

Statewide Resolution Program Manual



Headquarters Resolution Unit
PO Box 41129
Tumwater WA 98501-1129

500-HA006 | Revised July 2024

Table of Contents

Introduction to the Resolution Program Purpose / Philosophy / Provides the Department with / Provides the Individual with / Changes to Policy, Procedure, and Practice	Page 3
Structure of the Program for Non-Health Services and Health Services Special Considerations for Health Services Concerns / Timeframes / Informal Resolutions	Page 4
Accepted and Not Accepted Concerns Accepted Concerns / Not Accepted Concerns – Appeals/Review Process, Outside Jurisdiction, & Program Restrictions / Appeal of Not Accepted Determination or Administrative Withdrawal	Page 6
Resolution Request Rewrites	Page 10
Resolution Determination and Finalization	Page 11
Emergency Resolution Request Emergency Resolution Request Procedure / Health Services Emergency Request / Non-Health Services Emergency Request / Determination / False Emergency Resolution Requests	Page 11
Resolution Request with a Suicidal or Self-Injurious Statement	Page 13
The Process at Each Level Review	Page 14
Resolution Reviews Processing and Assignment / Review Elements / Response Elements / Information Disclosure	Page 15
Employee Conduct and Retaliation	Page 17
Prison Rape Elimination Act (PREA) Resolution Requests Involving Sexual Assault, Sexual Abuse, Sexual Harassment, or Staff Sexual Misconduct	Page 18
Time Extensions, Appeals Process, and Program Limits Extensions / Time Extension Limits / Appeals Process / Resolution Program Limits / Abuse of the Program	Page 18
Resolution Request Forms, Writing, and Remedies Completing the Form / Writing a Resolution Request / Prison & Reentry Center Submissions / Resolution Request Containing Threats / Contractor Resolution Requests / Accessing the Resolution Policy, Manual, Peer Support, and Forms	Page 20
Processing Americans with Disabilities Act (ADA) Concerns	Page 22
Additional Program Information Correspondence / Confidentiality / Community Supervision / Transfers or Releases / Revocation of Community Supervision / Tort Claim Process / Document Requests by State Agencies	Page 23
Definitions	Page 25

Introduction to the Resolution Program

Purpose

The Department of Corrections Resolution Program is an unbiased internal resolution and appeals system that promotes effective communication between employees, contract staff, volunteers, and individuals under the Department's jurisdiction. The program's purpose is to resolve concerns at the lowest possible level and provide administrative remedies as outlined by the Prison Litigation Reform Act (PLRA).

The Resolution Program was developed to facilitate a positive and human-focused environment. The intent is to reduce violence and provide employees, contract staff, volunteers, and individuals with an example of appropriate and equitable behavior while addressing concerns. The program also provides opportunities for individuals to practice positive interactions and develop communication skills to collaborate with staff to proactively resolve their concerns.

Philosophy

The Resolution Program offers access to a process that allows for meaningful communication and the resolution of concerns to produce a fair and just conclusion. It also provides a collaborative and efficient approach to fair and equitable solutions to various conflicting situations.

The Resolution Program promotes respectful communication and is an open forum where individuals can seek administrative remedies to their problems.

The Resolution Program Manual provides guidance and instruction for individuals and staff regarding program usage, which can offer beneficial opportunities to address concerns proactively.

The Program Provides the Department with:

- A management tool for administrators to be informed of developing trends through data collection and reviews.
- A means to reduce violence and de-escalate matters between individuals and the Department.
- Allows administrative remedies to be implemented to avoid unnecessary burdens on the courts and comply with the PLRA.
- Alerts facilities to the development of potentially adverse incidents or significant events for the safety of the individuals and staff.

Provides the Individual with:

- A voice in the Department's policies, practices, and procedures.
- An avenue for individuals to have a formal administrative review when an informal resolution is not possible.
- Impartial, equitable, and timely decisions or actions to concerns.

- An explanation and clarification of policies, practices, and procedures.

Changes to Policy, Procedure, and Practice

After an individual attempts to address their concern and is unsuccessful, they are encouraged to submit a Resolution Request to their local Resolution Program. The Resolution Specialist will collaborate with employees/contract staff of all departments and submit recommendations to the proper authority when policy, procedure, or practice changes are warranted. Resolution Specialists are also responsible for advising individuals when changes are not justifiable and will explain the reason(s) for the decision in their response.

Structure of the Program for Non-Health Services and Health Services

Level 0	<p>A Resolution Specialist will:</p> <ul style="list-style-type: none"> ▪ Determine if the Resolution Request is acceptable per the guidelines outlined in this manual. ▪ Send the Resolution Request back for a Rewrite per the guidelines outlined in this manual. ▪ Attempt to resolve the concern informally. (Individuals have the option to appeal the informal resolution attempt if unsatisfied with the response) ▪ Promote to a Level 1 for review.
Level 1	<p>This is the first formal review, and the response is signed by the Resolution Specialists/HS Resolution Specialist. (Resolution Specialists can respond to both a Level 0 and Level 1)</p>
Level 2	<p>This is the second formal review, and the response is signed by the responsible Appointing Authority. (Superintendent, Community Corrections Supervisor, Field Administrator, or Health Services Administrator)</p>
Level 3	<p>This is the final formal review, thus exhausting the individual's administrative remedy. The response is signed by the appropriate Deputy Assistant Secretary/designee or Deputy Assistant Secretary of Health Services/designee.</p>

Special Considerations for Health Services Concerns (Medical, Dental, or Mental Health)

If a facility does not have a dedicated Health Services (HS) Resolution Specialist, the facility Resolution Specialist will assume these duties. For requests containing clinical concerns, the HS Resolution Specialist will consult with a licensed clinician within Health Services.

