (c) The Agency PREA Coordinator provided the auditor with a memorandum which detailed the PREA offender orientation. This has been in place with the WADOC since March 10, 2006 when the then Secretary of Corrections issued a directive that all offenders receive PREA orientation. The directive required that:
1. Orientation would begin immediately for all offenders coming through the reception centers at the Washington Corrections Center (males) and the Washington Corrections Center for Woman (females).
 2. All offenders transferred between facilities receive PREA training
 3. All offenders currently housed in prison facilities be provided with the opportunity to participate in orientation sessions at each facility and
 4. All offenders receive the PREA informational brochure
- In addition brochures and posters are placed throughout the facility and continue to provide PREA-related information to offenders. As a result of this initiative, offenders within WADOC have consistently been provided with PREA information since early 2006.
- (d) Information provided by the facility is provided in a variety of formats to include: all documents being available in Spanish; Low comprehensive information and a guidebook for staff for those inmates who may have limited reading skills; and a PREA video transcription. Closed captioning is available for hearing impaired offenders who are watching the PREA orientation video. During the twelve months preceding the audit, the Superintendent advised the auditor that they had not had any offenders placed there that required materials to be presented in a different format other than English video and brochures.

WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that professional interpreter or translation services, including sign language, are available to assist offenders in understanding this policy, reporting allegations, and/or in participating in investigations of sexual misconduct. 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.

- (e) The Agency PREA Coordinator provided the auditor with a memorandum which detailed the PREA offender orientation. This has been in place with the WADOC since March 10, 2006 when the then Secretary of Corrections issued a directive that all offenders receive PREA orientation. The directive required that:
1. Orientation would begin immediately for all offenders coming through the reception centers at the Washington Corrections Center (males) and the Washington Corrections Center for Woman (females).
 2. All offenders transferred between facilities receive PREA training
 3. All offenders currently housed in prison facilities be provided with the opportunity to participate in orientation sessions at each facility and
 4. All offenders receive the PREA informational brochure

- (f) In addition brochures and posters are placed throughout the facility and continue to provide PREA-related information to offenders. As a result of this initiative, offenders within WADOC have consistently been provided with PREA information since early 2006. The auditor was provided copies of and reviewed the PREA brochure, posters, videos and handbook.

During the inmate interviews and while on site, a few of the interviewed inmates expressed that they were unaware of whether or not the phone numbers to report or for advocacy, were recorded and monitored or not. The auditor verified that this was described in policy, in the PREA brochures and on most versions of the poster. While the number of inmates who expressed this was very small, the Superintendent immediately forwarded an announcement to all the inmates through the inmate Kiosk system. The memo stated “During the course of the interview the auditors observed a trend in that the population was not aware that the phones do not monitor calls made to the PREA Reporting Hotline or the Office of Crime Victims Advocates phone line. For clarification, these numbers are provided exemptions in the phone monitoring system so they do not record to the system. The PREA Hotline does use a voice messaging system, however there is no local access to these calls at the facility. In both cases calls may be anonymously made as such there is no IPIN requirement for these calls”.

Standard 115.34 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) & (c) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that PREA investigators will be trained in:
- a. Crime scene management/investigation, including evidence collection in prisons and work releases
 - b. Confidentiality of all investigation information
 - c. Miranda and Garrity warnings, compelled interviews, and the law enforcement referral process
 - d. Crisis intervention
 - e. Investigating sexual misconduct
 - f. Techniques for interviewing sexual misconduct victims; and
 - g. Criteria and evidence required to substantiate administrative action or prosecution referral.

WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, also states that investigators will assigned by the Appointing Authority/Designee and must be trained per DOC 490.800, *Prison Rape Elimination Act Prevention and Reporting*.

Provided to the auditor was the complete PREA and Workplace Investigator Training Curriculum and the PREA investigator Booster Training Curriculum. A list of all staff who have attended this training was

also provided which included their completion date. Lastly, the Agency PREA Coordinator provided the auditor with a memorandum which detailed the process of assigning investigations.

- (d) The WADOC is responsible for conducting all administrative investigations related to PREA. WADOC staff does not have law enforcement powers or certification and, as such, are not authorized to conduct any type of criminal investigation. Washington Administrative Code (WAC) requires that all felonies be reported to law enforcement authorities. WAC 139-05-240 outlines the requirements of the basic law enforcement academy and 139-05-250 outlines the basic law enforcement curriculum. All law enforcement agencies are required to provide the appointing authority of the requesting facility with a copy of the investigation report once any criminal investigation has been completed.

WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that each Superintendent will meet at least annually with applicable law enforcement officials to review investigation requirements detailed in federal PREA standards; to establish procedures for conducting criminal investigations related to PREA allegations; and establish points of contacts and agree upon investigatory update procedures. These will be documented with meeting minutes.

Standard 115.35 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (c) & (d) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that 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 fight/assault activity review
 - Preserving physical evidence
 - Reporting sexual misconduct; and
 - Counseling and monitoring procedures.

All of the medical/mental health staff at OCC and those staff identified as appropriate in the Therapeutic Community have completed PREA Training for Health Services and PREA annual training as required. All documentation of completion is maintained in the Learning Management System and was reviewed by the auditor. The PREA Training Curriculum was provided to the auditor for review as well as a spreadsheet identifying all staff at OCC who have completed the PREA training for Health Services and their completion dates.

- (b) WADOC policy 610.025, *Medical Management of Offenders in Cases of Alleged Sexual Abuse or*

Assault, states that if the report is made within 120 hours of the alleged sexual assault and the case involves penetrations and/or exchanges of bodily fluids, the Department will transport the offender to the designated community health care facility. WADOC does not conduct these examinations and therefore, no staff are required, at WADOC, to have said training on this provision of the standard completed. Interviews with two medical staff while on-site were conducted. Each had stated that they have received the specialized training and were extremely well versed in the processes. Their training certificates and documentation was also reviewed.

