

PREA AUDIT REPORT Interim Final

ADULT PRISONS & JAILS

Date of report: April 27, 2017

Auditor Information			
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Telephone number: (916) 324-0788			
Date of facility visit: March 13-14, 2017			
Facility Information			
Facility name: Cedar Creek Corrections Center			
Facility physical address: 1200 Brodeax Road, Littlerock, WA. 98556			
Facility mailing address: <i>(if different from above)</i> P.O. Box 37, Littlerock, WA. 98556			
Facility telephone number: (60) 359-4100			
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: Superintendent, Mr. Douglas O. Cole			
Number of staff assigned to the facility in the last 12 months: 133			
Designed facility capacity: 480			
Current population of facility: 477			
Facility security levels/inmate custody levels: Minimum			
Age range of the population: 18+			
Name of PREA Compliance Manager: Vaaia Gaines		Title: Correctional Program Manager	
Email address: vsgaines@doc1.wa.gov		Telephone number: (360) 358-4113	
Agency Information			
Name of agency: Washington State Department of Corrections			
Governing authority or parent agency: <i>(if applicable)</i> Washington State Governor's Office			
Physical address: 7345 Linderson Way SW Tumwater, WA 98501-6504			
Mailing address: <i>(if different from above)</i> P.O. Box 41100, Mail Stop 41100 Olympia, WA 98504-1100			
Telephone number: (360) 725-8213			
Agency Chief Executive Officer			
Name: Jody Becker-Green		Title: Secretary	
Email address: jmbeckergreen@doc1.wa.gov		Telephone number: (360) 725-8810	
Agency-Wide PREA Coordinator			
Name: Beth Schubach		Title: PREA Coordinator	
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AUDIT FINDINGS

NARRATIVE

A certified PREA audit was conducted at the Cedar Creek Corrections Center located in Littlerock, Washington. The audit began in December with the delivery of the statewide documentation. The audit tour began Monday, March 13, 2016, and concluded Tuesday, March 14, 2017. The audit team consisted of the lead certified auditor and an additional certified PREA team member. Following coordination, preparatory work, and collaboration with management staff at the Cedar Creek Corrections Center, some pre-audit work was completed prior to traveling to the facility for the onsite review portion of the audit. No letters from offenders were received prior to the arrival at the facility or after the site visit was completed.

On March 13, 2017, the auditor met with the Superintendent Douglas Cole, the PREA Compliance Manager Vaaia Gaines, and the management staff of Cedar Creek Corrections Center, for greetings, introductions and information sharing. The auditor was escorted to a conference room which served as a home base for audit preparation and organization during the audit process.

Upon arrival at Cedar Creek Corrections Center, the auditor requested and received the names of the employees assigned in management and specialized staff positions, who might be interviewed during the on-site portion of the audit. The auditor identified specialized staff to be interviewed.

Interviews of specialized staff included the following:

- Medical and Mental Health
- Incident Review Team Members
- Staff who Conduct Intake Screening
- Classification Staff
- Case Workers
- Investigations and Intelligence Staff
- Sexual Assault Nurse Examiner
- Human Resources
- Person Responsible for Contractor, Volunteer and Vendor Clearances
- Segregated Housing Staff
- Person Responsible for Monitoring Retaliation
- Higher Level Supervisor
- Aramark Contractor
- Grace College Volunteers
- First Responders
- Training Director

Specialized Staff Interviews: Specialized staff were selected from various shifts where applicable. The interviews were conducted in the privacy of a conference room or other area which allowed for a private interview. The auditor introduced himself, communicated the advisory statements to the staff, and proceeded to ask the line of questions from the interview protocols for random staff and recorded the answers by hand. Clarifying questions were asked where needed to ensure the responses were clear enough to make a determination of compliance with applicable standards. A total of 23 specialized staff interviews were conducted.

A list of all custody staff scheduled to work on the days of the on-site review was provided, and sorted by shift; Cedar Creek Corrections Center custody staff work three shifts for a 24 hour work period. The auditor explained that these requested rosters were required in order to select at random, custody staff for interviews. The auditor informed the PREA Compliance Manager that the auditor would compile a list of custody staff selected randomly for the interviews.

Random Staff Interviews: Random staff were selected from the shift rosters, considering a variety of work locations and various shifts. The interviews were conducted in the privacy of a conference room or other area which allowed for a private interview. The auditor introduced himself, communicated the advisory statements to the staff, and proceeded to ask the line of questions from the interview protocols for random staff and recorded the answers by hand. Clarifying questions were asked where needed to ensure the responses were

clear enough to make a determination of compliance with applicable standards. A total of 13 random staff interviews were conducted.

A roster of all offenders at the facility with identification numbers and assigned bed numbers was provided, and sorted by housing unit. Offenders were selected at random using this offender roster. The standard advisory statement to the offender before proceeding with the interview of the offender in a private interview room while documenting the offender answers. Clarifying questions were asked where needed to ensure the responses were clear enough to make a determination of compliance with applicable standards. A total of 15 offenders were interviewed as part of the random offender interviews. In addition, 1 offender was interviewed from the specific categories of offenders identified for interviews based upon their relevance to specific PREA standards.

The PREA Compliance Manager identified offenders in the following categories:

- Disabled
- Limited English Proficient
- Transgender & Intersex
- Gay & Bisexual
- Inmates in Segregated Housing for Risk of Sexual Victimization
- Inmates who Reported Sexual Abuse
- Inmates who Disclosed Sexual Victimization during Risk Screening

A thorough site review of the facility was conducted; the Superintendent, PREA Compliance Manager, management staff, and other custody staff escorted the auditor. The auditor toured all of the housing units, medical, mental health, the kitchen area, the warehouse, intake processing areas, the laundry, maintenance shops, industries areas, education, recreation yard, chapel, etc.

During the tour, PREA posters (English and Spanish versions) were visible throughout the facility for offenders, staff and visitors to view. As the facility was toured, posters were present in every building accessible by offenders and in multiple locations within buildings where offenders, the public and staff have access. Along with the PREA posters, additional postings were observed informing victims of sexual abuse how to gain access to trauma focused support services and anonymous reporting methods. Based upon our random discussions with staff and offenders, it is obvious the facility has done an excellent job in educating the staff and offenders of the agency's zero tolerance policy regarding sexual abuse and harassment as well as the various methods in which allegations may be reported.

Cedar Creek Corrections Center uses monitoring technology within its facility; the need for additional monitoring equipment and their placement is discussed and documented in facility meetings and consideration is given in identifying blind spots prior to camera placement. Cameras are positioned in a manner to cover blind spots while affording the offenders modesty where needed, while providing for the necessary security and evidentiary needs of the facility. While conducting interviews with the Superintendent, other administrative, and supervisory staff, it is evident that the facility has considered the use of cameras in their staffing plan and staff are vigilant in ensuring offender safety. Staff were observed touring their areas of responsibility during the on site tour.

Camera placement and sufficient custody staff coverage was observed in the absence of camera coverage, log books and offender files were reviewed. Offenders, staff, volunteers and contractors were interviewed during this site visit. Cross gender viewing issues were observed during the onsite tour. These identified issues were addressed during the onsite tour and now prevent cross gender viewing and ensure the privacy of offenders while showering, toileting or otherwise in a state of undress. Housing unit logs were reviewed and showed evidence of supervisory staff conducting unannounced rounds on all shifts. Both supervisory staff conducting unannounced rounds as well as opposite gender staff announcements within the housing units were observed during the on-site tour. Staff and offenders were questioned regarding PREA and reporting/responding requirements. All answered with appropriate levels of understanding in regard to PREA and agency policy and procedure.

During the on-site tour, impromptu questions were asked of staff and offenders. Offender phones were tested to determine the functionality of the facility's phone system for reporting sexual abuse or sexual harassment. Offenders were queried on their knowledge of the PREA phone system; offenders thoroughly explained the system, its purpose, and how the phone system is accessed by referring to the information contained on the PREA information posters and hotline phone numbers posted at every offender phone location throughout the facility. In offender work areas, staff supervision levels or camera placement was observed and is sufficient to ensure offender sexual safety. Staff and offenders were queried to determine whether offenders are in lead positions over other offenders, it is evident offenders do not hold this position over other offenders. The placement of PREA information and emotional support services posters were noted

throughout the facility; in offender housing and work areas and the placement of the PREA audit notice provided to the facility; throughout the facility.

During interviews with investigative staff; offender grievances against staff are forwarded to the grievance coordinator; Investigations staff will investigate where appropriate. Investigators and designated staff were questioned about the process for logging and tracking cases assigned, and offender grievances received by the facility. Documentation, grievance logs, computerized tracking, and other documentation necessary to make a determination of compliance with the standard were reviewed. During these interviews, the auditor based the line of questioning on the interview protocols and recorded responses.

Document Reviews: Documents related to allegations of sexual abuse (including investigation files) were reviewed. Training records, personnel records, contractor and volunteer records, and the records maintained through the offender intake process were reviewed. Copies of documents were collected, as necessary.

The PREA Compliance Manager provided Sexual Incident Reports for all 5 allegations received during the previous twelve-month period. The list included the report number, date of report, and name of the victim, name of the suspect, and the disposition or status of the case. The auditor obtained the Sexual Incident Report and investigative reports from facility investigative staff for each allegation. These reports were reviewed using a PREA audit investigative records review tool to record the following information relative to each investigative report:

- Case#/ID
- Date of Allegation
- Date of Investigation
- Staff or Inmate on Inmate
- Sexual Abuse or Sexual Harassment?
- Disposition
- Is Disposition Justified?
- Investigating Staff
- Notification Given to Inmate?

POST-AUDIT PHASE

Clarification questions, missing information, requests for additional documentation, etc. were discussed with the PREA Compliance Manager and have been provided during the onsite tour. The auditor and the PREA Compliance Manager agreed that any documents not received during the pre-audit phase or site review would be requested via email and provided by the PREA Compliance Manager.