Any concern regarding a health services issue will not be returned for a rewrite, deemed not accepted, or withdrawn unless the Resolution Program Manager/designee has provided written approval. The Resolution Specialist will ensure all requests have been entered into OMNI and assigned a log ID before forwarding them to the Headquarters Resolution Unit for evaluation and approval.

Timeframes

Specific timeframes are set at each level to ensure a prompt and meaningful response to Resolution Requests. The Resolution Program strives to complete the entire process within 90 days of submitting the initial request. However, the process may take longer than 90 days in some cases due to rewrites, mail delays, availability for interviews, or complicated reviews.

Initial Resolution Request	An individual must submit within 30 days from the date of the incident.
Level 0 Response	Is issued by the RS within 10 working days from the date of receipt/pick up.
Appeal to Level 1	An individual must submit within 10 working days from the Level 0 response.
Rewrite Requests (cannot be appealed)	An individual must submit within 10 working days from the date of the Rewrite Request. (Unless otherwise specified by the Resolution Specialist)
Appeal of Not Accepted or Administrative Withdrawal	All Not Accepted Appeals (NAA) or Administrative Withdrawal Appeals (AWA) will be forwarded to the Resolution Program Manager/designee regardless of timeframes.
Level 1 Response	Is issued by the RS within 15 working days from the date the review has been initiated.
Appeal to Level 2	An individual must submit within 10 working days from the Level 1 response.
Level 2 Response	Is issued by the Appointing Authority within 15 working days from the date the review has been initiated.
Appeal to Level 3	An individual must submit within 10 working days from the Level 2 response.
Level 3 Response	Is issued by HQ within 15 working days from the date the review has been initiated.

Informal Resolutions

A resolution begins with mutually respectful communication. By listening carefully and communicating thoughtfully with others, individuals and staff can often find a solution to a wide variety of concerns.

An informal resolution is the most efficient way to resolve concerns. This allows the individual to obtain information and direction on how to best meet their specific needs. Individuals are encouraged to participate in problem-solving by seeking the earliest possible solution by communicating with the parties involved through in-person discussions, submitting kites, letters, kiosk messages, etc. An attempt to resolve the issue by the individual is not required before filing a request, however, it does convey a positive intent. Individuals are encouraged to share information in their written statement regarding any previous efforts to resolve their concerns in their initial Resolution Request.

The Resolution Specialist can research an individual's request and answer questions, suggest other processes available, or act to resolve the concern informally. A formal interview is not required when attempting an informal resolution. However, meeting in person allows for meaningful communication to resolve the issue presented and can prevent a formal review. If the individual does not feel their concern has been resolved, they can appeal the informal response attempt.

Accepted and Not Accepted Concerns

Accepted Concerns

Incidents, policies, or practices that personally affect the individual can be submitted. This includes actions by employees, contract staff, volunteers, and other individuals under the Department's jurisdiction. An individual can submit a Resolution Request on a variety of topics. This includes but is not limited to:

- All DOC policies
- Violations of Civil Rights (except in instances where there is an appeals process)
- All facility Operational Memorandums (while assigned to the facility)
- Facility handbooks
- Facility rules and regulations
- Facility practices and procedures
- Lack of application of policies, rules, and procedures
- Allegations of unprofessional conduct of Department employees, contract staff, or volunteers
- Actions of other individuals under the Department's jurisdiction
- Retaliation against an individual under the Department's jurisdiction for good faith participation in a legally protected activity
- Personal safety
- Clothing Concerns
- Unavailability of J&S required programming
- Physical plant conditions
- Health/Medical Services
- Dental Services
- Mental Health Services
- Accounting Services
- Sentence structure/release dates and records
- Food Services/religious diets/therapeutic diets
- Commissary and store concerns
- Religious concerns
- Law firms and/or attorneys contracting with the Department to provide legal assistance to individuals under the Department's jurisdiction

- If a response provided by a Resolution Program review is not honored or completed (This is not considered a repeat concern)
- Concerns where an individual reports an active threat of harm or violence against them or the facility, staff, or another individual

Not Accepted Concerns

Resolution Specialists will not accept concerns on issues/incidents with:

- An established appeals/review process.
- Concerns regarding matters outside the Department's/facility's jurisdiction.
- Request prohibited by the program restrictions outlined in this manual.

The Resolution Program Manager/designee can override the Not Accepted criteria outlined in this manual on a case-by-case basis when faced with extenuating circumstances. The Resolution Program Manager/designee has the discretion to forward a resolution request (or group of requests) for further review. This allows the program to gather data, track trends, and mitigate risk to the individuals and Department.

HS/RS will obtain written approval from the Resolution Program Manager/designee for all 'Not Accepted' determinations.

Not Accepted Concerns– Appeals/Review Process

Individuals cannot submit a Resolution Request on concerns with a department-approved formal review and/or appeals process. Individuals are encouraged to follow the correct review/appeals process to resolve their concerns or allow the review process to occur. This includes, but is not limited to:

- Accommodation Status Request decisions
- Administrative investigation (e.g., employee Just Cause investigation, Prison Rape Elimination Act (PREA) investigation, IIU investigation)
- Behavior Observation Entries
- Care Review Committee decisions
- Classification and Facility Risk Management Team (FRMT) decisions
- Community Custody/Reentry/GRE revocation
- Community imposed conditions
- Indeterminate Sentence Review Board (ISRB) decisions
- Infractions/sanctions/disciplinary hearing actions or employees/contract staff involved in the process. These issues can be adjudicated through the disciplinary process outlined in WAC
- Intensive Management Status (IMS) assignment
- Mail rejection
- Medical records review/change request
- Multiple Disciplinary Team (MDT) decisions
- Property rejection
- Public disclosure requests/denials for information

- Release plan denials
- Segregation placement
- Transfers and bed/cell assignments
- Use of force incidents
- Visiting denials
- An alleged inadequate resolution review or response, including timelines (Individuals can express such concerns in their appeal).
- The Resolution Specialist's decision to not accept a Resolution Request (Not accepted determinations can be appealed directly to the Resolution Program Manager/designee by the individual)

