

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

Interim       Final

Date of Report December 20, 2018

## Auditor Information

Name: Deborah Striplin

Email: dstriplin@doc.nv.gov

Company Name: Nevada Department of Corrections

Mailing Address: P.O. Box 7011

City, State, Zip: Carson City, NV 89702

Telephone: 775-887-3142

Date of Facility Visit: 11/06 – 11/09, 2018

## Agency Information

Name of Agency:

Governing Authority or Parent Agency (If Applicable):

Washington Department of Corrections

State of Washington, Office of the Governor

Physical Address: 7345 Linderson Way SE

City, State, Zip: Tumwater, WA 98511

Mailing Address: PO Box 41100

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

Telephone: 360-725-8213

Is Agency accredited by any organization?  Yes  No

The Agency Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Agency mission: Working Together For Safe Communities

Agency Website with PREA Information:

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

## Agency Chief Executive Officer

Name: Stephen Sinclair

Title: Secretary

Email: sdsinclair@doc1.wa.gov

Telephone: 360-725-8810

## Agency-Wide PREA Coordinator

Name: Beth Schubach

Title: Agency PREA Coordinator

Email: blschubach1@doc1.wa.gov

Telephone: 360-725-8789



<b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:</b>		1816	
<b>Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:</b>		1811 Offenders and 1,252 Violators	
<b>Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:</b>		326	
<b>Age Range of Population:</b>	<b>Youthful Inmates Under 18:</b> 0	<b>Adults:</b> 18-65	
<b>Are youthful inmates housed separately from the adult population?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
<b>Number of youthful inmates housed at this facility during the past 12 months:</b>		0	
<b>Average length of stay or time under supervision:</b>		25.4 months TRU/SOU 24.1 Months at WSRU/MSU	
<b>Facility security level/inmate custody levels:</b>		Maximum/Close/Medium/Minimum	
<b>Number of staff currently employed by the facility who may have contact with inmates:</b>		1,139	
<b>Number of staff hired by the facility during the past 12 months who may have contact with inmates:</b>		100	
<b>Number of contracts in the past 12 months for services with contractors who may have contact with inmates:</b>		48	
<b>Physical Plant</b>			
<b>Number of Buildings:</b> 109		<b>Number of Single Cell Housing Units:</b> 10	
<b>Number of Multiple Occupancy Cell Housing Units:</b>		4	
<b>Number of Open Bay/Dorm Housing Units:</b>		4	
<b>Number of Segregation Cells (Administrative and Disciplinary):</b>		100	
<b>Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):</b>			
Institution provided auditor with information of the institution camera locations to include workstations that allow viewing and retention.			
<b>Medical</b>			
<b>Type of Medical Facility:</b>		WSRU, SOU Close Observation area, TRU Clinic and MSU clinic	
<b>Forensic sexual assault medical exams are conducted at:</b>		Providence Medical Center Everett, Providence Intervention Center for abuse and assault advocates.	
<b>Other</b>			
<b>Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:</b>		671 volunteers / 39 contractors	
<b>Number of investigators the agency currently employs to investigate allegations of sexual abuse:</b>		723	

# Audit Findings

## Audit Narrative

Deborah Striplin, Nevada Department of Corrections and Department of Justice certified PREA auditor for adult facilities was lead auditor to conduct the Prison Rape Elimination Act (PREA) audit for Washington State Department of Corrections (WADOC), Monroe Correctional Complex as part of the Western States Consortium. In preparation to conduct audits, this auditor researched the National PREA Resource Center to determine if audit report forms had been revised. The "New adult P&J Auditor Report Template" was revised 5-2018 and downloaded for this report.