Standard 115.41 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) & (b) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignments* states that classification counselors and designated work release employees will complete a PREA Risk Assessment within 72 hours of arrival for all offenders arriving at any Department facility. Facilities will establish procedures to ensure completion within 72 hours, even on weekends and holidays. The facility advised the auditor that during an audit of PREA Risk Assessments that was completed prior to the audit, that 3 of the 448 offenders received in the period reviewed, were not completed in a timely manner as per the standard and policy. In addition, 4 were late. The Superintendent issued a directive with a review process to ensure compliance. The following month, another review was completed of the 97 offender intakes since that directive, and 100% were completed timely.
- (c) The WADOC uses the PREA Risk Assessment (PRA). The assessment is available and used in the OMNI system, which is the offender’s electronic file. Assessments, as per Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, must be completed in person with the offender. In the event that an assessment cannot be completed in the offender’s electronic file, Classification Counselors and Community Corrections Officers may use the paper form and must update the electronic system as soon as practical.
- (d) & (e) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, outlines and defines proper procedures for conducting PREA risk assessments and assignments. The screening, paper version and the electronic version, were both reviewed. The PRA includes the following criteria to assess offenders for risk of victimization: whether the inmate has a mental, physical, or developmental disability; the age of the offender; the physical build of the inmates; whether the inmate has previously been incarcerated; whether the inmates criminal history is exclusively nonviolent; whether the inmate has prior convictions for sex offenses against an adult or a child; whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender non-conforming; whether the inmate has previously experienced sexual victimization; the inmates own perception of vulnerability; and whether the inmate is detained solely for civil immigration purposes.

The screening also considers prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual abuse in assessing the offender's risk of being sexually abusive. WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment* also states that facilities will take into account all available information when completing PRA's to include previous risk assessments, medical/mental health assessment information, etc.

- (f) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, states that a follow up assessment will be completed between 21 and 30 calendar days after the offender's arrival at the facility.

The facility advised the auditor that during an audit of PREA Risk Assessments that was completed prior to the audit, that 2 of the 448 offenders received in the period reviewed, were not completed. In addition, 26 were late. The Superintendent issued a directive with a review process to ensure compliance. The following month, another review was completed of the 97 offender intakes since that directive, and 100% were completed timely.

- (g) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, states that for cause assessments will be completed within 10 business days by assigned Classification Counselor when additional information is received suggesting potential for victimization or predation; if the offender self discloses information that could impact assessed risk; when there is a finding of guilt on certain infractions listed in the PREA Risk assessment; when an employee/contract staff observes offender behavior suggesting potential for victimization or predation; or for substantiated allegations of offender on offender sexual abuse/assault or staff sexual misconduct.

- (g) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, states that offenders are not obligated to answer assessment questions.

- (h) OCC restricts access in accordance with the OMNI/PREA Access/Security Groups Charts. Access for any other person must be requested through, reviewed and approved by the agency PREA Coordinator.

Due to the self-identification of errors in the screenings by the facility during their internal pre-audit assessment, the Auditor, while on-site, asked to review all inmate intake screenings and follow up screenings that occurred since the internal corrective action was completed. The internal directive was issued on May 12, 2017 and since that time 227 offenders had been received into the facility. Of those, all 227, or 100 percent, had an initial PREA Risk Assessment (PRA) which was completed within the seventy two hour required time frame. Of those offenders that stayed at the facility for at least thirty days (which was 202 at the time of the audit) all but one had a follow-up PRA completed timely. The one offender that did not have his follow-up PRA completed within the time frame required was out on an off-site DNR fire crew and was not available for staff to conduct this review. This particular offender was screened immediately upon his return to the facility (on the 35th day).

Standard 115.42 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) & (b) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, states that PREA Risk Assessment information will be reviewed when making job and program assignments. Before placing the offender in a multi-person cell/room, staff responsible for making housing assignments will review the PREA Risk Assessment identifier to ensure the compatibility of cell/roommates. Housing compatibility reviews and related PREA housing chrono reviews are not required for offenders being placed in dedicated single person cells. If an offender is transferring between facilities, housing reviews can be completed in advance of the offender's arrival as long as a review is done to ensure the offenders assigned to the designated cell have not changed before the arriving offender is placed in the cell. An offender who scores at potential risk for sexual victimization will not be housed in the same cell/room as an offender who scores at potential risk for predation. In addition, WADOC 300.380, *Classification and Custody Facility Plan Review*, states that for offenders with a documented history of predatory violence or predatory sexual offending, additional mental health and or other employees may be included to provide general input about areas of potential risk based on history. Any concerns regarding work, treatment, education, offender change programs, or other activities raised after reviewing the offenders PREA Risk Assessment will be documented in the Summary/Statement field in the Other section of the Incoming Transport/Job Screening Checklist, which will include any applicable mitigation strategies. Samples of housing Chronos were reviewed, as provided in advance of the audit and on-site.
- (c) (d) (e) & (f) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, states that an offender's transgender/intersex status will be maintained as confidential and only disclosed on a need to know basis. Staff who learns an offender identifies as transgender or intersex will report the information confidentially to the Superintendent/CCS. Medical, mental health and substance use disorder practitioners will obtain offender consent using DOC 14-172 Substance Abuse Recovery Unit Compound Release of Confidential Information before disclosure.

Employees/contract staff will not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender's genital status. If the offender's genital status is unknown, it will be determined by health care providers during conversations with the offender, by reviewing medical records, or, if necessary, as part of a broader medical examination conducted in private by a health care practitioner. 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. The review committee will be chaired by the PREA Compliance Manager/Specialist and will include, but will not be limited to:

- 1) The Captain at major facilities or Lieutenant at stand-alone minimum security facilities,
- 2) The Correctional Program Manager,
- 3) A representative from medical,
- 4) A representative from mental health, and
- 5) The offender's assigned Classification Counselor.

Final housing decisions will be based on recommendations from the local review committee.

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.

A Headquarters, Multidisciplinary Team (MDT) will meet to review housing assignments as determined and chaired by the Prisons Command B Deputy Director. The MDT will include the following individuals or their designees:

- a. PREA Coordinator,
- b. Assistant Attorney General,
- c. Chief Medical Officer,
- d. Chief of Psychiatry,
- e. Emergency Operations Corrections Specialist,
- f. Selected stakeholders from the community, and
- g. Others as identified on a case-by-case basis.

Facilities will develop local procedures to allow transgender and intersex offenders the opportunity to shower and dress/undress separately from other offenders. This may include individual shower stalls, separate shower times, or other procedures based on facility design. Transgender or intersex offenders may report housing/showering issues to the Superintendent/CCS/designee. In Prisons, the Superintendent/designee will notify the offender's CUS, Unit Sergeant, and affected Unit Correctional Officers regarding any special shower arrangements.