Not Accepted Concerns – Outside Jurisdiction

Only incidents, policies, or practices the Department has jurisdiction over can be submitted. Outside jurisdiction concerns include, but are not limited to:

- State and federal law (includes Washington Administrative Code (WAC) and Revised Code of Washington (RCW))
- Court-ordered pre-sentence reports
- Court decisions/orders
- Decisions made by the Department of Enterprise Services Risk Management Division regarding the disposition of tort claims
- Prison compact
- Actions of persons outside the jurisdiction of the facility/office
- City or County jails (This includes individuals serving Department-sanctioned time in a city or county jail)
- Department of Natural Resources (DNR) policies, procedures, and decisions
- The Office of Corrections Ombuds (OCO) actions or decisions
- Conditions or requirements placed on DOC by external entities with authority over the Department
- CDC Decision authorized by the Governor's Office
- Department of Health licensure requirements/compliance mandates

NOTE: Resolution Specialists can refer DNR Resolution Requests to the local DNR Administrator for their review/action.

Not Accepted Concerns– Program Restrictions

The following Resolution Requests will not be accepted based on program restrictions (Resolution Specialists can grant exceptions to the Program Restrictions for issues/incidents with extenuating circumstances or mandatory reporting situations).

- Concerns that have not occurred and are based on speculation or hearsay information (third-party information or what someone reportedly heard)
- Actions or incidents that have not yet occurred
- Concerns filed beyond 30 days from the date of the incident

- When an individual already has 5 active Resolutions (This can be exceeded for medical-related concerns when approved by the Resolution Program Manager/HS designee)
- Duplicate Resolution Requests about the same concern (Once a concern or incident has had a Resolution Request submitted and a response has been provided, the administrative remedy has been exhausted)
- Appealing to the next level when a response has not been provided for their current level of review
- The actions and/or decisions of the Resolution Specialist to address abuse by quantity violations
- If a contractor's review or internal process is still in progress or has not been attempted
- If a contractor has a grievance, arbitration, or review process
- Concerns that have been previously administratively withdrawn
- Issues, incidents, policies, or practices which do not personally affect the individual
- Issues or incidents that are being investigated outside of the Resolution Program through another established process (e.g., Human Resources, Just Cause investigation, PREA investigation, IIU)
- The Resolution Specialist's decision to send a Resolution Request back for a rewrite

Appeal of Not Accepted Determination or Administrative Withdrawal

An individual can challenge a decision to administratively withdraw or not accept a Resolution Request by submitting an appeal to their local Resolution Department. The appeal will be forwarded, along with all supporting documents, to the Resolution Program Manager/designee for review. The appeal must contain the Log ID number from their previous response and the individual's DOC number to identify the correct Resolution Request. Individuals under community supervision or reentry can mail their appeals to the Headquarters Resolution Unit or submit them to the Community Corrections Supervisor, who will then forward them to the Headquarters Resolution Unit.

The Resolution Program Manager/designee will either uphold or reverse the Resolution Specialist's decision. This review will only determine acceptability and will not address the merits outlined in the request. Any additional appeals submitted will be forwarded to the Headquarters Resolution Unit.

NOTE: Items mailed to the Headquarters Resolution Unit are not considered legal mail.

Resolution Request Rewrites

A rewrite request is a valuable tool used for clarifying or gathering necessary information regarding an individual's concern. The guidance provided by the Resolution Specialist on a rewrite request must be followed and cannot be appealed to the Resolution Program Manager/designee. All rewrites must contain the individual's DOC and Log ID number to identify the correct request. The Resolution Specialist can also suggest using the Peer Support Program for assistance.

The Peer Support Program offers individuals assistance in reading, writing, rewriting, and appealing Resolution Requests. The local Resolution Program facilitates this helpful and effective service, which is staffed by incarcerated individuals. This program can also help explain policies or procedures and support individuals in finding the correct avenue for addressing their concerns. Although individuals are not required to use the Peer Support program, it is highly recommended.

If an individual fails to follow the initial rewrite instructions, the Resolution Specialist will interview the individual to assist and support them in writing the second rewrite. If an individual refuses to follow the second set of rewrite instructions after the interview or is beyond the rewrite due date, the Resolution Specialist can administratively withdraw the concern.

Concerns regarding a health services issue will not be sent back for a rewrite unless they are reviewed by the Resolution Program Manager/designee and written approval has been provided.

Resolution Specialists will only ask for a rewrite when:

- The information does not fit in the allowable space of one DOC 05-165 Resolution Request form
- Resolution Request Forms are available, and the individual submitted the request on something other than a DOC 05-165 Resolution Request
- The concern is not a simple, straight-forward statement of concern
- The request contains excessive citations of law or legal terminology (only the use of the identifying number/title and section of the legal reference is permitted)
- The Resolution Request is not signed or dated (Individuals can be placed on call out to sign and date their form)
- The appeal is different from the original concern
- There is more than one concern/incident listed in the Resolution Request
- The situation is unclear, and more information is necessary
- If there is a Not Accepted concern combined with an acceptable concern
- The request does not contain the individual's DOC number
- The request does not contain the individual's DOC and Log ID number when submitting an appeal or rewrite
- Class action requests (For example, using terms such as "we," "us," "our," or "the incarcerated population")

Resolution Determination and Finalization

The facility's local Resolution Specialist will determine when Level 1 or 2 appeals are accepted for review, and the Resolution Program Manager/designee will make this determination for all Level 3 appeals.

When a request is promoted for review, the Resolution Specialist/designee prepares the appropriate documents and assigns the concern for review. This establishes the "action date" for the review and starts the timeline for when a response is due.

Responses will be sent to the individual at each level within the established timeframes on page 5 of this manual unless an extension has been granted.

If the individual disagrees with a response at Level 0–III, they may file an appeal within the timeframes on page 5 of this manual.