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

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

Wednesday, September 5, 2018 auditor received email from agency PREA Coordinator and MCC PREA specialist that the audit notifications had been posted throughout the complex. Tuesday, September 24, 2018 this auditor received the flash for the Monroe Correctional Complex PREA audit scheduled for November 6<sup>th</sup> thru 10<sup>th</sup>, 2018. The flash drive included pre-audit questionnaire (PAQ), agency and facility policies, procedures and applicable documentation placed in folders clearly identified. Also included in the flash drive were audit notification pictures dated August 28, 2018 placed in the 5 facility housing units, program areas, high traffic areas and work areas. This auditor received correspondence from offenders prior to on-site audit further supporting compliance that the audit notifications had been posted.

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

Wednesday, October 31, 2018 auditor conducted specialized telephonic interview with emergency room nurse at the Providence Medical Center Everett who stated that they have 15 on-call nurses who are trained in the PREA protocols for sexual assault medical forensic exams. When a call is received that an inmate was sexually abused within time frames for the collection of physical forensic evidence the offender will be transported to Providence Medical Center. A victim advocate from the Providence Intervention Center for Assault and Abuse is contacted and they respond to the hospital.

Thursday, November 1, 2018 this auditor conducted a specialized telephonic interview with a victim advocate from the Providence Intervention Center for Assault and Abuse. The advocate explained the

process in response to a call that an offender was sexually abused. The advocate stated that they will respond to the hospital to offer support and if requested would provide support during the investigatory process. The advocate stated that they have a good working relationship with staff at MCC and have toured the facility. If requested by the offender the victim advocate will work with MCC to schedule meetings with the offender at the facility.

Monday, October 22, 2018 this auditor and support staff conducted a pre-onsite tele-conference with MCC Executive staff and Agency PREA coordinator. This conference was an informal introduction for up-coming on-site audit.

This auditor conducted specialized tele-conference interview with WADOC Secretary on Friday, September 14, 2018 utilizing the PREA agency head interview guide. Interview was conducted by this auditor who was also lead auditor for another WADOC audit scheduled in September. Secretary Sinclair has worked for WADOC for 30 years working his way through the ranks starting out as an Officer at the Washington State Penitentiary and appointed as the WADOC Secretary April 2017. Secretary Sinclair is very engaged and committed to the sexual safety of offenders during their incarceration.

### **On-site review**

#### ***Tuesday, November 6, 2018 – Friday, November 10, 2018***

The Nevada PREA audit team Deborah Striplin, DOJ certified PREA auditor (lead auditor), Kimberely McCoy (support staff), Ron Hannah (support staff), James Jones (support staff). The audit team arrived 7:15 a.m. on-site at MCC and met by MCC Superintendent B/PREA compliance manager, MCC PREA compliance specialist and agency PREA coordinator and escorted to Twin Rivers Unit administration conference room.

Prior to the meet and greet with MCC executive staff, the audit team had discussion prior to go over plan of action for facility tour and which facility each team member wanted to be assigned for conducting interviews of staff and offenders on the days scheduled. The audit team was provided with staff and offender rosters on-site which was separated by facility which included but not limited to; staff shift rosters, offender rosters sorted by facility and housing unit and rosters for required targeted interviews. Each audit team member used these rosters to randomly select the staff and offenders for specialized interviews which provided a sampling of interviews within the complex to help determine compliance with the standards. At the end of the interview days the team met to determine total interviews completed, if there were any concerns that needed to be addressed and briefed the PCM, Agency PREA coordinator and PREA specialist.

0800 audit team was escorted to the Twin Rivers Unit visiting room for a meet and great with executive staff and designated MCC staff from each facility that were selected as audit team escorts and liaisons. Towards the end of the meeting and just prior to beginning the facility tour, MCC staff were provided with name of which audit team member would be assigned to a designated facility for the interview days and the tentative plan of action for the on-site visit. The three MCC Superintendents remained with the audit team for the entire facility tour and each facility had staff present which consisted of, but not limited to; Associate Superintendents, the facility Captain, security specialist and staff member from maintenance who toured with the audit team.