A memo was provided to the auditor from the Superintendent which stated that during the twelve months preceding the audit, no transgender, intersex or gender non-conforming offenders have been housed at OCC.

- (g) OCC does not have a dedicated housing area for the assignment of only lesbian, gay, bisexual, transgender or intersex offenders. During the audit period, two LGBTI offenders had been assigned to OCC. Housing and programming placements for these individuals were made based on the PREA Risk Assessment and programming needs.

Standard 115.43 Protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) (c) (d) (e) WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignment*, states that an offender who scores at potential risk for sexual victimization will not be housed in the same cell/room as an offender who scores at potential risk or sexual predation. Facilities with dormitory/open housing will establish procedures for appropriate bed assignments for at risk offenders. In prisons, this separation may include placement in segregation. Placement in Administrative Segregation for more

than 24 hours should only occur if not suitable alternative housing exists and will last only until alternative placement can be made. Each alternative considered, along with the reason it was determined unsuitable, will be documented in a PREA Housing Chrono entry. Policy also states that 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. Offender 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.

In addition, the Superintendent also advised the audit team that offenders cannot be placed in secured housing at OCC for more than 14 days with up to a 3 day extension as approved by the Deputy Director. This is also outlined in WADOC Policy 320.260, *Secured Housing Units*. During the audit review period, there was not any offender who was placed in secured housing solely for separation from abusers. If an offender was at risk from abusers and there was no other alternative, the offender would be placed in secured housing for no longer than 24 hours so that a transfer to a different facility could be facilitated.

WADOC Policy 320.255, *Restrictive Housing* was reviewed by the auditor. The policy details program access due to risk levels, conditions of confinement modifications for instances mentioned above, health services, and placement.

WADOC Policy 490.850, *Prison Rape Elimination Act Response* states that the appointing authority will attempt to minimize any disturbance to the alleged victim's housing location, program activities, and or supervision during the investigation. In prisons, an alleged victim will be placed in Administrative Segregation/Secured Housing only: at his/her request, or if the Appointing Authority has specific information that the alleged victim may be a danger to him/herself or in danger from other offenders. This placement should only be made when no suitable alternative housing exists and last only as long as necessary for the offender's protection.

During the audit interviews, numerous staff and offenders alike expressed to the audit team that they feel that segregation is used as a punishment for reporting. When pressed to provide specific names or cases in which they feel this occurred so the auditors could review, no staff or inmate could. This information was unable to be verified in any segregation log or Chrono. However, the auditor felt that this perception by staff and offenders could be negative if it would, as a result, deter offenders from reporting. Again, this fact cannot be verified and not documentation could support this. The Auditor did, however, ask the Superintendent to clear up these 'myths' that are circulating around with staff and offenders. The Superintendent drafted a memo and 'talking points' and provided a copy to the auditor. To address the concerns raised by both staff and offender, the following memo from Superintendent Bennett was directed to be shared with staff through meetings and musters, and the Unit Staff must share this information through the Inmate Welfare Committee meetings to the offender population (the memo stated):

“One concern raised by the audit team noted that during interviews, they had heard from the offender that they do not report because they are afraid of going to Secured Housing Unit and being transferred. This message was also reiterated in some staff interviews. In review of the data addressing PREA reporting, we did not find data that indicated we placed reporters or victims in Secured Housing. That being said, it's important that we message a proper response in order to continue to have an effective program in which the population has the confidence to report concerns. As such, consistent with the Standards and PREA policies except in limited circumstances we do not place victims or reporters in Secured Housing because they provide an allegation....115.43 outlines Protective Custody note 115.68 Post Allegation protective custody – refers us back to 115.43 (the same rules apply for post all post allegation and reports from screening).

Standard 115.43, Protective Custody:

(a) Inmates at high risk for sexual victimization shall not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

(b) Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:

(1) The opportunities that have been limited;

(2) The duration of the limitation; and

(3) The reasons for such limitations.

(c) The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

(d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document:

(1) The basis for the facility's concern for the inmate's safety; and

(2) The reason why no alternative means of separation can be arranged.

(e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. The key point is that we must assess all available alternatives before placing a reporter/victim in Secured Housing.

Standard 115.51 Inmate reporting

Exceeds Standard (substantially exceeds requirement of standard)

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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

(a) Inmates are provided multiple internal methods to report sexual abuse and sexual harassment, retaliation by other staff or inmates for reporting, and staff neglect or violation of responsibilities that may have contributed to such incidents. WADOC Policy 450.100, *Mail for Prison Offenders*, states that offenders

have the ability to correspond by means of legal mail. The legal mail process is thoroughly outlined in the policy and letters to any PREA auditors, and/or the PREA Coordinator at Headquarters are treated as legal mail. In addition, WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that Offenders may report allegations in the following ways and may remain anonymous:

- a. Through the confidential PREA hotline;
- b. Verbally to any staff;
- c. Through kites;
- d. Written notes or letters to staff;
- e. Grievances

(b) In addition, WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that Offenders may report allegations in the following ways and may remain anonymous:

- a. Written report to an outside agency. These reports will be made on a DOC form and the offender can remain anonymous by not identifying himself/herself on the form. Forms are available in areas accessible to offenders in Prisons with pre-addressed envelopes attached and on bulletin board in Work Releases. Once received, the outside agency will forward the report to the PREA Coordinator who will respond.

The third party method was reviewed and is in place via an MOU with the State of Colorado Department of Corrections. A test letter was sent to the Colorado Department of Corrections to see the process work and the time it would take for response. The auditor mailed the letter from New Mexico on 09/12/2017. The letter was returned to the auditor, as the CDOC address had changed. The auditor utilized the address in the MOU. While on site, the auditor spoke to the PREA Coordinator and WADOC was aware of the change. They changed the address in all inmate handbooks, posters and handouts and on the envelopes provided with the reporting form. The auditor sent a second letter to the correct address and it was received and responded to promptly.

(c) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that Offenders may report allegations in the following ways and may remain anonymous:

- a. Through the confidential PREA hotline;
- b. Verbally to any staff;
- c. Through kites;
- d. Written notes or letters to staff;
- e. Grievances

(d) WADOC Policy 490.850, *Prison Rape Elimination Act Response* states that employees must immediately report any knowledge, suspicions, or information received including anonymous and third party reports regarding an allegation or incident of sexual misconduct. This also includes retaliation and knowledge of staff actions or neglect that may have contributed to an incident. Policy then continues on to states that staff receiving any information regarding an allegation or incident of sexual abuse misconduct must deliver the information confidentially and immediately per the PREA Reporting Process. Attached to this policy is a flow chart of reporting and this section is detailed for staff as well in the chart.