Audit Section of the Compliance Tool: The auditor reviewed onsite document review notes, staff and offender interview notes and site review notes and began the process of completing the audit section of the compliance tool. Auditors used the audit section of the compliance tool as a guide to determine which question(s) in which interview guide(s), which onsite document review notes and/or which facility tour site review notes should be reviewed in order to make a determination of compliance for each standard. After checking appropriate “yes” or “no” boxes on the compliance tool for each applicable subsection of each standard, the auditors completed the “overall determination” section at the end of the standard indicating whether or not the facility’s policies and procedures exceeds, meets or does not meet standard. Where the auditor found the facilities policies and procedures did not meet the standard, the auditor entered appropriate comments explaining why the standard is not met and what specific corrective action(s) is/are needed for facility’s policies and procedures to comply with the standard. The auditor entered this information in the designated field at the end of the standard in review.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Cedar Creek Corrections Center (CCCC) is a minimum security facility. The facility was established in 1954; and houses approximately 480 general population male offenders. Cedar Creek is unique in many ways. The facility is located in the Washington Capital Forest and provides numerous academic, vocational and work program opportunities for offenders to participate in.

Academic and Partnership Programs include but not limited to:

- Adult Basic Education
- Dog Training Program
- General Education Diploma (GED)
- Getting it Right, Job Readiness
- Work and Vocational Programs

Work & Vocational Programs include but not limited to:

- Building Maintenance
- Computer Technology
- Community Work Crews
- Composting & Recycling
- Department of Natural Resources Forestry Workers
- Drywall Installation
- Information Technology
- Institutional Support Jobs
- Roofing
- Siding
- Sustainability Jobs (a partnership with, The Evergreen State College)
- Waste Water Treatment Plant

The Community Partnership Program at Cedar Creek is involved in several community programs.

Giving Back to the Community

Cedar Creek partners with our local schools, businesses, and churches to collaborate on several community projects each year. Through their own fundraising events, inmates have donated funds to ROOF, St. Jude's Hospital, Littlerock School, and the Dog Program for Veterans. Additionally, CCCC staff have held food drives for local food banks, supported local non-profits such as the Rochester ROOF program, and Adopt-a-Family during the holidays annually.

Serving the Community

Cedar Creek provides community service prison work crews that perform thousands of hours of work each year for local, county, non-profit organizations, and state agencies.

Cedar Creek also collaborates with the Department of Natural Resources (DNR). Prison work crews under DNR's supervision maintain trails and surrounding campgrounds of the Capital Forest, plant trees, and fight forest fires.

Sustainability in the Community

Cedar Creek is dedicated to engaging staff members and inmates in sustainability efforts. These efforts include gardening, composting, recycling, and rainwater catchment.

Through the Sustainability in Prisons Program (SPP) Cedar Creek partners with The Evergreen State College and the Department of Fish and Wildlife to connect inmates with nature and teach them about environmental responsibility. Inmates at Cedar Creek participate in several sustainability programs that directly support and serve the community:

- **Oregon Spotted Frog Hatchery & Reintegration Program:** In 2012, 247 endangered Spotted Frogs were released, part of the 500 released from 2010-2012.
- **Beekeeping Program:** Teaches eco-friendly bee management practices utilizing current organic techniques. Inmates produce bee products, such as honey which is used by the prison facility kitchen, as well as lip balm and hand lotion.

SUMMARY OF AUDIT FINDINGS

The on-site portion of the audit was a consistent paced review of all areas of the institution. Facility staff were very helpful and responsive to the questions and concerns expressed during this portion of the audit. The efforts put forth by the Cedar Creek Corrections Center staff were evident and staff are commended for their efforts. It was certainly a pleasure for the audit team to spend time with the staff of Cedar Creek Corrections Center and have the opportunity to assist in their PREA compliance efforts. During this close-out discussion, the facility staff and the PREA Coordinator were provided with an overview of what had been identified as areas of concern.

- Overall, it is evident that the Cedar Creek Corrections Center staff have been working towards compliance with the PREA standards. Because of this hard work, the facility is in compliance with a significant number of the standards.
- Some of the positives observed during the audit included:
 - Interaction between staff and offenders helped establish open line of communication. It appeared offenders were comfortable bringing up their issues/concerns with staff.
 - Through the use of staff posts and video surveillance, blind spots appeared to be eliminated.
 - PREA posters were in place in all housing units, visiting and offender work/recreational areas.
 - Supervisory and management staff have a clear understanding of the policy.
 - Announcement of opposite gender staff entering the housing units seemed to be routine and part of everyday business.

The offender population understands their rights to be free from sexual abuse and could explain how they would report an allegation. Offenders stated they felt sexually safe at this facility.

Training records reflected that mandatory staff training has been completed and that a process was in place to ensure mandatory training will be completed for new hires.

Intake screening staff take ownership of the PREA intake process and are very thorough in their reviews of newly arriving offenders.

The PREA Compliance Manager is very knowledgeable about all procedures and processes of the facility and clearly has the time and authority to thoroughly perform the required duties.

Some of the areas of general concern include:

During the on-site tour, Cedar Creek Corrections Center, was not in compliance with standard §115.13(a) (5), Supervision and Monitoring. Four locations were observed allowing offenders to isolate themselves; creating blind-spots. Facility management staff identified solutions to include: removal of locking devices or modifying the affected area to remove the offender's ability to create a blind spot. Upon completion of the modifications, pictures of the affected areas were forwarded to the auditor. All modifications to the facility were completed during the on-site tour, bringing the facility into compliance with this standard.

During the on-site tour, Cedar Creek Corrections Center, was not in compliance with standard §115.15(d), Limits to cross-gender viewing and searches. Showers in a housing unit were observed to potentially allow staff of the opposite gender to view an offender's breasts, buttocks, or genitalia. Facility management staff identified a solution to enable offenders to shower with-out staff of the opposite gender viewing their breasts, buttocks, or genitalia. Upon completion of the modifications, pictures of the affected areas were forwarded to the auditor. All modifications to the facility were completed during the on-site tour, bringing the facility into compliance with this standard.

Number of standards exceeded: 5 (11.7%)

Number of standards met: 37 (86%)

Number of standards not met: 0 (0.0%)

Number of standards not applicable: 1 (2.3%)

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.

The Washington Department of Corrections Policy, DOC 490.800 (dated 10/014/2016), Prison Rape Elimination Act (PREA) Prevention and Reporting 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.” The policy outlines the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment.

The Washington Department of Corrections PREA Coordinator is Beth Schubach.

Cedar Creek Corrections Center’s PREA Compliance Manager is Vaaia Gaines, Correctional Program Manager. A review of the facilities Organizational Chart, and an interview with the PREA Compliance Manager, the PREA Compliance Manager reports directly to the Superintendent.

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.

The Washington Department of Corrections Policy, DOC 490.800 (dated 10/14/2016), Prison Rape Elimination Act (PREA) Prevention and Reporting states, “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.”

Documentation supplied by the Agency PREA Coordinator dated 12/16/2016 reflects the Washington Department of Corrections contracts for the housing of offenders with five entities. Documentation supplied by the PREA Coordinator reflects these contract facilities have either been audited and are fully compliant with the PREA requirements or are in the process of being audited; where applicable. Finalized PREA audits were reviewed from applicable the contractors to ensure full compliance; these audits reflected full compliance with the PREA standards.

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.

Washington Department of Corrections Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, requires Superintendents to compile quarterly reports, submitting these reports to their Deputy Director. In addition, section D of this policy requires Superintendents to document compliance with the staffing plan.

According to documentation provided by the facility and an interview with the Superintendent, these factors required by the PREA standards are considered in developing staffing levels, the factors considered include; the operational mission of each facility, video monitoring capabilities, generally accepted correctional practices, facility design, and the make-up of the offender population.

Washington Department of Corrections Policy, DOC 400.210 (dated 05/15/2015) Custody Roster Management (Restricted) was reviewed. This policy allows Superintendents to request additional staff where needed due to security or other needs. Section C of this policy requires the Superintendent of the facility to ensure that an internal audit of the staffing plan be conducted on an annual basis. The internal audit of the staffing plan also includes a PREA Vulnerability Assessment. This assessment is an extensive review of all areas of the facility to ensure adequate staffing levels are present where offenders may be present. Justification for the need for additional staff or modifications to the facility, to include the deployment of video monitoring equipment, is addressed within this assessment. The annual review of the staffing plan includes facility and department management level staff to include; the Prisons Staffing Manager, the Assistant Secretary for Prisons, the Prisons Budget Manager, the Superintendent, the Local Business Advisor, the Associate Superintendent, the Custody Roster Manager, and the departments PREA Coordinator.

According to the documentation provided by the facility and an interview with the Superintendent, there are no findings of inadequacies by judicial ruling, Federal Investigative Agencies, or internal or external oversight bodies. A review of the Shift Summary Report reflects the facility can move staff from location to location as the security needs change or deficiencies in offender supervision is realized.

Washington Department of Corrections Policy, DOC 110.100 (dated 03/01/2013) Prison Management Expectations, Page 2 states, "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 alerting one another that these tours are occurring, except when necessary for the legitimate operational functions of the facility." Supervisory staff who is assigned to housing units make random unannounced rounds through their areas of responsibility. This was observed during the site review. Unannounced rounds are conducted by supervisors on all shifts, as supervisors were either observed in housing units performing their normal duties or were observed throughout the facility conducting rounds. Supervisor rounds are documented in the housing unit logs. The supervisors, correctional staff and other staff provide adequate supervision of the offender population; in addition, the facility has cameras placed throughout the facility to provide additional security coverage and monitoring.

During the on-site tour, Cedar Creek Corrections Center, was not in compliance with standard §115.13(a) (5), Supervision and Monitoring. Four locations were observed allowing offenders to isolate themselves; creating blind-spots. Facility management staff identified solutions to include: removal of locking devices or modifying the affected area to remove the offender's ability to create a blind spot. Upon completion of the modifications, pictures of the affected areas were forwarded to the auditor. All modifications to the facility were completed during the on-site tour, bringing the facility into compliance with this standard.

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.

According an interview and documentation provided by the Superintendent of Cedar Creek Corrections Center (dated 01/20/2017) does not house offenders under the age of 18 years old. This standard does not apply.