All Resolution Requests or appeals accepted for a formal review will be transcribed on the correct form and be an accurate reproduction of the individual's handwritten statement. A Resolution Specialist/designee can correct spelling and grammatical errors on the transcribed copy if the changes do not alter the meaning or intent of the statements made. A copy of the formal documents will be forwarded to the individual, informing them of the acceptance of their concern. This allows the individual to address any transcribing errors.

Emergency Resolution Request

Emergency Resolution Request Procedure

An Emergency Resolution Request requires immediate action and, if handled through the routine resolution process, could create further or unnecessary harm.

Emergency Resolution Requests fall under one of the following criteria:

1. Involve a potentially serious threat to the life or health of an individual, employee, contract staff, or volunteer.
2. Relate to severe pain being suffered by the individual.
3. Involve a potential threat to the orderly operation of a facility.

Examples of emergencies: chest pain, high blood sugar, a threat of physical harm, an allergic reaction, information on a possible group disturbance, knowledge of a weapon, severe abdominal pain, an escape plan, severe bleeding, etc.

An Emergency Resolution Request is not required for an individual to declare a medical emergency. Individuals in a Reentry Center are encouraged to use the facility's established emergency protocols.

Health Services Emergency Request (Medical, Dental, or Mental Health)

1. The individual will provide the written Emergency Resolution Request to an employee or contract staff member informing them of their medical emergency. Please note that if the form is placed in the resolution box, it will be processed as a routine request.
2. The staff who receives the emergency request must document the date and time of receipt at the top of the form.
3. The HS Resolution Specialist (or designee for after business hours) will be notified immediately of the emergency request.
4. A licensed health services employee/contract staff will assess all emergency medical requests. Stand-alone camps will contact their designated on-call medical professional/designee to assess all emergency medical requests. A licensed health services employee will determine if the concern meets the definition of a medical emergency and provide the necessary steps to address the medical need.
5. **The individual will be evaluated in person.** For stand-alone camps, the individual can be evaluated over the phone. If the individual declares or submits multiple emergency requests about the same issue or incident during the same shift, only one medical evaluation is required. However, additional evaluations can be completed if deemed medically necessary.
6. A licensed health services employee/contract staff will provide the necessary information to the HS Resolution Specialist for the response. All responses must clearly state whether the concern meets the definition of a medical emergency and document any action taken, the date and time, and the name of the licensed medical professional/contract staff making the medical determination.
7. The individual will receive a copy of the response within 1 hour of the initial submission.
8. The original form will be forwarded to the facility's HS Resolution Specialist for further review and processing.

Note: For Health Services administrative concerns filed as emergent (co-pays, medical record review, scheduling, etc.), the HS/RS can determine the emergency status. Please be advised that these types of requests are not considered medical emergencies and will be processed as routine concerns.

All Health Services Emergency Requests are subject to the co-pay requirements outlined in DOC 610.650.

Non-Health Services Emergency Request

1. The individual will provide the written Emergency Resolution Request to any employee or contract staff informing them of their emergency. Please note that if the form is placed in the resolution box, it will be processed as a routine request.
2. The staff who receives the emergency request must document the date and time of receipt at the top of the form.
3. The Resolution Specialist (or designee for after business hours) will be notified immediately of the emergency request.

4. The response must clearly state if the concern meets the definition of an emergency and document any action taken, the date and time, and the name of the staff making the determination.
5. The individual will receive a copy of the response within 1 hour of the initial submission.
6. The original form will be immediately forwarded to the facility's Resolution Specialist for further review and processing.

Determination

If the proper authority has deemed a request non-emergent, the Resolution Request will be handled through the routine process.

If the proper authority has deemed a request emergent, the incident will be resolved in accordance with DOC policy. The request will be considered informally resolved, and if the individual is not satisfied with this response, they can appeal to the next level.

False Emergency Resolution Requests

Individuals who declare false emergencies may be subject to disciplinary action under DOC 460.000. False emergencies place an unnecessary burden on the facility's employees and detract from the ongoing medical services being provided. Any disciplinary action taken against an individual for their participation in the resolution process must have prior approval from the Resolution Program Manager/designee.

Resolution Request with a Suicidal or Self-Injurious Statement

If an individual reports self-injury or suicidal ideation in a Resolution Request that was not submitted as an emergency complaint, the Resolution Specialist will follow DOC 630.550 Suicide Prevention and Response.

The Resolution Specialist will immediately contact a facility mental health or medical provider for an in-person suicide risk prevention assessment of the individual and initiate a DOC 13-420 Request for a Mental Health Assessment. If a mental health or medical provider is not immediately available, the Resolution Specialist will notify the Shift Commander to initiate the suicide risk prevention protocol outlined in DOC 630.550. All steps taken by the Resolution Specialist will be documented in the OMNI narrative screen. For all self-injury disclosures, the initial and follow-up care will be determined by the facility's mental health employees.

For individuals in a Reentry Center, the identified Resolution Specialist will follow the established mental health emergency protocols when addressing reports of self-injury or suicidal ideation. CCD employees will call a community mental health professional or dial 911 to ensure the individual's safety in the community.

The Process at Each Level Review

Level 0:

- The Resolution Specialist determines if the request will be accepted.
- Resolution Requests may be sent back for more information (rewrite).
- The Resolution Specialist may attempt to resolve informally (Individuals may appeal the informal resolution attempt if unsatisfied with the response).
- A Resolution Request may be accepted as a Level 1 review.

Level 1:

- The handwritten concern is transcribed onto DOC 05-166 Level 1 Resolution Response, and a copy is sent to the individual.
- The review is assigned to an employee or contract staff member (Resolution Specialists can attempt an informal resolution at Level 0 and still conduct the Level 1 review).
- Once the review is complete, the Resolution Specialist will review for accuracy and issue the formal response to the individual.
- The Resolution Specialist is the signing authority for Level 1 reviews.