For all portions of this standard, the information is thoroughly detailed in policy. In addition, the inmate reporting methods are clearly given to the inmates via multiple methods to include the PREA informational video, the inmate handbook, the inmate PREA brochures and posters. For staff, they are also provided a brochure and are educated annually via their training on these processes, as evidenced by the training PowerPoint provided.

While in the segregation area, the auditor observed the segregation packets that were provided to each offender who enters the unit. Each offender is provided with a pre-addressed stamped envelope to write to the outside Agency reporting entity. The auditor was extremely impressed with the avenue provided to all since it does not require an inmate to ask a staff member for the form or brochure and thus will help them remain as anonymous as possible.

Standard 115.52 Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) (c) (d) (e) (f) (g) WADOC Policy 490.820, *Prison Rape Elimination Act Prevention and Reporting* outlines the various ways that offenders may report PREA Allegations and also states that offenders may remain anonymous when reporting. In addition, policy states that offenders can report allegations through grievances, including emergency offender grievances, 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. 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 re-file the grievance.

Further, WADOC policy 550.100 states that grievances alleging sexual misconduct will be forwarded to the PREA Coordinator per DOC 490.800 and will not be reviewed through the grievance process. During the 12 months preceding the audit, one allegation was received through the grievance system. The allegation was determined not to be PREA and the offender was notified of the decision. During the audit period, no emergency grievances were received.

Standard 115.53 Inmate access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by

information on specific corrective actions taken by the facility.

- (a) & (b) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that 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. through 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 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. OCC has a partnership with the Forks Abuse Center for continued and/or in-person support services . Offenders are told of these mechanisms, as well as all other reporting mechanisms and the extent to which each of these is confidential, monitored or the extent to which reports of abuse will be forwarded to authorities on the offender orientation video. The auditor reviewed the Washington Coalition of Sexual Assault Programs (WCSAP) brochure for offenders, OCVA posters and brochures in both English and Spanish, and the in person advocacy guide.

- (c) The WADOC entered into a partnership agreement with the OCVA to provide support services to all offenders under the jurisdiction of the department. An Interagency Agreement between the WADOC and the Department of Commerce Office of Crime Victims Advocacy was reviewed. It outlines all services provided.

Standard 115.54 Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The agency has established various methods of reporting by third parties that are available at OCC. A Family and Friends of Offenders brochure and poster is available to visitors and the public in both English and Spanish. Further, the public website offers PREA information to the public. Visitors, offender family members and associated, 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.

A test email was sent by the auditor on September 18, 2017. The email was responded to by the Agency PREA Coordinator within 3 minutes.

Standard 115.61 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that staff will report all allegations, related retaliation, and knowledge of related staff actions or neglect that may have contributed to an incident. In addition, WDOC Policy 490.850, *Prison Rape Elimination Act Response* states that staff must immediately report any knowledge, suspicion, or information received, including anonymous and third party reports, regarding an allegation or incident of sexual misconduct. This also includes related retaliation and knowledge of staff actions or neglect that may have contributed to an incident.
- (b) Agency policy clearly defines confidentiality restrictions regarding PREA related information. Information related to allegation/incidents of sexual misconduct is confidential and will only be disclosed for related treatment, investigation, and other security and management decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action, as per Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*.
- (c) The Medical and Mental Health complex at OCC has medical PREA posters displayed as well as offender brochures which outline the provisions of this standard which informs inmates of the practitioner’s duty to report.
- (d) OCC has not had any vulnerable offenders assigned to their facility who reported any PREA Incidents during the review period. WADOC Policy 350.550, *Reporting Abuse and Neglect/Mandatory Reporting* states that the Department will report suspected child abuse/neglect and incidents of abuse, abandonment, financial exploitations, or neglect involving vulnerable adults to the appropriate authority. The policy then continues to identify the appropriate authorities for the different types of vulnerable populations and the methods to report.
- (e) Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that staff will report all allegations, related retaliation, and knowledge of related staff actions or neglect that may have contributed to an incident. In addition, WDOC Policy 490.850, *Prison Rape Elimination Act Response* states that staff must immediately report any knowledge, suspicion, or information received, including anonymous and third party reports, regarding an allegation or incident of sexual misconduct. This also includes related retaliation and knowledge of staff actions or neglect that may have contributed to an incident.

Standard 115.62 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

When OCC learns that an offender is subject to substantial risk of imminent sexual abuse, the facility takes immediate actions to protect that offender. During the review period, the facility initiated 7 investigations into PREA related matters. The actions taken to protect the offenders can include reassignments, housing unit changes, or facility transfers as warranted by the allegation and identified needs of the named victim, as outlined by WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignments*.

Standard 115.63 Reporting to other confinement facilities

Exceeds Standard (substantially exceeds requirement of standard)

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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) (c) (d) WDOC Policy 490.850, *Prison Rape Elimination Act Response* states that 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 or involved a staff member who reports through another Appointing Authority. OCC received information on two different incidents during the review period about allegations from other facilities.

The Superintendent states that while preparing for this audit, it was discovered that documentation of notifications made by OCC to other facilities and jurisdictions was not always maintained. Notifications have historically consisted of telephone calls with no hard copy verification available. The new process initiated required that all notifications will be made via telephone with a confirmation email or directly via email. Documentation will be maintained by the Superintendent/designee. While on-site, the auditor was provided copies of the new process that is in place and notifications that were made, both via phone and email to outside facilities. WADOC Agency PREA staff was also notified of the notification so that they may as well log and track. The PCM and Superintendent, during their interviews, were each well versed in the process and the need to maintain documentation regarding this standard moving forward.

Standard 115.64 Staff first responder duties

Exceeds Standard (substantially exceeds requirement of standard)

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 420.375, *Contraband and Evidence Handling* outlines the process of evidence retention. In addition, WADOC Policy 490.850, *Prison Rape Elimination Act Response* states that for all allegations except aggravated sexual assault, the Shift Commander will implement appropriate security procedures and initiate the PREA Response and Containment Checklist. The checklist, Form 490.850, attachment 4, states that the facility will separate the alleged victim and abuser; preserve and protect the crime scene; request the victim and ensure the abuser do not take any actions that will destroy any possible evidence such as washing, brushing teeth, changing clothes, urinating, smoking, drinking, urinating, defecating or eating.