The MCC facility tour was scheduled for 2 days, during the tour, audit team members asked impromptu questions of staff and inmates, noted the placement and coverage of surveillance. All housing units

were toured which included but not limited to; the audit team looking in all areas for possible blind spots, did offenders have privacy from cross gender viewing, were PREA and victim advocacy information posted (English/Spanish), external reporting forms and audit notifications. Upon entry into offender housing units the MCC escorting staff completed the female cross gender announcement and unit shift logs were reviewed to determine if supervisors were conducting unannounced rounds. All offender work, program and medical areas were toured with the audit team who looked to determine if camera/video surveillance was in the area, possible blind spots, assessed the level of staff supervision and frequency of custody staff tours. Audit team also noted placement of PREA posters and audit notifications in these areas. Audit team was extremely impressed with the cleanliness of the facilities; the prevalence of PREA information posted and staff professionalism with staff and staff with offenders.

MCC on-site facility tour was completed on Wednesday, November 7, 2018 12:00 p.m. After completion of the facility tour, the audit team separated to designated facilities to begin random and specialized interviews of staff and offenders for the remainder of the on-site visit. Audit team arrived on-site each morning at 7:00 a.m. and departed the facility on days 1 thru 3 between 5:30 and 6:30p.m. Friday, November 10, 2018 (day 4) the audit team arrived on-site at 3:45 a.m. to conduct random and specialized interviews with staff on 1<sup>st</sup> shift (10:00pm – 6:00am). The afternoon of day 4 audit team had completed interviews and met with the Superintendent A and both Superintendent (B), agency PREA coordinator and PREA specialist to discuss on-site audit and any concerns that were identified prior to meeting with other executive staff for out brief of the on-site audit. The on-site audit was completed Friday, November 9, 2018 at 3:30 p.m.

During facility tour auditor was approached by an offender and asked to talk. Auditor explained they were currently conducting facility tour and ask for his name and that the auditor would see him. On Thursday, November 9, 2018 the auditor spoke with the offender who reported an incident an offender on offender sexual harassment that alleged to have occurred in 2017. Auditor reported the incident to the PREA compliance specialist to determine if the allegation had been reported and investigated previously. After researching information the PREA compliance specialist stated that they had no record of the report. This auditor filled out the required WADOC reporting form and an investigation was initiated.

### **Facility Tour:**

#### **Twin Rivers Unit (TRU).** – Areas that auditors noted deficiencies

Kitchen had a blind spot S.E. corner by the ice machine

Electric shop loft/2<sup>nd</sup> floor had a blind spot

Offender restrooms T-6-38, T-11-34 and gym had mirrors which allowed view of offenders.

#### **Washington State Reformatory Unit (WSRU)** Areas that auditors noted deficiencies

gym restroom toilet allowed the ability for cross gender viewing.

Paint booth had a blind spot/area where offenders could be isolated.

Offender restroom W-8-1-43 had a wood panel on the restroom door provided too much privacy.

Kitchen – Diet Shop had a blind spot in the refrigerator area.

#### **Minimum Security Unit (MSU)** Areas that auditors noted deficiencies

Bldg. ISB property had two rooms M-3-49 and M-3-50 had solid doors where offenders could be isolated.

Maintenance shop by design had a blind spot.

**Special Offenders Unit (SOU) Areas that auditors noted deficiencies**

Kitchen had a blind spot in the corner above storage room S-9-14. Auditor also spoke with staff working in this area who stated that the mirror would be helpful when offenders are working in the area.

G building - Medical offender restroom S-9-55 and reception offender restroom S-9-38 had windows that allowed view of the toilet.

G bldg., Medical close observation rooms: Direct sight is required for offenders who have been placed on suicide watch. On occasion these rooms are used to monitor offenders for medical and mental health issues who are not on suicide watch.

**IMU out buildings – Areas that auditors noted deficiencies**

Warehouse blind spot and area where offenders could be isolated:

Offender restroom had slide lock on inside of the offender restroom door and the left side of refrigerator needed to be blocked off to prevent the ability of offenders to be in this area.