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.

Washington Department of Corrections Policy, DOC 420.310 (dated 01/01/2014), Searches of Offenders, page 5, states, "Strip searches of male offenders require that one of the employees conducting the search be male. If the second person conducting the strip search is female, she will position herself to observe the employee doing the strip search, but will not be in direct line of sight with the offender.", "If a strip search is conducted that does not meet these gender requirements for staffing, a confidential report will be completed in IMRS and submitted before the end of shift. The distribution will include the PREA Coordinator." In addition, DOC 420.312 (dated 10/27/2014), Body Cavity Search, page 3, states, "All participants in a body cavity search process will be the same gender as the offender." There were no instances of cross-gender strip searches, body cavity searches or pat-down searches within the past 12 months. This information was verified through random and specialized interviews of staff and offenders.

Washington Department of Corrections Policy, DOC 490.820 (dated 10/31/2016), Prison Rape Elimination Act (PREA) Risk Assessments and Assignments, states, "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." There were no instances of offenders being searched or physically examined for the sole purpose of determining the offender's genital status within the past 12 months. This information was verified through random and specialized interviews of staff and offenders.

During the tour of the facility, and in interviews with staff and offenders, female staff confirmed they do not strip search male offenders. All staff interviewed stated they knew the proper way to pat-down a transgender and intersex inmates; custody staff described or demonstrated the “T” or “Cross Method” as how to pat-down a transgender and intersex offender. A review of the “Annual In-Service, Pat Search” training reflects the training provided to staff, when conducted would be accomplished in a professional and respectful manner. This training emphasizes tact and respect when conducting pat-down searches of transgender and intersex inmates. Additionally during the onsite tour, discussions with staff, offenders and documentation supplied by the Superintendent; there currently is no transgender offenders housed at Cedar Creek Corrections Center.

During the on-site tour it was observed that staff of the opposite gender announce their presence when entering housing units. This practice was confirmed through offender and staff interviews.

Modesty screens were in place in medical areas where a clinician or medical staff may require an offender to disrobe when needed.

During the on-site tour, Cedar Creek Corrections Center, was not in compliance with standard §115.15(d), Limits to cross-gender viewing and searches. Showers in a housing unit were observed to potentially allow staff of the opposite gender to view an offender’s breasts, buttocks, or genitalia. Facility management staff identified a solution to enable offenders to shower with-out staff of the opposite gender viewing their breasts, buttocks, or genitalia. Upon completion of the modifications, pictures of the affected areas were forwarded to the auditor. All modifications to the facility were completed during the on-site tour, bringing the facility into compliance with this standard.

Additionally during the onsite tour, discussions with staff, offenders and documentation supplied by the Superintendent; there currently is no transgender offenders housed at Cedar Creek Corrections Center.

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.

Washington Department of Corrections Policy, DOC 310.000 (dated 08/27/2012) Orientation of Offenders, page 3, states, “Offenders will receive orientation information, both orally and in writing, in a manner that is clearly understood by offenders.”

Washington Department of Corrections Policy, DOC 450.500 (dated 01/14/2013) Language Services for Limited English Proficient (LEP) Offenders, page 2, states, “The Department will provide interpretation (i.e., oral) and translation (i.e., 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 Limited English Proficiency (LEP) offenders under Department jurisdiction.”

The agency has a standard agreement with Language Link in order to provide interpreter services for any offender whose needs cannot be met by Washington Department of Corrections staff or their current implementations of PREA information for non-English speaking or otherwise developmentally disabled. Language Link was called; confirming the services are readily available to the prison, and these services are provided 24 hours a day, 7 days a week. In addition, to the Language Link, Cedar Creek Corrections Center, provided documentation (dated 12/02/2016), lists of 14 contractors who are to be utilized as an interpreter when required.

Cedar Creek Corrections Center provided 13 contracts for American Sign Language Services (ASL). These contractors are to provide ASL interpreter services for any offender with this assessed need. In addition, the contract ASL contracts reflect verbiage informing the

contractor of their PREA related responsibilities.

The facility has taken the appropriate steps necessary to ensure offenders with a disability, are Limited English Proficient, or have other communication needs have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA postings are all available and sufficiently posted in multiple languages throughout the facility, offender orientation education is provided in different formats to include multiple types' brochures to entice the offenders to read the information. This information was confirmed through interviews with the intake staff that, if needed, they will read the intake information to offenders, or when language is a barrier; seeks the assistance of certified staff interpreters or a contract interpreter when required. During staff interviews, the contact information for language services was readily available, and was provided for the language services.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting states, "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 center, juvenile facility or other institution; 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 activity described above.

WADOC Policy, DOC 810.800 (dated 09/01/2015), Recruitment, Selection, and Promotion requires the preferred candidate to complete the Department of Corrections form, DOC 03-502 – Sexual Misconduct Disclosure. This form requires perspective employees, contractors, and volunteers to disclose if they have had any sexual misconduct in their history at the time of hire. Additionally, this policy requires the department consider any incidents of sexual harassment in determining whether or not to hire, promote, or enlist the services of anyone who may have contact with an offender.

WADOC Policy, DOC 810.015 (dated 07/01/2014), Criminal Record Disclosure and Fingerprinting states, "All applicants will be background checked before initial appointment or promotion." The DOC 490.800 states, "The department will obtain information through one or more of the following: Washington Crime Information Center and National Crime Information Center; Employment/Volunteer Applications; Reference checks; Personnel File Review; and Contract Disclosure Statements. All external applicants must disclose any previous institutional employment. These applicants are required to complete a form to authorize the release of information so that the facility can complete a work history background check.

WADOC Policy, DOC 400.320 (dated 09/12/2011), Terrorism Activity, states, "Criminal record checks will be initiated on DOC 05-370 Request for Criminal History Record Information WASIS/NCIC III Check NCIC/WACIC Check and conducted per DOC 810.015 Criminal Record Disclosure and Fingerprinting for:", "All new employees, contractors, and volunteers prior to assuming their duties, and..." Additionally, contracts between workforce agencies and the WADOC require the employment agency to complete background checks that comply with PREA hiring and promotion policy on all temporary employees that will have contact with offenders.

WADOC Policy, 810.015, (dated 07/01/2014), Criminal Record Disclosure and Fingerprinting states, states, "Failure to fully divulge

criminal information may be cause for disciplinary action, up to and including dismissal or termination of service.”

WADOC Policy, DOC 800.005, (dated 11/01/2013, Personnel Files states, “To the extent possible, institutional employers seeking employment verification will be provided all available information on substantiated allegations of sexual misconduct or harassment.”, “Employment verification requests from institutional employers will be directed to the Appointing Authority, who will coordinate the review and response.”

DOC 810.015, (dated 07/01/2014), Criminal Record Disclosure and Fingerprinting states, states, “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 5 years.”; additionally, “Annual criminal background checks are required as part of weapons qualification for all armed employees per DOC 410.235, Use of Force Training and Qualifications and DOC 410.930 Community Corrections Use of Force Training.; additionally DOC 810.015 states, “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.”

The number of persons hired over the past 12 months who may have contact with offenders who have had criminal records checks was reported as 7. A review of personnel files was reflected background checks are completed by the institution/department during the initial hiring process and on an annual basis as required by department policy.

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.

Washington Department of Corrections Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, requires the Department will consider the possible effects on its ability to protect offenders from sexual misconduct when: Designing a new facility; Planning substantial expansions or modifications of existing facilities, and; Installing or updating video monitoring systems, electronic surveillance systems, or other monitoring technology.

A review of documentation provided by Cedar Creek Corrections Center; the facility has identified areas where the installation of video monitoring equipment is required. These modifications will be implemented in four phases. At the completion of the four phases, approximately 170 additional cameras will be installed throughout the facility through 2018; enhancing the facilities ability to protect inmates from sexual abuse.

The Superintendent indicated when any project requires the installation or updating of video equipment, a review of the anticipated area is conducted to assist in properly determining the appropriate location where cameras will be installed. Areas where PREA incidents have occurred or where blind spots have been identified are considered in this review.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response, section I, addresses the department's policy for responding to allegations of sexual misconduct and Sexual Assault. This policy contains a guide and checklists that clearly addresses the process to preserve evidence for possible administrative proceeding or criminal prosecution. This process closely mirrors the Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Forensic Examinations, Adults/Adolescents".

WADOC Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, states, All allegations that appear to be criminal in nature will be referred for law enforcement investigation by the Appointing Authority/designee.

A memorandum provided by the WADOC, Chief of Investigation, (dated 12/20/2016); WADOC is responsible for conducting all administrative investigations related to PREA; WADOC staff do not have law enforcement powers or certification, as such, are not authorized to conduct any type of criminal investigation; All felonies are referred to Washington State Patrol for investigation/prosecution. Washington Administrative Code (WAC) 137-28-190 requires that all felonies be reported to law enforcement.

Referrals may be made using DOC 03-505 Law Enforcement Referral of PREA Allegation. In this case, evidence collection is turned over to the Thurston County Sheriff's Office or the Washington State Patrol. The Shift Commander for Cedar Creek Corrections Center (CCCC) was interviewed and he was able to articulate the entire response process and demonstrated how he would ensure compliance with PREA policy.

WADOC Policy 490.850 requires that all offenders alleging sexual acts perpetrated by either staff or another offender that occurred within the previous 120 hours and involved penetration or exchange of body fluids will be assessed for immediate medical needs before transport to the designated community health care facility for a forensic exam. The department's response checklist also addresses the proper process to insure the victim is seen by a forensic examiner. CCCC does not complete forensic medical exams. According to documentation provided by the facility, all cases that require SAFE/SANE services are transferred to Providence, St. Peter Hospital. There were no cases requiring SAFE/SANE services during this audit period. A review of these investigative files showed compliance with the PREA policy and procedures. The Emergency Room Nurse was interviewed telephonically. She indicated that Providence, St. Peter Hospital handles all of the forensic exams for all patients and will not turn away any victim requiring services.