Level 2:

- If the Level 1 response is appealed, the Resolution Specialist will review the appeal to ensure it stays on topic.
- The handwritten concern is transcribed onto DOC 05-168 Level 2 Resolution Response, and a copy is sent to the individual.
- The review is assigned to an employee/contract staff (A Resolution Specialist who responded at Level 1 cannot review and respond at Level 2).
- Once the review is complete, the Resolution Specialist will review for accuracy and issue the formal response to the individual.
- The Superintendent/Field Administrator/Health Services Administrator is the signing authority.

Level 3:

- The facility will transcribe the Level 2 appeal onto DOC 05-169 Level 3 Resolution Response and send a copy to the individual.
- All documents are sent to the Headquarters Resolution Unit (Levels 0-3).
- The review is assigned for review by the Resolution Program Manager/designee.
- Once the review is complete, the HQ Resolution Unit will review it for accuracy and issue the formal response to the individual.
- The Deputy Assistant Secretary/Deputy Assistant Secretary of Health Services/designee is the signing authority.

Please note: This is the Department's final response and cannot be appealed. The individual's administrative remedy has been exhausted in accordance with the PLRA.

Resolution Reviews

Processing and Assignment

Facility Resolution Specialists are required to assign or conduct all Level 1 and Level 2 reviews. The Headquarters Resolution Program Manager/designee will assign all Level 3 reviews.

- Level 1 reviews will be assigned to the employee/contract staff with supervisory authority over the person(s) or area of the facility/office listed in the resolution request. This allows supervisors to hold staff accountable, provide training, and make appropriate changes. For Health Services complaints, the Level 1 review will be assigned to the HS Resolution Specialist or a Health Services employee.
- Level 2 reviews will be assigned to the employee/contract staff with managerial authority over the person(s) or area of the facility/office listed in the request (such as a Health Services Manager, Facility Medical Director, CPM, Captain, Associate Superintendent, etc.)
- Level 3 reviews will be assigned to the policy owner, HSA/designee, Headquarters Manager, or subject matter expert over the area outlined in the request.

Reviews will not be assigned to an employee or contract staff member identified in the Resolution Request. If this occurs, a suitable replacement will be assigned to the review.

Once an employee/contract staff member has completed a formal review, they cannot be assigned to the next level of review if the individual appeals (i.e., an employee who performed a Level 1 review cannot conduct a Level 2 review). Resolution Specialists can assume a review assignment when necessary or as directed by an Appointing Authority.

Review Elements

The assigned employee/contract staff is responsible for completing the Resolution Review Report and documenting the following when applicable:

- Name(s) of person(s) interviewed and date(s), time(s), and location(s) of interviews
- Synopsis of the interview(s)
- Department policies and facility operational memorandums
- Local procedures or handbooks
- WAC and RCW
- Documentation (inventories, daily logs, search reports, medical records, etc.)
- Local procedures or handbooks
- Medical knowledge of the treatment being requested by the individual
- Review of medical records to ensure a clinical response
- Evidence found to substantiate or refute the individual's allegations
- Conclusions of the review
- Suggested response

The Resolution Specialist/HS Resolution Specialist will ensure Resolution Review Reports are completed appropriately. Reviewers are strongly encouraged to conduct the required in-person interview during Level 1 for the best outcome. Resolution Specialists can mandate interviews when deemed necessary, regardless of whether previous interviews have been completed.

If the individual does not attend a scheduled interview, it will be documented and rescheduled. If the individual does not show up for the second attempt, the resolution or appeal will be administratively withdrawn.

If the individual refuses to be interviewed or participate in the review process at any time, their request or appeal will be administratively withdrawn. The reviewing staff will document any refusals to participate in the Resolution Review Report and forward this information to the Resolution Specialist.

Resolution Program documents are highly confidential and will not be placed in the individual's central files. Individuals will not be provided with or allowed to retain any review documents.

Interviewees will not be permitted to read or retain any Resolution documents during an interview. The interviewer will summarize the request and ask direct questions concerning the interviewee's involvement.

If an individual has transferred or been released, a Resolution Specialist or the assigned employee/contract staff will arrange an interview by telephone or other means. Written statements may be accepted in place of an in-person interview.

When an individual cannot participate in the interview process due to inaccessibility, the Resolution Specialist will send a request to the Resolution Program Manager/designee to withdraw the concern. If the withdrawal is appropriate, the Resolution Program Manager/designee will provide written permission advising the specialist to withdraw the request. If the individual returns to DOC custody, they can pursue their previous concern by submitting a new Resolution Request to restart the process.

Response Elements

The resolution will be answered in writing and on the appropriate form for each level of review. The response will:

- Address the concern noted in the Resolution Request
- Give the name of the assigned employee/contract staff
- Specify the names of witnesses interviewed and/or resources consulted (sources of confidential information will not be disclosed)
- Cite policy, Medical Records, WAC, or RCW (when necessary)
- State evidence found or note an inability to find evidence
- Include a clear statement of findings and give the reason(s) for the decision (substantiated, unsubstantiated, or unfounded)

NOTE: All completed Resolution Program forms, including review documents, will be entered into the electronic file. Video evidence will be sent to and maintained by the Headquarters Resolution Unit.

Information Disclosure

Employees conducting a review will have access to all relevant and essential records to resolve the concern. DOC 640.020 Health Records Management authorizes access to an individual's health record to resolve health services requests. Such access does not require the individual's prior written approval.

Once the review is completed, employees can contact the facility's Resolution Specialist for the determination of a resolution involving them.

Employee Conduct and Retaliation

During any level of review, if the Resolution Specialist or assigned reviewer finds there is evidence the action(s) alleged by the individual may have taken place and could result in disciplinary action against the employee/contract staff, the Appointing Authority will be notified immediately. The Appointing Authority will determine if an administrative investigation will be initiated. If a formal investigation is initiated, the Resolution Request will be administratively withdrawn, and the complaint will be resolved through an appropriate investigation. The response will state, "Based on your allegation, an administrative investigation has been initiated outside of the Resolution Program. An administrative investigation is an approved formal review process superseding the Resolution Program. As a result, your concern has been administratively withdrawn at this time."