**On-site staff and offenders interviews conducted**

The lead auditor and support staff conducted interviews utilizing applicable PRC staff and offender protocols as a guide in conducting interviews and interviews were conducted in offices or rooms that allowed for privacy with the responses being summarized and recorded by hand. Specialized interviews with WADOC Agency Head, Agency PREA coordinator and Agency Contract Administrator were conducted in September and noted in this report. Per the auditor handbook for minimum number of required offender interviews to be completed is 25 random and 25 specialized.

**Staff interviews:**

Random staff interviews to include custody and non-custody staff: 40

Total specialized staff interviews conducted on-site: 34

***Specialized Staff Interviews:***

Facility Head (1)

PREA compliance manager (1)

Human Resources (1)

Incident Review Team (1)

Medical (4)

Mental Health (4)

Retaliation Monitor (2)

Investigative Staff (3)

Intermediate/Higher level staff (7)

Intake Staff (4)

Staff Who Work in Segregation (1)

Staff who Perform Risk Screening Assessment (3)

First Responder (custody) (1)

First Responder (non-custody) (1)

SAFE/SANE (1) conducted telephonically on Wednesday, October 31, 2018

### **Offender interviews:**

Random Offender interviews conducted on-site: 52

Specialized Offender interviews conducted on-site: 35

#### **Specialized Offender interviews**

Disabled (physical): (2)

Disabled (limited sight/blind/deaf/hard hearing): (3)

Limited English Proficient (LEP) (4)

Cognitively Impaired: (3)

Transgender/Intersex: (5)

Gay/Bi-Sexual: (6)

Inmates who reported sexual abuse in confinement: (6)

Inmates who reported sexual abuse during risk assessment: (6)

Inmates in administrative segregation for risk of sexual victimization: (N/A did not have any housed in segregation during on-site audit. Interviews required were 2, auditor added to inmate who reported sexual abuse during screening.

Youthful Inmate: (N/A – none housed at MCC. Interviews required were 4, auditor added 2 to LEP and 2 to Lesbian/Gay/Bisexual interviews.

Interviews completed with offenders who wrote letters (4)

### **Post-Audit Phase**

Following the on-site portion of the audit, the lead auditor gathered information from on-site audit, additional review of pre audit documentation and feedback from the team members. MCC was able to correct physical plant deficiencies prior to the 45 day report requirement and they did not need a long term corrective action plan. The deficiencies and action take to correct is noted in the narrative and



summary of corrective action areas of this report. Auditor received photographs which were sufficient in providing this auditor proof that action was taken

During the 45 day time frame this auditor was in communication with the agency PREA coordinator, PREA compliance manager and PREA Specialist who provided additional documentation requested. This auditor reviewed each standard and documents provided pre on-site audit, information received from interviews during on-site audit and documents received post on-site audit to determine compliance of each standard.

## Facility Characteristics

The Monroe Correctional Complex (MCC) is comprised of five facilities, with a population of nearly 2,500 offenders and approximately 1,200 staff. The complex provides three major services for Washington's correctional system: housing and treatment for acutely mentally ill offenders; housing and treatment for sex offenders; and primary referral and treatment center for complex health-related issues.

Services provided at MCC include custody and security, classification, education, offender work programs, health care (both inpatient and outpatient), mental health care, sex offender treatment, food service, maintenance, personnel, recreation, volunteer services, religious services, library services, offender records, visiting and extended family visiting. The number of our volunteers fluctuate around 800.

### Washington State Reformatory Unit (WSRU)

Custody: Medium or Minimum

The Washington State Reformatory Unit opened in 1910. Offenders are housed in two large cellblocks that are the prominent focal point of this historical building. Each cellblock has 316 cells and houses approximately 360 offenders. The Reformatory has an inpatient hospital that can also be utilized by other correctional facilities within the state. There are five Extended Family Visit mobile homes that allow for offenders to visit family style with their immediate relatives, spouses, and children. These units provide services for the entire MCC complex.