All staff are provided a pocket guide of their first responder duties as well.

- (b) Non-security staff is trained to complete the same first responder duties, as listed above, until a security staff member is notified and will take control of the incident response.

Standard 115.65 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WDOC Policy 490.850, *Prison Rape Elimination Act Response* states that each prison 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 the PREA Response Plan contents. This plan will be maintained by the PCM in the Shift Commander’s Office in each prison and with the Emergency Management Plan in each Work Release and Field Office. The plan was reviewed and was extremely detailed. All staff who were interviewed and questioned, were extremely knowledgeable of this process and the location for the response plan .

In addition, the facility has an amazing partnership with the local law enforcement agency who services the facility. While on-site, the Sheriff was at the facility, for an unrelated matter. In addition, staff spoke of the mutual respect between the two agencies, the cooperation and response from the Sheriff’s staff and the partnership that they have. The Sheriff has, in the past attended various training sessions with the

facility staff and has used OCC resources in non-PREA related matters to assist law enforcement staff, which exhibits the amount of trust between the two agencies.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) and (b) The CBA between the State of Washington and the Washington Federation of State Employees was reviewed by the Auditor. The version reviewed was effective July 1, 2017 through June 30, 2019. In the CBA, the Discipline process is outlined to include sections on: just cause, forms of discipline, investigation process, work assignment, home assignment, investigatory interview, pre-disciplinary meeting, and the grievance process. All elements in the CBA are in compliance with the provisions of this standard.

Standard 115.67 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) (c) (d) (e) (f) WADOC Policy 490.860, *Prison Rape Elimination Act Investigation* states that staff and offenders who cooperate with an investigation will report all concerns regarding retaliation to the Appointing Authority. When a 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, their designee will notify the applicable Appointing Authority to initiate the monitoring. Indicators of retaliation may include, but are not limited to: disciplinary reports; changes in grievance trends; housing or programming changes and reassignments; and negative performance reviews.

The policy then continues to states that the Appointing Authority of the facility where the alleged victim is housed will notify the following employees, as applicable, when monitoring is required, but will not provide specific details regarding the allegation and investigation. The PREA Compliance Manager at the facility where the report was made will ensure alleged victims and offender reporters are monitored and met with at least monthly. The local Human Resource Manager will monitor employee reporters. The PCM at the facility where the report was made will monitor contract staff and volunteer reporters. Any indication of retaliation found during said monitoring will be forwarded to the Appointing Authority. Lastly, Policy states that retaliation monitoring will continue for 90 days following notification or longer if the Appointing Authority deems it necessary. Each month, the PCM will complete and submit DOC 03-503 PREA Monthly Retaliation Monitoring Report to the Appointing Authority. If a reporter or alleged victim transfers facilities during the monitoring period, the receiving facility will assume monitoring responsibilities. Monitoring activities will be discontinued if the allegation is determined to be unfounded.

The Superintendent states that when an allegation of offender on offender sexual assault or abuse or staff sexual misconduct is reported and investigated, retaliation monitoring begins for the reporter and the named victim. During this audit period, there were two such cases initiated at OCC.

Standard 115.68 Post-allegation protective custody

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC Policy 490.820, *Prison Rape Elimination Act Risk Assessments and Assignments*, states that an offender who scores at potential risk for sexual victimization will not be housed in the same cell/room as an offender who scores at potential risk for sexual predation. In prisons, this separation may include placement in Administrative Segregation. 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 reasons 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. The Superintendent submitted a memorandum to the auditor stating that during the twelve month preceding this audit, OCC has not experienced an allegation/situation that required placing an offender in secured housing who is alleged to have suffered abuse and no other option was available to ensure protection of the offender.

WADOC Policy 490.850, *Prison Rape Elimination Act Response* states that the appointing authority will attempt to minimize any disturbance to the alleged victim’s housing location, program activities, and or supervision during the investigation. In prisons, an alleged victim will be placed in Administrative Segregation/Secured Housing only: at his/her request, or if the Appointing Authority has specific

information that the alleged victim may be a danger to him/herself or in danger from other offenders. This placement should only be made when no suitable alternative housing exists and last only as long as necessary for the offender's protection.

Standard 115.71 Criminal and administrative agency investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that the Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department.
- (b) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that PREA investigators will be trained in: crime scene management investigation, including evidence collections; confidentiality of all investigation information; Miranda and Garrity warnings, compelled interviews, and the law enforcement referral process; Crisis intervention; investigating sexual misconduct; techniques for interviewing sexual misconduct victims; and criteria and evidence required to substantiate administrative action or prosecution referral. Policy also states that Investigators will be assigned by the Appointing Authority and must be trained per DOC 490.800, PREA Prevention and Reporting.
- (c) Once an investigation is assigned to a trained investigator, that investigator will gather and preserve evidence (physical or electronic) and interview alleged victims, perpetrators, and witnesses within an established time frame. Upon completion, a review of the report by the Superintendent is conducted. Policy 420.375, *Contraband and Evidence Handling* outlines, in detail, the process for evidence retention, signing over evidence intended for law enforcement, dried and damp/wet evidence, and disposal.
- (d) During the twelve months preceding the audit, there were no cases that appeared to be criminal in nature and therefore, no investigations were referred to law enforcement. WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that the all allegations that appear to be criminal in nature will be referred for law enforcement investigation by the Appointing Authority.
- (e) WADOC policy 400.360, *Polygraph Testing of Offenders*, states that offenders who are alleged victims, reporters, or witnesses in PREA investigations will not be asked or required to submit to a polygraph examination regarding the alleged misconduct under investigation.
- (f) During the investigation review process at OCC, Appointing Authorities informally review standard elements. If the investigation is addressing offender sexual assault or abuse or staff sexual misconduct and results in a substantiated or unsubstantiated finding, a formal local review process is implemented, and the results of the review are documented. During the twelve months preceding the audit, there were

no cases investigated that were determined to be substantiated or unsubstantiated.