WADOC Policy 490.850 requires that victims of sexual assault be offered a victim advocate. WADOC has a contract in place with Washington Department of Commerce, Office of Crime Victims Advocacy to provide victim advocates for CCCC, and in person consultations may be available to supplement phone based support. Additionally, this policy states, "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." There were no cases requiring a victim advocate during this audit period.

The victim advocate provides assistance and support during the forensic medical examinations through the local court process. Victims are provided with the victim advocate contact information and are given education, mental health referrals, and offered follow-up services.

The PREA Compliance Manager was interviewed and verified that the role of the Victim Advocate is provided through the MOU with the Safe Place. Safe Place was phoned confirming they provide victim advocate services for CCCC and a contract is in place for these services.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting establish a procedure for conducting criminal investigations related to PREA allegations. A memorandum provided by the WADOC, Chief of Investigation, (dated 12/20/2016); WADOC is responsible for conducting all administrative investigations related to PREA; WADOC staff do not have law enforcement powers or certification, as such, are not authorized to conduct any type of criminal investigation; All felonies are referred to Washington State Patrol for investigation/prosecution. Washington Administrative Code (WAC) 137-28-190 requires that all felonies be reported to law enforcement.

WADOC Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, requires the Department to thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department. Additionally, policy states, all allegations that appear to be criminal in nature will be referred for law enforcement investigation by the Appointing Authority/designee. Referrals may be made using DOC 03-505 Law Enforcement Referral of PREA Allegation. The Washington Department of Corrections Secretary's Designee states, the agency, through the PREA Coordinator, ensures that administrative or criminal investigations are completed for all allegations of sexual abuse or sexual harassment. Investigative staff stated that the outside agency has the authority to conduct criminal investigations.

WADOC staff are not sworn peace officers, therefore cannot conduct criminal investigations. If at any point during the administrative investigation, it appears that a felony was committed, the case is referred to the city or county law enforcement or the Thurston County Sheriff's Office or the Washington State Patrol for criminal investigation. According to a memorandum authored by the Superintendent of Cedar Creek Corrections Center (CCCC) (dated 01/20/2017), states no cases were referred to outside agencies for possible criminal investigation during the past year. The management staff at CCCC meet with representatives from the Thurston County Sheriff's Office periodically to discuss and coordinate each agencies responsibilities during a criminal investigation. The meeting agenda for August 1, 2016 between the two agencies was reviewed. The discussions at this meeting included; renewal of a Memo of Understanding; Types of contraband at CCCC; PREA response, Law Enforcement and their roles; Notification procedures and Prosecution Referrals.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, requires that all new employees, contract staff and volunteers receive initial PREA training upon hire/assignment, followed by annual training. A review of the training guide, PREA 101, revealed that the training covers policies and operational memorandums related to the Prison Rape Elimination Act, and the criminal and disciplinary penalties for engaging in prohibited behavior. The training also covers: The WADOC zero tolerance policy; How to prevent, detect, report, and respond to sexual misconduct; Offender’s rights to a sexual abuse and sexual harassment free environment; offender’s and staff’s right to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamic of sexual abuse and sexual harassment in confinement; The common reactions of victims; How to detect and respond to signs of threatened or actual sexual abuse; How to avoid inappropriate relations with offenders; How to communicate effectively with LGBTI offenders and; How to comply with laws related to mandatory reporting.

The training provided by WADOC, addresses both male and female issues in some detail. Employees at Cedar Creek Corrections Center receive training gender specific to both male and female offenders.

The current training was initiated in 2014. All staff are required to take the training at that time. Since that date, all staff are required to take the training on PREA annually; exceeding the every two year training requirement stated in standard §115.31(c) – Employee training. All of the training is completed through a computer delivered class. In addition to the annual PREA training, all staff, contractors and volunteers must self-certify that have not had any civil, criminal or administrative action taken against them for sexual misconduct involving an incarcerated individual. During the past year, of the 133 employees that are assigned to the facility, only five have not attended the required training. That is 96% compliant. All five of the employees were out of work due to long term illness or other excusable absence. Random training files reviewed demonstrated compliance with the training.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, requires that all new employees, contract staff and volunteers receive initial PREA training upon hire/assignment, followed by annual training. The training that volunteers and contractors are required to take is the same training that employees must take (PREA 101). This training exceeds the requirement for this standard due to the training is required on an annual basis. All training records reviewed consistently showed that the training had been provided previously and during the last 12 month period.

Contractors, volunteers and vendors visiting Cedar Creek Corrections Center only one time, due to a special event or need, are provided the PREA brochure that explains the WADOC PREA policy.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting requires that all offenders will be provided PREA related information, which will include information on the department's zero tolerance stance and ways to report sexual misconduct. Information will be presented in a manor allowing offenders to ask questions of the staff member facilitating the orientation. Offenders are provided with a brochure (English or Spanish) that explains the Department's policies and how to report sexual misconduct when they arrive at Cedar Creek Corrections Center (CCCC).

During transport to CCCC, the PREA video is played on the transportation bus (in a loop) as offenders are transported to CCCC and other facilities. This is corroborated through random offender interviews. Offenders are provided with a brochure (English or Spanish) that explains the Department's policies and how to report sexual misconduct when they arrive at CCCC. Offenders are scheduled and attend an orientation class after arrival. The offenders again watch the PREA video, receive the offender handbook which explains the PREA policy and how to report any PREA related allegations, and receive cartoon type booklets for low functioning offenders. The offenders sign a document demonstrating that they attended the class. Copies of signed documents were provided to this auditor.

WADOC implemented training offenders on the PREA policy in March 2006. At that time all offenders currently housed within the Department were given a copy of the PREA brochure and allowed to attend orientation. Additionally, PREA information is available via posters throughout the facility.

WADOC has several versions of PREA brochures available for low functioning offenders. CCCC plays a video that explains the PREA policy and how to report sexual misconduct. The video is close captioned for the hearing impaired. This video is also in Spanish.

During the offender interviews and while touring the facility, all offenders explained the PREA policy and how to report an incident if required. Every housing unit and program area had PREA posters in English and Spanish posted on the wall and phone numbers available to the offenders for making a report. Additionally, offenders are able to use a confidential phone booth used for attorney phone calls and a kiosk to make anonymous and confidential reports of PREA incidents outside of the agency.

During the site visit, posters, brochures and Hotline numbers available for viewing around the institution in housing units and other areas. Multi-language lines area available through a contract service. The hotline number was phoned and a confirmation email was received.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, requires all PREA Investigators be trained in: Crime scene management and investigation, including evidence collection in Prisons and Work Releases; 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.

A review of the lesson plan provided to the auditor demonstrates compliance with this standard. All of the required topics are covered in the 14 hour training required by investigators. A list of WADOC PREA trained investigators revealed that 14 employees are qualified to conduct PREA investigations.

While interviewing the staff trained for PREA investigations, they were able to articulate the investigation process and their responsibility. The training that they attended prepares the investigator on how to conduct an investigation without compromising the integrity of the investigation. If at any time the investigation appears to reveal possible criminal activity, the investigation is suspended and the case is referred to the local law enforcement agency.

All allegations that appear to be felonious crimes are referred to either the Thurston County Sheriff's Office or the Washington State Police. WADOC is not responsible for the training of these agencies.

The specialized training curriculum for the facility investigators was reviewed. This training meets the requirements of this standard including; the proper use of Miranda and Garrity; sexual abuse evidence collection; and criteria used to substantiate a case for prosecution. The agency provided documentation, verifying the employees who conduct administrative investigations have participated in the specialized training. Interviews with the investigative staff showed the staff has a clear understanding of their responsibilities and an understanding of this training.

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.

Washington Department of Corrections Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, requires that Health Service employees/contract staff, with exception of medical records, clerical, pharmacy personnel, the Dietary Services Manager, and the Psychologist assigned exclusively to sex offender treatment program, will be trained in: Detecting and assessing signs of sexual misconduct; Responding effectively and professionally to sexual misconduct victims; Completing DOC 02-348 Fight/Assault Activity Review; Preserving physical evidence; Reporting sexual misconduct, and; Counseling and monitoring procedures. Additionally all of the contract medical staff must attend the same PREA training that all employees receive annually.

A review of the provided lesson plan demonstrates compliance with this training requirement. A random review of training records reflects that all of the medical staff have received the required training. During the interview process with random medical and mental health staff, the staff explained the training that they received relative to PREA.

The facility employs 4 medical and mental health care practitioners who work regularly at the facility. According to their interviews and PREA Audit Report

related documentation, all have received the general PREA training.

Through discussions with supervisory personnel, medical and mental health staff, all staff understand they are prohibited by procedure from performing forensic examinations on sexual abuse victims.

Interviews with medical and mental health reflect these staff are knowledgeable of their roles and responsibilities. Medical staff at Cedar Creek Corrections Center do not conduct forensic exams. All forensic medical exams are conducted by a SAFE/SANE at the Providence, St. Peter Hospital.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Risk Assessments and Assignments, requires Classification Counselors and designated Work Release employs 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 compliance within 72 hours, even on weekends and holidays. The Washington Department of Corrections Policy, DOC 490.820 (dated 10/31/2016), Prison Rape Elimination Act (PREA) Risk Assessments and Assignments is Cedar Creek Corrections Center's (CCCC) local policy to address proper assessment and assignments based on PREA concerns. This policy requires that a follow-up assessment be completed on each offender between 21 and 30 calendar days after the offender's arrival at the facility. Additional assessments will be completed within 10 days by the assigned Classification Counselor when additional information is received, or the offender discloses information, that suggests potential for victimization or predation.

WADOC uses an objective screening program called Offender Management Network Information (OMNI) to screen all offenders for risk of victimization and abusiveness. The OMNI program has "yes" and "no" check boxes and data fields for the screening staff to enter data about each offender. Based on the data entered, the offender is rated on their potential for victimization or abusiveness. Nine of the ten criteria listed in PREA 115.41 (d) are included for entry in OMNI. There is not a location to enter information on civil immigration statuses. CCCC does not house offenders solely for civil immigration processing. OMNI also includes a field to enter information about prior acts of sexual abuse, violent offences, and history of prior institutional violence or sexual abuse. Offenders are not disciplined for refusing to respond to these questions. Access to this OMNI system is limited to classification staff/caseworkers; offenders do not have access to this system.