Educational opportunities offered through our partnership with Edmonds Community College include Building Maintenance/Construction Trades, Computer Information Systems-Web Application Developer Certificate, Small Business Entrepreneur Certificate, Business Associate of Technical Arts DEGREE, College Prep Math, BASIC SKILLS (GED/ESL), ENGLISH as a Second Language (ESL / ELA). Correctional Industries and Chemical Dependency Treatment (inpatient and outpatient). University Beyond Bars also provides college course level instruction.

### Special Offenders Unit (SOU)

Custody: All Custody Levels: Maximum, Close, Medium, and Minimum

The Special Offenders Unit opened in 1981, providing a facility to treat/house the many Seriously Mentally Ill (SMI) offenders needing a residential level of care. SOU was later expanded to a 400 bed capacity with the addition of the Medium/Minimum custody housing of E and F Unit. SOU is made up of a total of six living/treatment units offering specific treatment functions and unique programs.

A and B units are part of the original Core building and have a 72 bed capacity of single cells, with 32 of these cells for segregation offenders. The other 40 are for maximum custody offenders on the Intensive treatment Status (ITS) program. The ITS program utilizes a Progressive Reintegration Program (PRP) designed for the mentally ill offenders to successfully complete the treatment program and transition back to lower levels of care.

C and D units are part of the Core building and have a 72 bed capacity of single cells. These units house close custody SMI offenders requiring a highly structured environment.

E unit is a 96 bed single cell unit that houses Medium/Minimum custody level offenders. This unit serves long term offenders that would be vulnerable in a general prison population. Purrfect Pals (an animal rescue agency) has partnered with MCC/SOU/E Unit to form Monroe Corrections Kitten Connection (MCKC). Offenders provide foster care for kittens until they are able to be adopted. Eligible offenders must meet and maintain a stringent set of criteria to participate in this program. All costs are covered by Purrfect Pals. F unit consists of 80 double man cells on the unit which serve Medium/Minimum Offenders. F unit serves as a transitional residential housing unit preparing seriously mentally ill offenders for transfer to a lower level of care or release back to society. Educational opportunities at SOU includes: Adult Basic Education, GED®, Job Readiness, College Readiness and Chemical Dependency.

### **Twin Rivers Unit (TRU)**

Custody: Medium or Minimum

The Twin Rivers Unit opened in 1984 as a 500-bed medium custody facility. Today, it houses over 800 offenders on four living units: two minimum custody units and two medium custody units, each housing approximately 200 offenders. The Washington State Sex Offender Treatment and Assessment Program (SOTAP) is located at TRU and offenders participating in the program are housed in C-Unit, a minimum long term security unit. The SOTAP at TRU facilitates the treatment of 200 offenders at once. Educational opportunities at TRU includes: Adult Basic Education, GED®, English as a Second Language, Entrepreneurship and Small Business Management, Job Readiness, College Readiness, Correctional Industries and Chemical Dependency.

### **The Minimum Security Unit (MSU)**

Custody: Minimum

The Minimum Security Unit opened in 1997. There are three 120 bed living units and one 90 bed unit housing a Mental Health called the Crossroads Program. This program is the only one in Washington State DOC, that allows mentally ill offenders to transition through lower levels of custody and accept more responsibility for managing their own mental health. Capacity is 468 with beds being held for offenders temporarily out of the facility for court, hospital, segregation, extended family visits (EFV), etc. MSU accepts selected short-term (4 years or less to serve) offenders with minimum custody.

MSU has in-camp workers for the Offender Kitchen/Dining Room, Unit and Administrative Porters, Grounds Keepers, Religious Clerks, Teachers Assistants and a Grounds Beautification Crew. Minimum-security offenders also work on supervised Community Work Crews (CWC), providing general labor such as landscaping, painting, and highway cleanup; in addition they can be used to support county emergency management through flood response.