- (g) WADOC Policy 490.860, *Prison Rape Elimination Act Investigation* states that when a substantiated allegation is criminal in nature, the Appointing Authority/designee will notify: law enforcement, unless such referral was already made during the course of the investigation, and relevant licensing bodies.
- (h) During the twelve months preceding the audit, there were no cases that appeared to be criminal in nature and therefore, no investigations were referred to law enforcement. WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that the all allegations that appear to be criminal in nature will be referred for law enforcement investigation by the Appointing Authority.
- (i) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that records associated with allegations of sexual misconduct will be maintained according to the Records Retention Schedule. PREA records may include, but will not be limited to: incident reviews, investigation reports, electronic evidence, investigation findings/dispositions, law enforcement referral, criminal investigation reports, required report forms and documentation of local PREA Review Committees, Data Collection Checklists and On-going investigations.
- (j) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that investigations will be completed even if the offender is no longer under Department jurisdiction or authority and/or the accused staff is no longer employed by or providing services to the Department.
- (k) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that each Superintendent will meet with at least annually with applicable law enforcements officials to review investigation requirements detailed in the federal PREA standards, establish procedures for conducting criminal investigations related to PREA allegations and establish points of contact and agree upon investigatory update procedures. Meeting minutes were reviewed detailing this last meeting.
- (l) OCC will cooperate with any outside agency after referral of any investigation of sexual abuse.

While conducting interviews of various level of staff, to include Officers, an Investigator, the PCM and the Superintendent, the auditor was told repeatedly of the partnership between local law enforcement. The Jefferson County Sheriff's Department participates in OOC inmate Recovery Team training. In addition, Sheriffs staff is invited to and regularly attends staff awards ceremonies and events. Lastly, OCC staff has assisted Jefferson County in recovery efforts of motorists who have been stuck in the snow and recovery missions on missing hikers on a couple occasions. The Auditor has not heard of nor seen such a great partnership with Local Law Enforcement in numerous audits in various states. This shows, in addition to PREA investigations, that the communication and respect is evident between the two and that Law Enforcement will cooperate with and assist in all calls made from OCC on criminal related matters. This far exceeds this standard, which is proven with emails and phone call logs, by illustrating the partnership and mutual respect between the two agencies.

Standard 115.72 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that for each allegation in the report, the Appointing Authority will determine whether the allegation is substantiated which means that the allegation was determined to have occurred by a preponderance of the evidence.

Standard 115.73 Reporting to inmates

Exceeds Standard (substantially exceeds requirement of standard)

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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that 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. If the offender has been released, the Appointing Authority will inform the offender of the findings, in person, in a confidential manner. 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 the offender's electronic file.
- (b) During the twelve months preceding the audit, there were no cases investigated by other investigative bodies, since no matters appeared to be criminal in nature. However, based on documentation from the Superintendent, had a case been referred to law enforcement, upon completion of the investigation, a request for the documentation of the criminal investigation would be requested and attached to the final internal investigation. This is also outlined in WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations*.
- (c) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that the notifications will be provided to alleged victims in a confidential manner through legal mail or by another method determined by the Appointing Authority.
- (d) WADOC Headquarters PREA unit maintains a log of offenders who have been names as the victim and suspect in investigations of offender on offender sexual assault and abuse matters. Should an inmate abuser be indicted on a charge or convicted of a charge, the facility would notify the offender. In the twelve months preceding the audit, there were no instances in which these requirements would be applicable. WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that the Department will make

the following notifications, in writing, to alleged victims until they are no longer under Department jurisdiction. This will occur when the alleged victim will be notified if the Department learns that the accused has been indicted on or convicted of a charge related to sexual assault or abuse within the facility. The PREA Coordinator/designee will track all cases and make required notification.

- (e) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations* states that the Department will make the following notifications, in writing, to alleged victims until they are no longer under Department jurisdiction. This will occur when the alleged victim will be notified if the Department learns that the accused has been indicted on or convicted of a charge related to sexual assault or abuse within the facility. The PREA Coordinator/designee will track all cases and make required notification.
- (f) The systems established to track all post-investigation notifications, related to both staff and offender, have implemented a process whereby once an offender is released from the jurisdiction of the agency, the entry is moved to an inactive portion of the tracking document. The tracking system also documents why the entry was deemed inactive (offender released from incarceration, offender is deceased, staff member is no longer employed by the agency). This process is detailed in WADOC Policy 490.860, *Prison Rape Elimination Act, Investigations*.

Standard 115.76 Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 450.050, *Prohibited Contact*, outlines the restriction process for staff sexual misconduct/harassment. These sanctions are up to and including terminations for any violations.
- (b) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that the Department has a 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.
- (c) WADOC Policy 490.850, *Prison Rape Elimination Act Investigation*, states that the Department may discipline and refer for prosecution, when appropriate, individuals determined to be perpetrators of sexual misconduct. Investigations involving represented employees will be conducted per the provisions of the applicable collective bargaining agreement. WADOC Policy 490.860, *Prison Rape Elimination Act Investigation* states that when a substantiated allegation is criminal in nature, the Appointing Authority/designee will notify: law enforcement, unless such referral was already made during the course of the investigation, and relevant licensing bodies.

OCC has not had any staff resign due to violations of agency sexual abuse or sexual harassment policies.

Standard 115.77 Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) and (b) Contract staff and volunteers who are found to have committed staff sexual misconduct will be terminated from service and prohibited from contact with offenders. For any other violations of Department PREA policies, appropriate actions will be taken.

During the twelve month preceding the audit, there were no substantiated cases of sexual misconduct involving a contractor or volunteer; however, there was one substantiated case of sexual harassment involving a chemical dependency contractor. This matter did not meet the criteria for referral to the applicable licensing body. As a result of the investigation, the staff member was provided with additional training in PREA, manipulation and boundary setting. A review of the incident resulted in preventative proactive actions directed towards the entire chemical dependency unit.

Standard 115.78 Disciplinary sanctions for inmates

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) and (c) During the audit period, OCC has had no substantiated offender sexual assault and abuse cases. The Superintendent did submit documentation to the auditor that outlines that if there is a substantiated case of offender sexual abuse and assault, the perpetrator would be subject to the formal hearings process and/or criminal charges. The mental health status and any disabilities of the perpetrator and whether or not that played any part in the sexual assault and abuse would be considered. WADOC Policy 460.000, *Disciplinary Process for Prisons* thoroughly outlines the disciplinary process used to include serious infraction procedures, conduct of hearing, the disciplinary hearing officer decision, and

reporting to law enforcement. In addition, WADOC Policy 490.860 *Prison Rape Elimination Act, Investigation* also provides an overview of Offender Discipline.