During the site review, the intake process was performed by the staff that regularly perform intake screening. Per Washington Department of Corrections Policy, DOC 300.380 (dated 04/14/2014) Classification and Custody Facility Plan Review, requires all offenders have a PREA Risk Assessment completed. This is completed prior to an offender arriving at a facility to include CCCC. The offender is initially placed in a temporary bed based on their individual case factors (to included potential victim or potential predator results). Once the offender arrives at the facility, CCCC, the case factors are re-evaluated by facility staff and the offender is re-interviewed to insure that there are no conflicts or additional information which could affect the current bed assignment. Within 72 hours the assigned caseworker will again interview the offender, reassessing the offender in the OMNI system noting any changes. After day 21, the assigned caseworker will re-interview the offender, reviewing the offender's case factors to insure there is no new information has been received. During each of the reviews, the offender is asked about their perceived safety or if there is any information which could affect their safe housing. This was confirmed with interviews with random offender interviews and interviews with intake staff and caseworkers. A list of offender's arrival dates and dates of evaluations demonstrates substantial compliance with this standard. The facility has a tracking method in place to ensure

offenders are evaluated and re-evaluated as required as required.

A memorandum provided by the Assistant Secretary of the Washington Department of Corrections, (dated 01/03/2017); states in part: The Washington Department of Corrections does not detain persons solely for civil immigration purposes. They must be incarcerated on a criminal matter.

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.

Washington Department of Corrections (WADOC) Policy, DOC 300.380 (dated 04/14/2014) Classification and Custody Facility Plan Review requires each facility conduct a PREA risk assessment in order to place offenders in the proper housing, bed, work, education and program assignment ensuing separation of potential victims and potential predators. Each offender is evaluated on his or her own case factors to ensure their safety. Any concerns regarding work, treatment, education, offender change programs, or other activities raised after reviewing the offender's 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.

Per policy each transgender or intersex offender is reviewed for any threats to their safety. (WADOC) Policy, DOC 490.820 (dated 10/31/2016) Prison Rape Elimination Act (PREA) Risk Assessments and Assignments states, WADOC will utilize the form DOC 02-384, Protocol for the Housing of Transgender and Intersex Offenders, to evaluate each transgender and intersex offender prior to housing. The DOC 02-384 is a thorough assessment of the offender's case factors and these reviews take into account the offender's own view of their safety. Every six months each transgender and intersex offender is re-evaluated utilizing form DOC 02-385, Protocol for Housing Review for Transgender and Intersex Offenders. These reviews are a comprehensive assessment of the offender's safety concerns, including the offender's own perceived views of his or her safety.

LGBTI offenders are housed in several different living areas within Cedar Creek Corrections Center (CCCC). They are not housed in just one location. No interviews were conducted with LGBTI offenders; the facility reported there were no offenders of this identity currently housed at the institution. This was confirmed with interviews with staff and offenders and prison management. An interview with PREA Compliance Manager verified that agency policy requires a transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration on a case-by-case basis in the twice yearly reassessment. Additionally during the onsite tour, discussions with staff, offenders and documentation supplied by the Superintendent; there currently is no transgender offenders housed at CCCC.

The physical design of the showers at CCCC allows for every offender to shower separately; offenders are able to draw a shower curtain to allow for modesty while showering.

The design of CCCC does not allow for opposite gender viewing within housing units or areas with showers and toilets.

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.

Washington Department of Corrections Policy, DOC 490.820 (dated 10/31/2016) Prison Rape Elimination Act (PREA) Risk Assessments and Assignments states, states that offenders, who score at potential risk for sexual victimization, may be placed in Administrative Segregation if necessary to separate potential victims from potential predators. This placement shall only occur if no alternative housing is available. In the rare case that the offender is in Administrative Segregation for more than 30 days, a review will be conducted every 30 days to determine continued placement. Offenders on this type of placement will have access to programming and job assignments to the extent possible. When unavailable, the reason and duration will be documented in the offender's electronic file.

According to a memorandum dated January 20, 2017, authored by the Superintendent, CCCC has not had any offenders placed in involuntary segregation as a result of risk of victimization concerns. When staff were interviewed regarding how offenders would be housed if no available housing was available, the general response was that the offender would be placed other areas of the facility if it was safe to do so. If the offender was placed in segregation due to no other housing options being available, then any restrictions to programs imposed on the offender would be documented in the file. Staff and the Superintendent informed me that the longest the offender would have to stay, before transfer to another facility would be a few days.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting provides several methods to report sexual abuse and sexual harassment, retaliations for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Offenders can correspond through legal mail (which is not read), call a toll free phone number to the WADOC PREA unit, inform staff, send a note to a staff member or have a friend or family member report it. Many of these options allow for anonymous reporting. When calling the headquarters' PREA Unit, offenders do not need to utilize their IPIN to identify the caller. This was verified during the onsite tour and an email was received confirming this process is anonymous. WADOC has a contract in place with the Colorado State Department of Corrections, (contract No. CMS 65853), to serve as WADOC's external reporting entity.

WADOC Policy, DOC 490.850 (dated 09/01/2016, effective 03/01/2014 thru 03/01/2019) Prison Rape Elimination Act (PREA) Response states, 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. Interviews with staff reflects, staff are trained, to document all reported PREA allegations, whether it is in writing, a verbal report, anonymously, or a third party report.

Formal and informal staff interviews were conducted, staff indicated they would accept the report from the offender and document on a Sexual Incident Report (SIR). They shared that offenders can report several different ways including reporting to any staff, using the kiosk, calling the number on the poster, calling the number posted on all the walls near the telephones, and telling family. Staff who were interviewed stated they also can privately report sexual abuse or harassment of offenders. In all cases, staff stated they could report to a supervisor, and it would be kept private.

Formal and informal offenders interviews were conducted, offenders interviewed reported that there are several ways they could report. Offenders described the telephone number posted on the wall, posters with contact information, and the kiosk which has reporting information, the ability to report to family or staff, and placing a note in the facility mail box. Most indicated they would tell family or tell staff.

A review of the PREA case log reveals that allegations have been received verbally, from notes, anonymously, from the PREA hotline and third party reports.

A review of the offender handbook, updated July 2016, indicates internal reporting mechanism for offenders is by: 1) writing an offender grievance and giving it to a staff member; 2) placing the grievance with outgoing mail in any housing unit; 3) mailing the grievance directly to the institution; 4) family reports; or 5) submitting the report on kiosk. In addition, the offender handbook allows offenders to privately report by dialing the telephone number painted above all the offender telephones, or the public number which is monitored and recorded. PREA posters, written in both English & Spanish, provide a number which can be called confidentially.

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.

PREA standard 115.52(a) states that an agency is exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse. A Memorandum dated December 20, 2016; signed by the Secretary of Washington Department of Corrections, states that WADOC does not process PREA-related allegations through the offender grievance process.

If an offender files a grievance alleging sexual misconduct, a copy of the grievance is forwarded to the PREA unit. If it is determined that the issue of the grievance is not related to PREA, the offender may pursue the issue through the grievance process. If the issue has been determined to be PREA related, the case is referred to the Appointing Authority who signs the case to an investigator. The investigation is pursued like any other PREA investigation. There are no time limits to reporting an allegation of sexual misconduct. This was verified through interviews with specialized staff who conduct investigations into PREA allegations. Since the PREA unit forwards the grievance to the appointing authority to initiate an investigation, the grievance is not submitted to the staff member who is the subject of the complaint.

A review of the PREA allegation log revealed that Cedar Creek Corrections Center did not receive any PREA allegations through the grievance process during this audit period.

Policy mandates that the agency will not impose a time limit on when an offender may submit a grievance regarding an allegation of sexual
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abuse. Agency does not require an offender to use any informal grievance process or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. Review of offender handbook reveals reports of sexual abuse allegations may be made at any time using the Grievance Suggestion Form. These Grievances will be deemed Emergency and follow all Emergency Grievance timelines.

Emergency grievances are complaints that involve potentially serious threats to life or health of an offender or staff member. Through interviews with staff and offenders, as well as documentation, it was shown that a PREA Grievance is handled immediately and the offender is interviewed the day the incident is shared with staff.

Over the past 12 months, no emergency grievances related to PREA issues, have been filed.

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.

The Washington Department of Corrections and Cedar Creek Corrections Center have several outside advocacy groups that offenders can contact both via mail or telephone for emotional support services related to sexual abuse. Offenders have access to a brochure that lists all of the community sexual assault programs in Washington State. Additionally, the facility has posters in several locations with the phone number and hours of operation for the Office of Crime Victims Advocacy (OCVA). The WADOC does have an interagency agreement with the Office of Crime Victims Advocacy to provide advocacy services to offenders who are survivors of sexual assault.

Per the Washington Department of Corrections Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, the offender may dial the posted toll-free OCVA PREA Support Services number to contact a support specialist. Calls will not be monitored or recorded, and the offender IPIN will not be required. Additionally, in-person consultations may be available to supplement phone based support for eligible offenders. Communications between the offender and the OCVAPREA Support Specialist is confidential and will not be disclosed unless the offender signs an authorization of release of information.

Formal and informal offender interviews, offenders indicated that they knew about outside victim advocates that would be available to talk with them. Offenders were able to describe the location of advocacy phone numbers throughout the facility. Most offenders interviewed knew that the Advocate telephone numbers were kept confidential, but have not used the services. The offenders all indicated there were painted signs and posters around the institution that provide the contact information and telephone number if they needed access. Some offenders commented on the PREA education video being played on the transportation bus. All of the offenders interviewed said they would talk to staff if they needed any services.

Using the telephone number from the poster within a housing unit, A Safe Place was contacted the victim advocate, during the call, A Safe Place employee said that if they receive a call from the facility they will process it accordingly. When a call is received, it goes to a voice mail or to the Victim Advocate's cellular phone to be addressed.

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.