The Educational Opportunities at MSU includes: Adult Basic Education, GED®, Job Readiness, College Readiness, Building Maintenance Technology, Entrepreneurship and Small Business Management and Chemical Dependency.

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

Custody: Maximum

The Intensive Management Unit is a security level 5 facility which opened in 2007 as the newest addition to the Monroe Correctional Complex. The 100-bed IMU houses behaviorally difficult-to-manage offenders in a highly-controlled environment. This IMU has been designated the mental health IMU for the state. In 2015, a portion of the IMU was designated to house DOC Community Corrections violators.

Offenders assigned to the IMU are provided with an opportunity to shower and shave three times a week and are offered a minimum of one hour of exercise five times a week. Meals of similar quality and quantity of general population offenders are provided three times a day. Offenders have access to telephone, mail and general correspondence materials.

IMU is staffed with health care, dental and mental health providers. Offenders are provided access to religious guidance, education, self-help programs, library and law library (to include electronic law library).

Offenders participate in a program management level system which rewards positive behavior by promoting offenders through a system of levels/progressives steps. Failure to participate in programming opportunities will be cause to deny level promotion.

While offenders are housed in the IMU they are encouraged to participate in the Reintegration and Progression Program (RAPP) where they learn several valuable skills that will aid them in a successful return to either general population or their return to the public sector. Mental health services play an important role in the progression of these offers.

Educational opportunities at IMU includes: Adult Basic Education and GED®

## Summary of Audit Findings

The on-site portion of the audit went extremely well. Prior to the on-site audit the MCC executive staff executed a plan of action and through their coordinated efforts and team work made this audit flow efficiently with very few delays allowing this audit to be completed in 4 days. The audit team was treated respectfully and professionally by staff and offenders. This audit team would like thank all of the superintendents for clearing their schedules, dedicating their time and availability to the audit team for the entire on-site audit. The audit team would also like to thank the designated Captains and Security Team members who escorted the audit team.

Prior to the on-site audit this auditor reviewed MCC prior audit report dated October 28, 2016. This auditor noted areas to determine if compliance had been maintained and found that MCC has continued to meet compliance in those areas. Staff should be commended on their hard work, commitment to PREA and sexual safety of offenders housed at MCC.

MCC had a few physical plant issues in some areas that were identified during facility tour. MCC was able to address these deficiencies during the 45 day time frame. While corrective action was identified, MCC did not require a corrective action plan outside the 45 days and final report completed and provided to the agency PREA coordinator on December 12, 2018.

### **Best practice recommendations:**

Captains wing/shift office – staff restroom T-4-8: Recommendation for a 2 way lock: New lock was added. 11/7/18 photo of action taken was provided to the auditor.

**Number of Standards Exceeded:** 1

115.73

**Number of Standards Met:** 44

115.11, 115.12, 115.13, 115.14, 115.15 115.17, 115.18, 115.21, 115.22, 115.31, 115.32 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403

**Number of Standards Not Met:** 0

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

MCC had some physical plant deficiencies which required some corrective action. MCC was able to correct these during the 45 day interim/final report date. These deficiencies were noted in the narrative and action taken in noted below.

### **Twin Rivers Unit (TRU)**

115.13 (a-5) – Kitchen had a blind spot in the S.E. corner. 11/7/18 a mirror was installed above the ice machine. Auditor was provided photo of correction taken.

115.13 (a-5) – Electric shop loft/2<sup>nd</sup> floor had a blind spot. 11/7/18 a mirror was installed in an area that provided view into this area. Auditor was provided photo of correction taken.

need a mirror placed to view to see this area

115.15 (d) – Offender restrooms T-6-38, T-11-34 and gym had mirrors which allowed view of offenders. Privacy dividers were installed to prevent cross gender viewing, on 11/9/18 auditor was provided with photos of action taken.