The individual will be informed when the administrative investigation has been completed by the facility's Appointing Authority/designee. However, any information regarding the actions taken against an employee or the outcome of the investigation is confidential and will not be divulged.

When processing a Level 0 request and it is determined that an administrative investigation is already addressing the identified concern, the Resolution Request will not be accepted.

During any level of review, when it is discovered that another administrative investigation is addressing the identified concern, the review will be administratively withdrawn. A formal response will be issued informing the individual of this action.

The Department does not condone or tolerate any form of retaliation and strives to cultivate an environment of integrity and trust. Filing a Resolution Request is a legally protected activity, and staff will not retaliate against individuals who utilize the program. Retaliation occurs when an adverse action is taken against an individual because of their engagement in a legally protected activity.

Prison Rape Elimination Act (PREA) Resolution Requests Involving Sexual Assault, Sexual Abuse, Sexual Harassment, or Staff Sexual Misconduct

The Department maintains a zero-tolerance policy concerning sexual assault, sexual abuse, sexual harassment, and staff sexual misconduct. An individual can report a PREA incident by submitting a Resolution Request per DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting. The request will be forwarded immediately to the applicable authority per the PREA Reporting Process attached to DOC 490.850 Prison Rape Elimination Act (PREA) Response.

NOTE: PREA response procedures and investigations supersede the Resolution Program. Allegations or investigations involving sexual assault, sexual abuse, sexual harassment, and staff sexual misconduct will not be accepted or reviewed through the Resolution Program. PREA allegations are not subject to the resolution process, and there is no time limitation for reporting a PREA incident.

Any future Resolution Requests concerning the incident or investigation will be processed per the PREA policy. For confidentiality purposes, forwarded Resolution Requests will be treated as correspondence and not entered into OMNI or given a Log ID number.

If the information provided does not meet the definition of prohibited behavior per the PREA policy, the individual can pursue the concern through the Resolution Program. The individual can submit a new Resolution Request outlining their concern and provide the non-PREA determination notification from the PREA Compliance Manager. The Resolution Specialist will then process the concern as a new Resolution Request.

Time Extensions, Appeals, and Program Limits

Extensions

When a reviewer cannot meet a response due date, the Resolution Specialist will send the individual DOC 05-171 Notification of Time Extension stating the number of days added, the new due date, and the reason for the extension.

Time Extension Limits

Level 1 extensions are limited to 10 working days. If the Level 1 review cannot be completed within the extension timeframe, it will be promoted to Level 2.

Level 2 extensions are limited to 10 working days. If the Level 2 review cannot be completed within the extension timeframe, the Resolution Specialist will request approval from the Resolution Program Manager/designee for a secondary extension. The secondary extension authorized will be a maximum of 5 working days. All additional time extensions requested due to extenuating circumstances will require the Appointing Authority to be notified.

Appeals Process

Individuals can appeal Level 0, Level 1, and Level 2 responses by completing a new DOC 05-165 Resolution Request with the assigned Log ID number and checking the appeal box.

Individuals can state why their previous response was not satisfactory, thereby establishing a rationale for the appeal and the basis for further review. Appeals must address the same concern as the initial Resolution Request. New or additional information regarding the original concern can be given, but new issues or incidents cannot be added. If new concerns are included, appeals will be returned for a rewrite.

While a rationale for the appeal is preferred, general statements such as “I appeal,” “Appeal to next level,” or an exact restatement of the original resolution are sufficient. Individuals must sign and date the appeal.

Resolution Program Limits

Individuals may have up to 5 active Resolution Requests at once (including active reviews, rewrites, appeals, and new concerns). If an individual submits additional Resolution Requests or appeals beyond this limit, the Resolution Specialist will not accept these concerns. However, if a review has been given a second extension, it will not count against the individual’s active Resolutions. HS Resolution Requests or appeals can be accepted over the limit of 5 with approval by the Resolution Program Manager/designee.

If an individual submits multiple Resolution Requests simultaneously, taking their total over the 5 limit, the Resolution Specialist will send the concerns back as a rewrite and ask the individual which concern(s) they want to withdraw and which one(s) to process. Individuals can only withdraw 5 requests per calendar year.

If multiple Resolution Requests are submitted simultaneously regarding the same issue or incident, they will each be assigned a new Log ID number. The Resolution Specialist will accept the concern with the most information if the concern falls within the acceptable standards of this manual. The additional complaints will be returned to the individual as duplicates and not accepted. When providing the not accepted response on a duplicate complaint, the Resolution Specialist will advise the individual of the Log ID number chosen for review. If the individual believes they have cited separate issues, they can follow the Not Accepted Appeals process outlined in this manual. If there are no requests with enough information for acceptance, once each is given a Log ID number, they can be sent back for a rewrite for more details.

When additional Resolution Requests about the same issue or incident are received after the initial processing of the original complaint, they will also be considered duplicates and given a new Log ID number. The program does not accept duplicate requests.

Abuse of the Program

Abuse of the program occurs when an individual submits multiple Resolution Requests or appeals, taking their active total over the allowable limit of 5. Abuse of the program also occurs when an individual submits repeat Resolution Requests, appeals, kiosk messages, kites, or correspondence concerning the same issue/incident. Abuse of the program interferes with the Department's goals and the positive intent of resolving concerns. The Resolution Specialist will meet with the individual and issue a courtesy notification letter reminding the individual of the program limits. If the behavior continues, the individual will receive a formal warning through an Abuse by Quantity form 05-173. The facility Resolution Specialist will coordinate with the Headquarters Resolution Unit before taking any actions concerning abuse of the program. The Resolution Program Manager can suspend individuals from the program for persistent and ongoing program abuse.