Per the Washington Department of Corrections (WADOC) Policy, DOC 490.800 (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, assigns responsibility to the PREA Coordinator of ensuring that the WADOC website is current with information on how friends and families can report sexual abuse and sexual harassment. The PCM is responsible to ensure that posters are viewable by visitors and the public providing information on how to report an allegation of sexual abuse or sexual harassment.

DOC 490.800 also states visitors, offender family members/associates, or other community members can report allegations by calling the PREA Hotline, writing a letter to the PREA Coordinator or sending an email to the WADOC.

A review of the completed investigation revealed that none were third party reports.

PREA Posters and brochures were visible and available in the offender visiting room as well as other areas throughout the facility.

The WADOC website and found information available to the public on reporting.

The facility provided the Visitor Information Brochure. The brochure was reviewed and the required information was included.

Random and informal interviews of offenders was conducted, offenders were queried who were able to articulate how they would report on behalf of another offender; the offenders gave multiple options in which they could be used to document a report.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response, requires 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. Policy and practice indicates that allegations or incidents of sexual misconduct is confidential and will only be disclosed when necessary for treatment, investigation, and other security and management decisions.

WADOC Policy 490.850, states, 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. All allegations of sexual abuse or sexual harassment at Cedar Creek Corrections Center (CCCC) are reported to the Shift Commander. The Shift Commander enters the information into the Incident Management Reporting System (IMRS). Once in IMRS an email is forwarded to the PREA Coordinator. The PREA Coordinator, or designee, reviews the allegation to determine if it falls under the definition of PREA. If it does, the investigation is assigned to the appropriate Appointing Authority.

WADOC Policy 490.850, states, when an offender displays signs of sexual misconduct or discloses to a medical or mental health provider sexual misconduct that occurred while in any correctional setting, the provider must inform the offender of the provider’s duty to report before providing treatment. Additionally this policy states, Offenders will also be informed of this requirement at Reception, and information will be posted in Health Services areas where it can be viewed by offenders. The offenders are informed of this during reception center processing and this information is clearly described in the “Statewide Offender Orientation Handbook” (P226, dated 10/2014). During random interviews with offenders, they disclosed knowledge of the staff and the facilities requirement to keep the population safe.

Interviews with random and specialized staff at all levels of this facility indicate that all PREA related allegations/reports are investigated by the facility PREA investigators.

During formal and random interviews with staff, it was confirmed that staff is aware of this requirement and could explain how they would immediately report an allegation of sexual abuse. They further stated that the information they received from the victim will remain confidential, and they will discuss PREA related information with staff that had a need to know such as their supervisor, medical staff or investigators.

During interviews with medical and mental health staff, mental health and medical staff expressed their understanding of the policy and duty to report. They stated they explain to the offender the limitations of confidentiality prior to the initiation of services.

The Superintendent stated that CCCC does not house offenders under the age of 18; the Washington State web site confirms juveniles are housed through the Washington State Department of Social and Health Services, at Juvenile Rehabilitation facilities. The PREA Coordinator confirmed that the facility does not house offenders under the age of 18. In addition, a “potential victim” flag would be attached to the offender’s record.

WADOC Policy 490.850 states, the Appointing Authority/designee will ensure that notification is made to Adult Protective Services (APS), in the alleged victim is classified as a vulnerable adult.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response, states upon receipt of an allegation of offender-on –offender sexual assault, the Appointing Authority/Shift Commander/CCS will immediately direct employees/contract staff to separate the accused from the alleged victim and witnesses. The accused may be placed in

restrictive housing. Placement decisions will be based on the seriousness of the allegation.

WADOC Policy 490.850 states, the least restrictive housing should be considered before placement in restrictive housing. In the event that the allegation involves staff sexual misconduct, contact between the accused staff and the alleged victim. The Appointing Authority/designee will attempt to minimize any disturbance to the alleged victim's housing location, program activities, and/or supervision during the investigation. The Appointing Authority/designee may temporarily reassign and/or restrict/modify the job duties of the accused during the investigation. If the accused is a contract staff or volunteer, the Appointing Authority may restrict their entrance into the institution until the conclusion of the investigation. This was confirmed with an interview with the Superintendent of the facility.

During the interview, the Secretary's Designee indicated that if he received such information, he would notify the facility where the offender is housed. Direct that the offender be placed in protective custody while an investigation is completed into the threat. If the perpetrator is identified, he would be placed in disciplinary segregation pending completion of the investigation. The victim would only be retained in segregation until alternate housing if necessary, could be identified.

During the interview with the Superintendent, if an allegation is received, immediate action is taken to protect the offender. This may require that they move the offender to a place where they would be safe until the suspect is identified and the investigation was concluded. This may require that the offender be transferred to another facility.

Through random staff interviews, they indicated that if they received an allegation, they would immediately separate the victim and suspect, notify their shift supervisor.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response, states that upon receipt of an allegation of offender-on-offender sexual assault from another facility, the Appointing Authority/Shift Commander/CCS will immediately direct employees/contract staff to separate the accused from the alleged victim and witnesses. The accused may be placed in restrictive housing. Placement decisions will be based on the seriousness of the allegation. Least restrictive housing should be considered. In the event that the allegation involves staff sexual misconduct, the one-on-one contact between the accused and alleged victim is prohibited while the allegation is investigated. The Appointing Authority can redirect or modify the duties of the staff member during the investigation. If the accused is a contract staff or volunteer, the Appointing Authority may restrict their entrance into the institution until the conclusion of the investigation. Documentation provided and an interview with the Superintendent confirms the facility is compliant with this standard.

WADOC Policy 490.850 requires the Appointing Authority to notify the appropriate Appointing Authority or facility within 72 hours of receipt of an allegation when the alleged occurred in another Department location or another jurisdiction or it involves a staff who reports through another Appointing Authority. This policy further requires that allegations received from other facilities/agencies be investigated in accordance with the PREA standards.

During the interview with the Secretary's Designee, such allegations received are referred to the Director of Investigations. Contact is made with the PREA Compliance Manager and an investigator is assigned to conduct the review.

Both the Superintendent, the PREA Compliance Manager and staff who perform investigations into sexual abuse allegations indicated once an allegation of sexual abuse is received from another agency, it is assigned to an investigator to conduct the investigation.

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.

Washington Department of Corrections Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response, address how each facility shall respond to an allegation of sexual assault. Each institution is required to establish a response team consisting of a sergeant, investigator, medical staff, mental health staff and other classifications as necessary. This policy includes a checklist for the Shift Commander to follow. This checklist includes: separating the victim from the suspect; preserving the crime scene for evidence and; requesting the victim and accused do not destroy any evidence by washing, toileting, changing clothes, eating, drinking, or smoking.

Each employee is provided with a First Response Pocket Guide that gives direction on how to respond effectively to emergencies. Even though this guide is not specific to PREA, it does follow the same general guideline of responding to emergencies.

The PREA training that all staff, volunteers and contractors receive on an annual basis; this training identifies any staff, volunteer or contractor, whoever receives the information first, acts as the first responder. As a first responder, they are trained to take steps to isolate and contain the situation, secure the scene, separate the alleged victim from the alleged suspect, remove uninvolved offenders and relay observations to their supervisor. This was confirmed through interviews with random and specialized staff interviews. Non-custody staff who are first responders said they would notify custody staff and direct the alleged victim to not destroy evidence. Through random formal and informal staff interviews, they stated they would secure the offender, separate the offender from the alleged perpetrator and call the supervisor for further direction; documenting their observations and offender statements. All would be kept this information confidential except for staff that has a need to know.

No offenders were interviewed at Cedar Creek Corrections Center (CCCC) for reporting PREA allegations. An offender who reported sexual abuse at another facility prior to this audit cycle indicated that staffs at the facility were professional, medical and mental health was received to include a SAFE/SANE exam along with follow-up mental health care. Although this offender's statement does not reflect on CCCC's review, this offender statement reflects the Washington Department of Corrections commitment to protect offenders while ensuring they feel sexually safe.

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.

Washington Department of Corrections Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response, address how each facility shall respond to an allegation of sexual assault. Each institution is required to establish a response team consisting of a sergeant, investigator, medical staff, mental health staff and other classifications as necessary. This policy includes a checklists and directions for the Shift Commander to follow to include Contact information for the local and state law enforcement; Child and Adult Protective Services; Field Offices, Mental Health notifications, to include other necessary documentation such as; the Uniform Evidence Protocol, Crime Scene Containment/Preservation/Processing check list; PREA Response Kit, and hospitals available for Forensic Medical Examinations.

Specialized staff and random formal and informal interviews with custody staff showed they understand the role during a PREA incident and what is required when allegations of sexual abuse are made.

During the site visit, no allegations of any type were reported; however, through staff interviews, SANE interview, and policy review, the audit team has determined CCCC is in substantial compliance with this standard.

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.

The Washington Department of Corrections (WADOC) does not have collective bargaining.

WADOC Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response states, the Appointing Authority/designee may temporarily reassign and/or restrict/modify the job duties of the accused during the investigation. If the accused is a contract staff or volunteer, the Appointing Authority may restrict their entrance into the institution until the conclusion of the investigation. This was confirmed with an interview with the Superintendent of the facility.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, explains the WADOC retaliation prevention policy. The Appointing Authority at the facility where the victim is housed will notify the PREA Compliance Manager (PCM) that monitoring is required. The PCM will ensure alleged victims and offender reporters are monitored and meet with at least monthly. Retaliation against employees is monitored by the Human Resource Manager at the direction of the Appointing Authority. While monitoring the PCM looks for housing unit/job changes, negative performance reviews or disciplinary reports. The monitoring is conducted for at least 90 days unless the Appointing Authority determines that the monitoring period should be extended.

The PCM at the facility where the report was made will ensure alleged victims and offender reporters are monitored and met with at least monthly.

The PCM documents the monitoring of offenders on a form DOC 03-503, PREA Monthly Monitoring Report, and forwards that to the Appointing Authority.

DOC 490.860 also states if a reporter or alleged victim transfers to another facility during the monitoring period, the receiving facility will assume the monitoring responsibilities.

DOC 490.860 further states that if any other individual who cooperates with an investigation expresses a fear of retaliation, the department shall take appropriate measures to protect that individual against retaliation.