### **Washington State Reformatory Unit (WSRU)**

115.15 (d) – gym restroom: The area of the toilet had the ability for cross gender viewing. Maintenance staff added privacy screen that allows privacy, on 11/9/18 auditor was provided with photos of action taken.

115.13 (a-5) – Paint booth had a blind spot/area where offenders could be isolated. Area was block off with fencing, on auditor was provided with photos of action taken.

115.13 (a-5) – Offender restroom W-8-1-43: The wood panel on the restroom door provided too much privacy. Auditor requested that they adjust the wood panel that would still provide privacy, but allow staff the ability to view and ensure only one offender is in restroom at a time to prevent potential sexual abuse. On 11/9/18 auditor was provided with photo of action taken.

115.13 (a-5) – Kitchen – Diet Shop had a blind spot in the refrigerator area. Maintenance staff installed a mirror, on 11/9/18 auditor was provided a photo of action taken.

### **Minimum Security Unit (MSU)**

115.13 (a-5) – Bldg. ISB property had two rooms M-3-49 and M-3-50 that had solid doors where offenders could be isolated. Maintenance staff cut an area to install windows. On 11/9/18 auditor was provided pictures of action taken.

115.13 (a-5) – MSU maintenance shop by design had a blind spot. Maintenance staff installed a half dome mirror, on 11/9/18 auditor was provided a picture of action taken.

### **Special Offenders Unit (SOU)**

115.13 (a-5) – Kitchen had a blind spot and in the corner above storage room S-9-14. Auditor also spoke with staff working in this area who stated that the mirror would be helpful when offenders are working in the area. Maintenance installed a mirror to allow staff the ability to view in this area offenders are working. On 11/9/18 auditor was provided a picture of action taken.

115.15 (d) – G bldg., Medical offender restroom S-9-55 and reception offender restroom S-9-38 had windows that allowed view of the toilet. Maintenance installed privacy on the window to prevent cross gender viewing. On 11/9/18 auditor was provided with a photo of action taken.

115.13 (a-5) – G bldg., Medical close observation rooms: Direct sight is required for offenders who have been placed on suicide watch. On occasion these rooms are used to monitor offenders for medical and mental health issues who are not on suicide watch. Maintenance staff made a privacy screen that can be inserted to provide privacy for offenders who are not on suicide watch and post orders were amended to advise staff to utilize these for offenders not on suicide watch. 11/9/18 auditor was provided with photo with the privacy screen installed and a copy of the change to the Post order.

**SOU out buildings –**

Warehouse had a blind spot or offenders could be isolated. The offender restroom had a slide lock on the inside of the door and an area behind the refrigerator needed to be blocked off to prevent the ability of offenders to be in this area. While audit team was in the area the slide lock was removed and on 11/9/18 the auditor was provided photos the gate that was installed to block this area off.

**PREVENTION PLANNING**

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

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

**115.11 (a)**

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

**115.11 (b)**

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

**115.11 (c)**

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

## Auditor Overall Compliance Determination

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

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

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

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

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

Additional supporting documentation.

Prison Division organizational chart

MCC organizational chart

Agency PREA coordinator position description

Policy 490.800 Zero Tolerance statement reads: The Department recognizes the right of offenders to be free from sexual misconduct. The Department has zero tolerance for all forms of sexual misconduct. The Department will impose disciplinary sanctions for such conduct, up to and including dismissal for staff. Incidents of sexual misconduct will be referred for criminal prosecution when appropriate. The Department does not recognize consensual sexual contact between staff and offenders as a defense against allegations of sexual misconduct. The Department recognizes the right of staff and offenders to be free from retaliation for reporting sexual misconduct. The Department has zero tolerance for all forms of retaliation against any person because of his/her involvement in the reporting or investigation of a complaint. Retaliation may be subject to corrective/disciplinary action.

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

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

managers, mental health, and investigators. She has consistent communication with committee members via phone, emails and in person. In addition the committee members meet every other month as a group.