Resolution Request Forms, Writing, and Remedies

Completing the Form

The written concern must fit in the description section of one DOC 05-165 Resolution Request and be a simple, straightforward statement outlining the issue or incident. All forms related to the Resolution Program can be referenced by viewing DOC 550.100. Although not required, it is highly recommended that a suggested remedy be included for the informal resolution attempt. Concerns that have not occurred and are based on speculation or hearsay information (third-party information or what someone said they heard) will not be accepted.

While the Washington Administrative Code (WAC), Revised Code of Washington (RCW), or case law can be referenced in a Resolution Request, quotations of the written text of the law are unnecessary. The identifying number, title, and section of the legal reference are all that is needed to process and understand the concern. Resolution Requests containing excessive legal language/terminology will be returned to the individual for a rewrite.

The individual's Resolution Request must identify how the action or incident has personally affected them and be submitted on their behalf. Terms such as "we," "us," "our," or "the incarcerated population" indicate a "Class Action" request and will be sent back for a rewrite. Individuals cannot submit a Resolution Request on behalf of another individual or someone outside the Department's jurisdiction.

The individual must identify the "who, what, when, why, where, and how" the issue or incident occurred. The individual is required to provide any physical evidence in their possession to support their allegation. The Resolution Specialist or reviewer will photocopy, photograph, or record all evidence presented by the individual and will return the item(s) to the individual. Refusal to provide any cited evidence will be grounds for an administrative withdrawal of the Resolution Request. The assigned reviewer will document and forward such refusals to the facility Resolution Specialist.

If the individual has potential witnesses, they must identify them in the original Resolution Request. If the identity of a witness(es) becomes known after the individual submits their original request, the name(s) must be provided to the facility Resolution Specialist in writing or during an interview. All witnesses must be identified and interviewed prior to the Level 3 appeal. If an individual alleges to have witnesses but refuses to identify those witnesses, the Resolution Specialist will administratively withdraw the Resolution Request or review unless there are concerns for retaliation.

All resolution requests and appeals require a signature, date, and DOC number unless the individual has an ADA accommodation. If a Resolution Request does not have a signature, date, or the individual's DOC number, it will be given a Log ID number and returned to the individual so they can complete the form.

Information needed for submitting an acceptable Resolution Request:

- Who is the concern about, or who was involved (officer, counselor, volunteers, incarcerated, etc.)
- What happened (what is the basis of the allegation, situation, or problem)
- When did the incident/issue take place (identify the date, time, or shift)
- Where did the incident/issue take place (yard, holding cell, living area, kitchen, etc.)
- Why did the incident/issue take place (what was the motivation for the action taken)
- How did the event happen (what practices or procedures were applied)

For requests concerning changes to policy, the individual must identify what part of the policy is deficient and provide a recommendation for change.

Writing a Resolution Request

Individuals must provide all information related to the issue in their written Resolution Request. The Resolution Specialist or Peer Support Program can assist individuals in preparing requests.

- The individual will use DOC 05-165 Resolution Request when submitting a request or an appeal. The individual will keep the pink copy of the duplicate form for their records.
- Individuals may use 8½" x 11" paper when Resolution Request forms are unavailable.
- Resolution Specialists will not accept requests submitted through a DOC 21-473 Kite, correspondence, or the kiosk messaging system.

Prison & Reentry Center Submission

Prison and Reentry facilities will provide conveniently located Resolution boxes for individuals to submit Resolution Requests. The Resolution Department will maintain the only keys to Resolution boxes. When resolution boxes are unavailable, Resolution Request forms and envelopes marked "Resolution Confidential" will be provided for the submission.

Secured Housing Units (e.g., segregation or intensive management units) are not required to provide Resolution boxes. However, these units will provide Resolution Request forms and

envelopes marked “Resolution Confidential” for submitting concerns. These requests will be collected during the outgoing mail pickup and forwarded to the facility Resolution Specialist.

Resolution Request Containing Threats

If an individual submits a Resolution Request containing a direct threat to the life or safety of any person or the orderly operation of a facility, the individual will be subject to the disciplinary process outlined in DOC 460.000. The Resolution Request will be returned for a rewrite to allow the individual to remove the threatening language if they wish to pursue the concern.

Contractor Resolution Requests

Complaints concerning issues with an approved contractor can be reviewed through the Resolution Program. However, when a contractor has an established grievance, arbitration, or review process, the individual is encouraged to follow that process to resolve their issues. Resolution Requests that fall under this category will not be accepted.

Accessing the Resolution Policy, Manual, and Forms

DOC 550.100 Resolution Program outlines the program's requirements and responsibilities. This policy can be accessed through the Securus app or the facility's designated location.

Resolution Specialists will ensure the most current duplicate forms are available to all individuals. A copy of the current Resolution Program Manual will be maintained in the library and law library of each Prison, Reentry Center, Field Office, or other locations as outlined in a facility's Operational Memorandum (OM).

Individuals arriving at a new facility will receive the Resolution Program orientation and be allowed to ask questions. All forms can be translated to accommodate non-English-speaking individuals. Spanish and English forms are readily available.

Processing Americans with Disabilities Act (ADA) Concerns

The Resolution Program complies with all ADA requirements outlined in DOC 690.400 Individuals with Disabilities. Resolutions Specialists are required to assist individuals with documented and approved ASR/HSR, which prevents them from utilizing the program.

Available ADA accommodations include, but are not limited to:

- A therapy aid for writing requests or appeals.
- The Resolution Specialist or Peer Support Program can assist in writing the request or appeal.
- A digital recorder for the individual to submit a recording of their request or appeal for transcription.
- A UbiDuo text-to-speech communication device for individuals with visual or hearing impairments.

- Other accommodations approved through the Accommodation Review Committee and/or the ADA Compliance Manager.