If retaliation is suspected or confirmed, possible actions may include additional monitoring, transfer of housing or work location and possible discipline for the individual who is retaliating.

During the Superintendent interview, different measures can be used to protect offenders and staff from retaliation. According to WADOC 490.860 different types of retaliation may include but are not limited to: Disciplinary reports, Changes in grievance trends, Housing/program changes and reassignments, or negative performance reviews.

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.

Washington Department of Corrections Policy, DOC 490.820 (dated 10/31/2016) Prison Rape Elimination Act (PREA) Risk Assessments and Assignments states, offenders may be placed in Administrative Segregation if necessary to separate potential victims from potential predators. This placement shall only occur if no alternative housing is available.

In the rare case that the offender is in Administrative Segregation for more than 30 days, a review will be conducted every 30 days to determine continued placement. Offenders on this type of placement will have access to programming and job assignments to the extent

possible. When unavailable, the reason and duration will be documented in the offender's electronic file.

According to a memorandum dated January 20, 2017, authored by the Superintendent, Cedar Creek Corrections Center has not had any offenders placed in involuntary segregation as a result of risk of victimization during this audit period.

The Superintendent stated that the facility has different housing options or programs that give them the ability to separate offenders. All housing options are considered and generally the longest a victim would be in segregation would be for one to three days pending completion of the investigation or identification of the alleged suspect.

During interviews with staff who supervises offenders in segregated housing shared that offenders are placed in segregated housing for their protection or after having alleged sexual abuse have access to limited privileges and programs. They have access to programming and job assignments to the extent possible.

During the tour there was no evidence that offenders had been placed in involuntary segregation/protective custody for reporting any sexual misconduct. This was confirmed with staff and offender interviews.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, require that the Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department. Staff investigating PREA allegations will be trained in: Crime scene management, including evidence collection; Confidentiality; Maranda and Garrity warnings; Crisis intervention; Investigating sexual misconduct; Techniques for interviewing victims of sexual misconduct and; Criteria and evidence required to substantiate administrative action or prosecution referral. The investigation will be completed even if the offender is no longer under the jurisdiction of the Department or the accused staff is no longer employed by the Department.

Investigators are trained to follow the evidence protocol as called out by WADOC Policy 420.375, Contraband and Evidence Handling. Training records were reviewed for the staff who conduct sexual abuse investigations reflecting these staff have received training to conduct sexual abuse investigations. This was confirmed with interviews with specialized staff they stated, they investigate and gather evidence for allegations against staff and/or offenders, and review the past history of prior complaints. They do not use any type of truth telling device as a condition of proceeding with an investigation. Investigators, collectively, stated that the investigation is continued on both staff and offender allegations and referred for prosecution if warranted, regardless of the perpetrators continued presence/employment at the facility.

All potential felony cases are referred to the Thurston County Sheriff's Office or the Washington State Police. WADOC investigators only conduct compelled interviews if the District Attorney has declined prosecution. Once the case is referred to the local law enforcement agency, that agency determines if the case will be referred for prosecution. No cases were referred to the local law enforcement agency for investigation during the audit period.

WADOC Policy, 400.360 (dated 02/09/2015) Polygraph Testing of Offenders states, Offenders who are alleged victims, reporters, or witnesses in Prison Rape Elimination Act (PREA) investigations will not be asked or required to submit to a polygraph examination

regarding the alleged misconduct under investigation. This is confirmed through interviews with the Superintendent and staff who conduct sexual abuse investigations. The credibility of an alleged victim, suspect, or witness be assessed on an individual basis and not determined by the person's status as an offender or staff. Of the offenders interviewed none indicated they were subjected to any truth telling device

WADOC Policy, 400.360 (dated 02/09/2015) Contraband and Evidence Handling requires the investigators to include all physical evidence, testimony, reasoning behind credibility assessments and investigative facts and findings.

All administrative investigations are forwarded to the Appointing Authority who will make a determination if the staff actions of failure to act contributed to the abuse. The Appointing Authority then makes the determination of unfounded, unsubstantiated or substantiated. The Appointing Authority has completed specialized training in conducting Sexual Abuse Investigations in a confinement setting as required by §115.34 – Specialized training: Investigations.

WADOC Policy 490.860 mandates administrative investigations shall include efforts to determine whether staff actions or failures to act contributed to the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reason behind credibility assessments and investigative facts & findings. The substantiation standard for sexual abuse and sexual harassment administrative investigations is preponderance of evidence. Investigative staff indicated that investigations for allegations of sexual abuse or sexual harassment are initiated immediately, and are investigated objectively and thoroughly. They investigate and gather evidence whether the allegations are against staff or offenders and review past history and prior complaints. They can contact the Thurston County Sheriff's Office for assistance if it looks like the case is going toward felony prosecution as required by WADOC Policy 490.860. The Thurston County Sheriff's Office will contact the prosecutor for consultation. If staffs actions were not within policy, it would be addressed appropriately, investigated, and sent through the process. They stated that the investigation is continued on both staff and offender allegations and referred for prosecution if warranted, regardless of the perpetrators continued presence/employment at the facility.

WADOC Policy 490.860 mandates Investigations will be completed even if the offender is no longer under Department jurisdiction or authority and/or the accused staff, if any, is no longer employed by or providing services to the Department. Interviews with the Superintendent, the PREA Compliance Manager (PCM), and investigative staff confirm staff will continue to investigate the allegation after the departure of any party involved in the PREA allegation.

Investigative files were reviewed utilizing a checklist. The reviews looked for offender rights, safety and security of the offender, provable objectiveness, direct or circumstantial evidence, witness statements, effective communications, as well as other guidelines. Through these file reviews, Investigative staff have shown that they are objective and treat each allegation on a case-by-case basis.

The PCM provided SIRs for all allegations of sexual abuse/sexual harassment during the past twelve months. SIRs document that all allegations were investigated promptly, when the allegations was received.

The investigative reports reviewed document a similar investigative process for all allegations against staff and offenders. The investigative reports contained no documented assessment of credibility based on the status of the offender or the staff/volunteer/contractor. Allegations against staff and offenders did consistently include reports evidencing findings, and whether staff actions or failure to act contributed to the abuse.

No cases was referred for prosecution in the past 12 months.

The Record Retention Schedule (RRS) requires an offender's investigative packet to be retained for 5 years past the date of discharge from prison. This RSS requires the retention of staff personnel files for 5 year after the employee leaves the state government agency or at the conclusion of any litigation, whichever is later. The records/files are transferred to the records center for the required retention timelines.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, requires the Appointing Authority to determine if the allegation is as follows:

Substantiated: The allegation was determined to have occurred by a preponderance of the evidence. The training that all Appointing Authorities attend teaches that substantiation is 51% that they are sure that the event occurred.

Unsubstantiated: Evidence was insufficient to make a final determination that the allegation was true or false.

Unfounded: The allegation was determined not to have occurred.

Substantiation is based on a preponderance of evidence.

The Appointing Authority is the individual charged with determining the conclusion of the investigation.

During interviews, Investigative staff interviews confirmed that no evidentiary standard higher than a preponderance of evidence is utilized when determining whether allegations are substantiated for administrative investigations.

During the interview with the Superintendent, the outcome of all allegations is based on the evidence presented, in totality, of the reports.

WADOC establishes a substantiation level as preponderance of evidence for sexual abuse and sexual harassment cases. There were no contra indicators of this in the records reviewed during the audit.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, requires that the alleged victim will be informed in person, in a confidential manner, of the findings of the investigation. If the

offender has been released, the Appointing Authority will inform the offender of the findings in writing to the offender's last known address as documented in his/her electronic file. Interviews with the Appointing Authority/designee confirm this policy is followed.

WADOC Policy 490.860, if the allegation was investigated by the local law enforcement agency, the results of the investigation will be retained with the PREA case file and the offender will be notified of these results. At the conclusion of the investigation, the Appointing Authority will ensure the reporting offender is notified and any necessary action is taken.

WADOC Policy 490.860, at the conclusion of the investigation for allegations of Staff Sexual Misconduct and the case is substantiated or unsubstantiated, the alleged victim will be notified: when the accused staff member is no longer assigned to the unit, when the accused staff no longer works at the same facility as the offender, or the Department learns that the accused staff has been indicted on or convicted of any charge related to staff sexual misconduct within the facility.

WADOC Policy 490.860, for all alleged offender-on-offender allegations, 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.

Through interviews with the Superintendent and investigative staff, they reported that notification is given to the offender by the Superintendent if possible.

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.

Washington Department of Corrections Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, states, Employees may be subject to disciplinary action, up to and including termination, for violating Department PREA policies. In the event that the employee resigns prior to the completion of the investigation, the investigation is continued. If the nature of the staff sexual misconduct is criminal in nature, the case is forwarded to the local law enforcement agency to conduct the investigation.

Washington State Human Resources policies state that the Secretary shall immediately institute proceedings to terminate the employment of any persons who is found to have had sexual intercourse or sexual contact with an offender or pled guilty or convicted on a sex crime where the victim was an offender.

Cedar Creek Corrections Center has had no case substantiated against an employee for sexual abuse or sexual harassment during this audit period.

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.

Washington Department of Corrections Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, requires any substantiated PREA allegation that is criminal in nature be referred to law enforcement and any applicable licensing board. 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 Departmental PREA policies, appropriate actions will be taken.

During this audit period there were no substantiated investigations involving a contractor or volunteer according to the memorandum dated February 9, 2017, authored by the Superintendent of Cedar Creek Corrections Center.

During an interview with the Superintendent, it was confirmed that allegations against contractors and volunteer are immediately investigated. If the allegation is substantiated, the contractor is not allowed to enter the facility. Information is provided to the contract agency and the case is referred for criminal prosecution when appropriate.

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.

Washington Department of Corrections Policy DOC 460.000 (dated 01/08/2016) Disciplinary Process for Prisons, sets the due process requirements for offender disciplinary hearings. This includes a right to have copies of all non-confidential documents, a notice of when the hearing will be held, a right to call witnesses, a right to be present at the hearing, a right to written results of the hearing and a right to appeal. These are the same policies for all disciplinary hearings including offender-on-offender sexual abuse.