- (d) OCC does not offer counseling or other similar intervention programs, therefore, this provision of the standard is not applicable.
- (d) Alleged victims are not subject to disciplinary action related to violating PREA policies except when an investigation of staff sexual misconduct determines that the staff did not consent to the contact, according to WADOC Policy 490.860 *Prison Rape Elimination Act (PREA) Investigation*.
- (e) *WADOC Policy 490.860 Prison Rape Elimination Act (PREA) Investigation* prohibits the infracting of any offender who makes a good faith PREA-related report, even if the investigation could not be substantiated with the information provided.
- (f) *WADOC Policy 490.800, Prison Rape Elimination Act Prevention and Reporting* prohibits sexual behavior amongst offenders. These consensual acts are not considered PREA unless there is determination that coercion has occurred, in which case the allegation would be investigated as offender on offender sexual abuse.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) The Superintendent advised the auditor that while preparing for this audit, it was discovered that OCC did not have a process in place to capture those offenders who answered yes to applicable questions on the PREA Risk Assessment and ensure that they were referred to Mental Health. In some cases when referred, it was submitted on the wrong form. On May 15, 2017, Correctional Program Manager/PCM put out a memo to Classification staff outlining the process that would be used to ensure compliance with this standard. Further review indicated that there still was some confusion in reference to how this process works. The PCM has scheduled a meeting with all classification staff and this standard and its requirements are on the agenda. The meeting minutes and the attachments that were forwarded to staff, outlining the process, were provided to the auditor to review.
- (b) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting* states that at the time the PREA Risk Assessment is completed, Classification Counselors will complete referrals for mental health services using DOC 13-509 PREA Mental Health Notification if the screening indicates that the offender has perpetrated sexual abuse and/or has experienced prior sexual victimization, whether in an institutional setting or the community. In addition, WADOC Policy 630.500, *Mental Health Services*, states that a mental health employee/contract staff will complete a mental health appraisal within 14 days of screening for offenders identified as needing mental health services. In order for an offender to qualify

for outpatient mental health services or admission to a Residential Treatment Unit, DOC 13-376 Mental Health Appraisal must be completed and the offender must have a qualifying condition as defined by the Offender Health Plan.

- (c) This provision only applies to jail inmates; therefore it is not applicable to OCC.
- (d) WADOC Policy 490.800, *Prison Rape Elimination Act Prevention and Reporting*, states that 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 who breaches confidentiality may be subject to corrective/disciplinary action.
- (e) During the twelve months preceding the audit, there were no instances where informed consent was required at OCC. However, should the need ever arise, medical and mental health staff practitioners shall obtain informed consent from offender before reporting information about prior sexual misconduct. According to WADOC Policy 610.025. *Health Services Management of Offenders in Cases of Alleged Sexual Misconduct*, medical and mental health practitioners will obtain informed consent before reporting information about prior victimization that did not occur in an institutional setting, unless the offender is under the age of 18.

While on-site, the auditor asked to review all offender files (namely the intake screening and subsequent referral to mental health and the follow up meeting) that were completed since the time of the internal audit in which the facility self identified some inconsistencies in this area. The facility appeared to be completing too many steps to complete this process which lead to more confusion for the staff involved. The Superintendent sent out a clarifying directive which states that “the CPM will work with medical/mental health staff, letting them know that if an offender does not choose to be seen, a mental health care provider’s signature on the 13-509 form is not necessary. The CPM will also review the 13-509 Compliance Tracking Sheet weekly. If issues are identified, the CPM will immediately contact the Correctional Unit Supervisor if a 13-509 has not been initiated within mandated time frames and will immediately contact Medical/Mental Health Staff if an offender who wishes a meeting with a mental health provider has not been seen within mandated time frames”. In addition, the CPM will meet with the Superintendent monthly to analyze trends. Immediate contact with the Superintendent will be initiated with emergent concerns. While some confusion still existed due to the extra steps that were be completed, the auditor reviewed all and since the time of the internal corrective action, all inmates were offered the meeting, as required by the standards, and those that did request to see medical/mental health, were seen timely.

Standard 115.82 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy *Prison Rape Elimination Act Response*, states that victims in all cases of reported sexual misconduct, regardless of who the misconduct is reported to , will receive immediate medical and mental health services per DOC 610.025, Medical Management of Offender in Cases of Alleged Sexual Abuse or Assault.
- (b) The Aggravated Sexual Assault Checklist, which is included in policy 490.850, *Prison Rape Elimination Act Responses*, outlines, in detail, the process that security staff first responders shall take in the event of an incident and further, in the event that no qualified medical or mental health practitioner is on duty.
- (c) WADOC Policy 610.025, *Health Services Management of Offenders in Cases of Alleged Sexual Misconduct*, states that if a report of aggravated sexual assault is made within 120 hours of the alleged assault and involves penetration and/or exchange of bodily fluids, the facility will attempt to transport the offender to the designated community health care facility. The health care provider will (in facilities with health care services) give the offender information regarding the need for further medical evaluation to determine the: need for post-exposure prophylaxis for sexually transmitted infections and need for pregnancy prevention, if applicable.
- (d) WADOC Policy 490.850, *Prison Rape Elimination Act Response* states that all medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender while s/he is housed in a Department or contracted facility.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) and (c) WADOC Policy 610.025, *Health Services Management of Offenders in Cases of Alleged Sexual Misconduct* states that when an offender reports that s/he has been a victim of sexual misconduct, s/he will be offered medical and mental health treatment services. The policy then continues on to explain the process of offered services both if the incident occurred within 120 hours of when the allegation is made and, in addition, how to proceed if the allegation is brought fourth after 120 hours from the alleged incident. Each time frame includes the offering of medical and mental health services for the offender. In addition, WADOC Policy 630.500, *Mental Health Services* provides an in-depth outline and process for crisis services for offenders in custody. The evaluation and treatment of such victims includes follow up services, treatment plans, and when necessary, referrals for continued care.
- (e) and (f) WADOC Policy 610.025, *Health Services Management of Offenders in Cases of Alleged Sexual Misconduct*, states that in facilities with health care services employees/contract staff on-site, the offender will be assessed in person by an appropriate health care provider before transport. The health care provider will provide the offender information regarding the need for further medical evaluation to determine the need for post-exposure prophylaxis for sexually transmitted infections and needs for

pregnancy prevention, if applicable. In addition, the policy states that follow up appointments with a health care practitioner and mental health professional will be offered to provide any additional evaluation and treatment that is medically necessary, including testing, prophylaxis, and treatment of sexually transmitted infections and offer pregnancy testing and other lawful pregnancy related medical services, as applicable.