The Resolution Specialist will transcribe the concern onto a Resolution Request form and meet with the individual to ensure the concern is properly documented. At the end of each review, the individual will be placed on a callout to discuss the response and their appeal options.

If an ADA resource is needed by an individual at a Reentry Center, the Reentry Center Managers will contact the Headquarters Resolution Program Unit for available options.

Additional Program Information

Correspondence

For suggestions or recommendations, an individual can send correspondence to the Resolution Program Unit at:

Department of Corrections
Resolution Program
Correctional Operations
PO Box 41129
Tumwater, WA 98501-1129

Confidentiality

Resolution Requests and reviews will not be discussed or shared with employees, contract staff, volunteers, or individuals not actively involved in the process unless there are substantial safety or security concerns. Appointing Authorities oversee a facility's Resolution Program, which authorizes them to access all Resolution materials and reviews. Resolution Specialists are required to store all Resolution documents and Protected Health Information (PHI) in a locked and secure area.

All Resolution Responses, including correspondence, will be placed in a sealed envelope and marked "Resolution Confidential." The response will then be forwarded to the individual through institutional mail or a postal service.

Resolution Program documents will be provided through the Public Disclosure Unit as outlined in Chapter 42.56 RCW Public Records Act and Chapter 137-08 WAC Public Records Disclosure.

Community Supervision

Individuals on community supervision will complete DOC 05-165 Resolution Request available at their local Field Office or www.doc.wa.gov and submit it to the Community Corrections Supervisor, who will forward them to the Resolution Program Manager/designee for processing.

Transfers or Releases

If the Resolution Request was started before the date of transfer or release, the resolution process will remain at the initiating facility or office.

After a transfer, an individual can file a new request or submit an appeal concerning a previous facility. After submission, the individual's current facility will forward these documents to the previous facility for processing. Property or accounting concerns must be submitted within 30 days of an individual's transfer.

Revocation of Community Supervision

If an individual has returned to confinement for violating their community supervision, all concerns regarding their community supervision will be forwarded to the Headquarters Resolution Unit for processing.

All open reviews or requests will be administratively withdrawn when an individual is placed on warrant status, arrested, confined to jail, or absconded from supervision.

Tort Claim Process

The Resolution Specialist will coordinate with the facility's Tort Claim Manager and Legal Liaison Officer to resolve issues. Resolution Requests or reviews concerning property issues will be provided to the Tort Claim Manager upon request.

Tort claims are filed with the Washington State Department of Enterprise Services (DES) Risk Management Division. When there is a substantiated review concerning lost or damaged property, individuals are encouraged to file a Tort claim per DOC 120.500 Tort Claims by Incarcerated Individuals.

Individuals are not required to exhaust the resolution process before filing a tort claim for property concerns. Please note that the Resolution Program does not provide monetary awards or restore property.

Document Requests by State Agencies

All state agencies will submit requests for Resolution documents to the Headquarters Resolution Unit. The Office of Corrections Ombuds (OCO) may request Resolution documents directly from a facility Resolution Specialist or the Headquarters Resolution Unit. The appropriate Resolution documents will be provided when needed for official purposes.

Definitions

Abuse by Quantity: Abuse of the program occurs when an individual submits multiple Resolution Requests or appeals, taking their active total over the allowable limit of 5. Abuse of the program also occurs when an individual submits repeat Resolution Requests, appeals, kiosk messages, kites, or correspondence concerning the same issue/incident.

Adverse Action: To threaten, report a negative action on, or discriminate against someone in a manner that affects livelihood, privileges, conditions of supervision, conditions of release, and/or conditions of incarceration.

Appeal: Submission of a Resolution Request for processing to a higher level of review when the individual is dissatisfied with the response provided.

ASR: Accommodation Status Report

Community Corrections Supervisor: An employee directly responsible for operational oversight of a Field Office.

Extenuating Circumstances: a possible situation, incident, or condition that could create an unnecessary liability against the Department.

Field Administrator: An employee responsible for the operational oversight of multiple Field Offices.

Field Office: An office from which individuals in the area on community supervision status are supervised.

Health Services Administrative Concerns: Complaints filed against Health Services that are not directly related to the physical care provided to an individual (i.e., Copay, improperly completed forms, health records, scheduling, etc.).

Health Services Resolution Specialist (HS/RS): A Department employee who is selected by the Health Services Administrator for the operation and coordination of a facility health services resolution program in compliance with DOC 550.100 Resolution Program and the Resolution Program Manual.

HSR: Health Status Report

Informal Resolution: An informal response to address a Resolution Request submitted by an individual at Level 0.

Jurisdiction: The legal authority to make decisions or changes within the Department.

Log ID Number: A case number assigned to identify a specific Resolution Request through all Levels of processing.

RCW: Revised Code of Washington

Reentry Center Manager: An employee directly responsible for the operational oversight of a Reentry Center.

Resolution Program Manager: The employee under the supervision of the Deputy Secretary of Prisons/designee who has statewide responsibility for the Resolution Program.

Resolution Request: Written notification on form DOC 05-165 Resolution Request detailing a specific issue or action personally affecting the individual.

Resolution Response: A formal response provided by the Department to address a Resolution Request submitted by an individual.

Resolution Specialist (RS): A Department employee who is selected by an Appointing Authority for the operation and coordination of a facility or community resolution program in compliance with DOC 550.100 Resolution Program and the Resolution Program Manual.

Retaliation: An adverse action taken against a person because of that person's engagement in a legally protected activity. Retaliation is also listed under staff conduct in this manual.

Superintendent: A person directly responsible for the operational oversight of a Prison.

Substantiated Allegation: There is evidence to support and prove the truth of the claim.

Unfounded Allegation: Irrefutable evidence that the allegation is not based on fact.

Unsubstantiated Allegation: The accusation, or the defense of the accused, is not supported or proven by the evidence.

WAC: Washington Administrative Code.