In the event that the offender is found guilty of a disciplinary violation, the Disciplinary Hearing Officer (DHO) will determine the appropriate sanctions based on the Departmental guidelines. When determining sanctions, the DHO may consider factors in mitigation or aggravations based on the offender’s mental health status, prior conduct or overall prison adjustment. An offender that is found guilty of committing sexual abuse against an offender or committing sexual assault against an offender may be sanctioned to a multidisciplinary review for consideration of available interventions (e.g. Mental Health Therapy, Sex Offender Treatment Program, Anger Management).

A report of sexual abuse made in good faith will not constitute providing false information, even if the investigation does not establish sufficient evidence to substantiate the allegation.

Additionally, when all rules violations in the report are dismissed or the offender is found not guilty of any violations during the hearing, no records pertaining to the violation will be placed in the offender’s central file.

When interviewed, the Superintendent said that offender discipline is based on the level of the violation and penalties are imposed comparable to other offender’s penalties. Penalties might include placement in restricted housing, loss of good time credit, and prosecution. If the offender has a mental health history, mental health staff will be involved.

During Medical and Mental Health Staff interviews, the auditors were told the facility offers limited therapy, counseling and other interventions to address/correct underlying reasons for abuse. The offender's issues would be addressed during regular counseling sessions or group counseling sessions. They do not require participation in interventions as a condition to access other programming or benefits.

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.

Washington Department of Corrections (WADOC) Policy DOC 490.820 (dated 10/31/2016), Prison Rape Elimination Act (PREA) Risk Assessments and Assignments, requires that, at the time of the PREA Risk Assessment, the Classification Counselor complete a referral for mental health services if the screening indicates that the offender has perpetrated sexual abuse and/or has experienced prior sexual victimization, whether in an institution or in the community. The referring employee will ask the offender if they wish to meet with a mental health provider. Policy DOC 630.500, Mental Health Services, require that offenders be seen within 14 days of referral.

Interviews with staff that perform risk screening related that offenders who indicate they have previously perpetrated sexual abuse are offered a follow-up meeting with a medical and/or mental health practitioner. There are no secondary mental health/medical materials as the documentation is loaded directly on the computer that only medical staff have access to. Documentation is maintained in the automated system. Access is limited to staff in certain classifications as necessary.

WADOC Health Records Guidelines require that confidentially be maintained by Health Care staff. The only information that shall be disclosed is the information determined to be essential for management of the offender's health and safety. Medical and Mental Health providers are required to gain informed consent prior to reporting any sexual abuse that occurred outside of an institutional setting. Informed consent documentation was reviewed as part of the document review process. Medical and Mental Health staff confirm informed consent is completed during clinical interventions.

Policy mandates medical and mental health staff obtain consent from offenders before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18. Offenders are made aware of this process and there is a form used to obtain the required consent. Cedar Creek Corrections Center (CCCC) does not house offenders under the age of 18.

During an interview, the Superintendent stated that CCCC does not house offenders under the age of 18; the Washington State web site confirms juveniles are housed through the Washington State Department of Social and Health Services, at Juvenile Rehabilitation facilities. The PREA Coordinator confirmed that the facility does not house offenders under the age of 18.

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.

Washington Department of Corrections Policy, DOC 490.850 (dated 09/01/2016) Prison Rape Elimination Act (PREA) Response, requires that victims in all cases of reported sexual misconduct, regardless of who the misconduct is reported to, will receive immediate medical and mental health care. The response to a PREA allegation is designed so that offenders are seen by emergency medical staff before being transferred out to the hospital for a forensic exam. In non-emergency cases, the medical mental health staff must assess the victim within 24 hours. Prior to being transported for the SAFE/SANE exam, the clinician will provide the offender with information on post-exposure prophylaxis for sexually transmitted infections. All medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender while housed in a Department of contracted facility.

Medical and Mental Health staff interviewed stated the treatment they provide is immediate and based on their professional judgement. Medical and mental health work together to ensure the offender receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted infections prophylaxis, would be offered in accordance with professionally accepted standards of care and where medically appropriate.

Interviews with custody staff, non-custody staff, and first responders stated that notification is made via the telephone to the medical staff that are on duty when they are informed of an incident of sexual abuse.

No interviews were conducted with offenders who reported sexual abuse; no reports of sexual abuse were reported during this reporting period.

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.

Washington Department of Corrections Policy DOC 610.025, (dated 01/14/2016) Medical Management of Offenders in in Cases of Alleged Sexual abuse or Assault, requires the facility to transfer the alleged victim to the designated health care facility within 2 hours when an offender makes an allegation of sexual assault within 120 hours of the alleged assault occurring. The offender is offered a mental health appointment and, unless the offender declines, will be seen by mental health within one business day. Policy requires immediate access to mental health services if the offender is in crisis. Once evaluated a treatment plan is put in place. This treatment plan may include individual/group therapy, referral to medical/mental health specialists, medication or outside medical/mental health treatment. The offender’s file is transferred from facility to facility so that the treatment plan can be continued at the next institution.

All medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender while housed in a Department of contracted facility.

Policy also states that mental health professionals will attempt to conduct a mental health evaluation within 60 days of receiving the information for all offenders who have been identified as perpetrators in a substantiated allegation of sexual assault or sexual abuse unless one has already been completed.

During interviews with medical and mental health staff, the auditors learned that offenders are provided with treatment, screening, and

follow-up mental health services, as determined appropriate by mental health staff. They also stated that if an offender states they have a history of sex abuse, they would be offered counseling services.

No offenders, reported sexual abuse during this period. Interviews with Medical staff indicated they will offer tests for sexually transmitted diseases where appropriate.

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.

Washington Department of Corrections Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, states that for each substantiated or unsubstantiated finding of offender-on-offender sexual assault and staff sexual misconduct, the Appointing Authority/designee will convene a local PREA Review Committee to examine the case. The committee will meet every 30 days or as needed. The multidisciplinary committee will consist of facility managers, supervisors, investigators and medical/mental health practitioners. The committee will review policy compliance, causal factors, and systemic issues using DOC 02-383 Local PREA Investigation Review Checklist.

The 3-page form DOC 02-383 includes the questions: As a result of the investigation, is a change in policy or local procedure indicated; Was the incident motivated by race, sexual orientation, transgender or intersex statuses, gang affiliation or other group dynamic; Did physical barriers or other physical plant layout enable the abuse; Did the incident take place in an area subject to video monitoring; Were the Department approved staffing models followed and; Was monitoring technology available/adequate...

No cases at Cedar Creek Corrections Center required committee review.

Interviews with the PREA Superintendent, the Compliance Manager and other Facility PREA Committee members indicates the committee reviews each investigation and addresses each of the criteria required per the standard. The minutes are submitted to the Superintendent who is a participant in the committee, and the PREA Compliance Manager, and the Assistant Superintendent ensure any modifications recommended by the committee are completed.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.800, (dated 10/14/2016) Prison Rape Elimination Act (PREA) Prevention and Reporting, set standard definitions utilized in PREA reports, investigations and documentation. The policies also include an Investigation Report Template that is a standardized instrument for investigations utilized throughout WADOC.

WADOC has established a PREA allegation and case database within the Offender Management Network Information (OMNI) system. This system allows for a standardized collection of data. The data collected in OMNI is sufficient to complete the SSV-IV forms.

The PREA Coordinator collects the data annually from all WADOC facilities and contracted facilities and compile an annual report. The collected data is analyzed to identify factors contributing to sexual misconduct in Department Facilities and offices. In 2016, DOJ requested the 2015 PREA report information from WADOC. This information was provided as requested.

The Washington Department of Corrections collects data relative to sexual abuse annually in compliance with PREA data collections standards. Aggregated data for the years of 2013, 2014, and 2015 were reviewed on the agencies web site.

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.

Washington Department of Corrections (WADOC) Policy, DOC 490.860 (dated 09/19/2016) Prison Rape Elimination Act (PREA) Investigation, requires the PREA Coordinator to generate an annual report of findings. This report includes an analysis of PREA prevention and response for the Department and each facility, including high-level summary information and detained facility data analysis. The report also includes findings and corrective action at the facility and Departmental levels. The PREA Coordinator completes an assessment of the Department's progress in addressing sexual misconduct, including a comparison with data and corrective action from previous years. The Secretary of Corrections approves the report. This auditor reviewed the WADOC website and was able to easily find the annual PREA report. The report contained no confidential information.

The PREA Coordinator indicates the agency reviews data collected pursuant to 115.87 and assesses the effectiveness of the sexual abuse prevention, detection, and response policies, practices, and training. The agency prepares an annual report and posts the information on the website. He further indicated that the only information redacted from the agency report is personal identifying information. All other information is included in the annual report.

Through the interview with the Superintendent, the auditor was informed that each allegation is reviewed by the Facility PREA Committee and that information is provided to the PREA Coordinator for the annual review. Any issues identified during the Facility PREA Committee are addressed at that time.

All SIR information is provided to the PREA Coordinator for annual review.

The Washington State Department of Corrections Annual PREA Report, Calendar Year 2015, was reviewed via the department's web site. This report compares data from the previous three years (2012 thru 2015). No personal identifying information was included in this report.

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.

WADOC maintains the PREA reporting data in the OMNI system. The access to the data in this system is limited to staff who have a need to know. Access to the system is reviewed by the Emergency Operations Administrator to insure the integrity of the system. The PREA report is completed annually in accordance to PREA standard 115.88. This report is posted on the WADOC website. A review of the report posted on the website confirms that all personal identifier were removed prior to posting.

The PREA Coordinator indicates the data is maintained in a secure data system backed up as required per departmental policy. Records Retention 5 years after employee employment ends or the offender is released from custody.

A review of the website demonstrates aggregated sexual abuse data from facilities under its control to the public is posted, as required. Information displayed on the agency website, contains no personal identifiers. No federal, state or local law was provided by the agency to indicate there was a law in place to require a data maintenance procedure which would supersede standard provision 115.89(d).

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.



04/27/2017

Auditor Signature

Date