(e) OCC only houses male offenders, therefore this provision of the standard is not applicable.

(g) WADOC Policy 600.00, *Health Services Management*, states that 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 Prevention and Reporting, will be provided at no cost to the offender.

(h) WADOC Policy 610.025, *Health Services Management of Offenders in Cases of Alleged Sexual Misconduct* states that when an offender reports that s/he has been a victim of sexual misconduct, s/he will be offered medical and mental health treatment services. The policy, the continues on to explain the process of offered services both if the incident occurred within 120 hours of when the allegation is made and, in addition, how to proceed if the allegation is brought fourth after 120 hours from the alleged incident. Each time frame includes the offering of medical and mental health services for the offender. In addition, WADOC Policy 630.500, *Mental Health Services* provides an in-depth outline and process for crisis services for offenders in custody. The evaluation and treatment of such victims includes follow up services, treatment plans, and when necessary, referrals for continued care. During the twelve months preceding the audit there have been no substantiated investigations of offender on offender sexual assault and abuse.

Standard 115.86 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) (c) and (d) At OCC, a Local Review Committee is scheduled by the PCM as needed in response to completed investigations, within 30 days of findings made by the Superintendent. The Committee is generally made up of the following individuals: Superintendent, Correctional Program Manager/PCM, Correctional Lieutenant, Psych Associate, Investigator, and Human Resources (when staff are involved). All elements of the standard are documented on the DOC Form 02-383 Investigation Review Checklist. This form is reviewed and signed off on by the Superintendent. Any identified corrective actions will be implemented and tracked as applicable. WADOC Policy 490.860, *Prison Rape Elimination Act Investigation* states that a multidisciplinary committee will meet every 30 days or as needed and outlines the required individuals who must attend, as mentioned above. The committee will review policy compliance, causal factors, and systematic issues using the above referenced form.

Standard 115.87 Data collection

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) (b) (c) (d) (e) and (f) WADOC publishes all of their Annual reports on their public website at: <http://www.doc.wa.gov/corrections/prea/resources.htm#reports>.

WADOC Policy 490.860, *Prison Rape Elimination Act Investigation* states that investigators will submit the investigation report and DOC 02-382 PREA Data Collection Checklist to the Appointing Authority/designee. This report was reviewed and is very detailed and covers data on every aspect of the case.

Policy also states that data will be aggregated at least annually and include available information from investigative reports and incident review committees, as well as from each private facility contracted to confine or house Department offenders. Data will be analyzed to identify factors contributing to sexual misconduct in Department facilities and offices. Lastly, policy states that all data/reports will be provided to the US Department of Justice upon request.

All information in the reports is accurate and uniform data is collected for every allegation of sexual abuse. The incident based data contains all the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

Standard 115.88 Data review for corrective action

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

(b) (c) and (d) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigation* states that 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 action at facility and Department levels; and an assessment of the Department progress in addressing sexual misconduct, including a

comparison with data and corrective actions from previous years. WADOC publishes all of their Annual reports on their public website at: <http://www.doc.wa.gov/corrections/prea/resources.htm#reports>. Policy also states that data will be aggregated at least annually and include available information from investigative reports and incident review committees, as well as from each private facility contracted to confine or house Department offenders. Data will be analyzed to identify factors contributing to sexual misconduct in Department facilities and offices. Lastly, policy states that all data/reports will be provided to the US Department of Justice upon request. The PREA Coordinator will generate an annual report of findings. The report requires Secretary approval.

Standard 115.89 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- (a) WADOC Policy 280.310, *Information Technology* states that Department Information technology resources are Department policy and the Department is obligated to protect them. The Department will take physical and technical precautions to prevent misuse, unauthorized use, and accidental damage to IT resources, including equipment and data. IT use and access must follow state law, regulations and Department policies and IT Security Standards. Further, the same policy states that access rights and privileges to IT resources will require prior authorization. The policy continues on to outline the process of how to gain security clearances for use of IT resources.

In addition, WADOC Policy 280.515, *Electronic Data Classification* states that Category 4 data is restricted information. This is data containing information that may endanger the health or safety of others or that has especially strict handling requirements by law, statute, or regulation. Staff must receive authorization from the data owner prior to accessing category 4 data. Category 4 data requires Appointing Authority approval and a data sharing agreement approved through the Contracts Office to be released outside of the Department.

Policy further states that each staff member is responsible for electronic data in his/her care. Staff must immediately report to the Chief Information Security Officer any unauthorized use of Category 2, 3, or 4 data; lost or stolen computer equipment or media. Violations of this policy may result in disciplinary action up to and including termination.

All PREA Documentation is categorized as level 4.

- (b) WADOC Policy 490.860, *Prison Rape Elimination Act, Investigation* states that 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 action at facility and Department levels; and an assessment of the Department progress in addressing sexual misconduct, including a comparison with data and

corrective actions from previous years. WADOC publishes all of their Annual reports on their public website at: <http://www.doc.wa.gov/corrections/prea/resources.htm#reports>. Policy also states that data will be aggregated at least annually and include available information from investigative reports and incident review committees, as well as from each private facility contracted to confine or house Department offenders. Data will be analyzed to identify factors contributing to sexual misconduct in Department facilities and offices.

- (c) All personal identifiers have been removed from the above referenced reports on the public website. WADOC Policy 490.860, *Prison Rape Elimination Act Investigation* states that in the PREA Coordinators annual report of findings, information may be redacted from the report when such publication would present a clear and specific threat to facility security, but the report must indicate the nature of the material redacted.
- (d) WADOC Policy 490.860, *Prison Rape Elimination Act Investigation* states that the PREA Coordinator will maintain electronic PREA Case records per the Records Retention Schedule. -

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.

/s/ Jillian Shane

January 31, 2018

Jillian Shane, Auditor

Date