Policy 490.800 outlines facility PREA compliance manager (PCM) responsibilities. Auditor was provided a copy of the facility organizational chart supporting the level of authority, which was further supported during the PCM specialized interview during on-site visit. During this audit time frame the facility PCM is also one of two MCC Superintendents working his way up in the Department over the last 25 years. With the help of the PREA specialist he has sufficient time and authority to coordinate the facilities efforts for PREA. The PCM attends monthly meetings with the PREA advisory council and conducts quarterly meetings with staff to review and discuss changes that may have been sent down from Head Quarters to coordinate the facilities continued efforts to comply with PREA standards.

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

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

### 115.12 (a)

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

### 115.12 (b)

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

### Auditor Overall Compliance Determination

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

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



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

Additional supporting documentation.

Copy of contract page Article V – PREA – sexual misconduct

Memo from agency head

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

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

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

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

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

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

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

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

Yakima County Jail for housing of over flow female offenders

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

## Standard 115.13: Supervision and monitoring

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

### 115.13 (a)

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

levels and determining the need for video monitoring?  Yes  No

- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring?  Yes  No

#### 115.13 (b)

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

#### 115.13 (c)

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

#### 115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?  Yes  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?  Yes  No

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation.

Memos from Superintendent

Arial view of MCC

MCC Quality Assurance Audit Summary

MCC Org charts

Copy of custody and non-custody staffing model

Copy of Daily Staff Roster

Copy of shift Ops log

Memo regarding hiring freeze and cost saving measures

Memo for documentation of supervisory tours

Copy of shift log to support supervisor tours

Auditor triangulated information in determining compliance with this standard. During facility tour there were some minor blind spots concerns and areas where staff and offenders could be isolated. While these were minor physical plant issues, they created an area for potential sexual abuse. MCC took immediate action to correct these area's which was completed within the 45 day time frame for audit report date issuance.

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

DOC 400.800 section VI. Staffing Plans reads as follows: Each Superintendent and Work Release Community Corrections Supervisor. (CCS) will use the PREA Compliant Staffing Plan template maintained on the PREA Audit SharePoint site to develop, maintain, and annually review a staffing plan that includes an objective analysis of the facility's staffing needs and established staffing model. Prisons, this review should be in conjunction with the post audit conducted per DOC 400.210 Custody Roster Management. Reviews will document consultation with the PREA Coordinator, who will be provided with a copy of the completed PREA Compliant Staffing Plan.

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

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

Specialized interviews with staff supported compliance with this standard and agency policy who all stated that they conduct unannounced rounds on all shifts. Supervisors are not are not announced and should they hear staff alerting or informing others that a supervisor was conducting rounds they would address with the staff member. During the on-site facility tour audit team conducted impromptu interviews with staff in the units to inquire if supervisors conduct rounds, do the staff alert other staff and how are these rounds documented. All staff responded affirmatively that supervisors conduct the rounds and document that rounds are completed in the unit log book. Audit team reviewed some of the unit log book during tour which supported that these rounds are documented, with the majority of the supervisors using a red pen which easily identified that rounds had been conducted.

## Standard 115.14: Youthful inmates

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

#### 115.14 (a)

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

#### 115.14 (b)

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

#### 115.14 (c)

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

### Auditor Overall Compliance Determination

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

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

320.500 Youthful Offender Program

Additional supporting documentation

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

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

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

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

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

### 115.15 (a)

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

#### 115.15 (b)

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

#### 115.15 (c)

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

#### 115.15 (d)

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

#### 115.15 (e)

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

#### 115.15 (f)

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

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

### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation.

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

Element (b) is not applicable to MCC

WADOC 420.310 reads that strip searches of male offenders require that one of the employees conducting the search be male. If the second person conducting the strip search is female, she will position herself to observe the employee doing the strip search, but will not be in direct line of sight with the offender. During interviews with random staff and inmates supported policy as written. Staff stated female custody staff members are positioned to watch male custody staff for safety but are positioned in a way that they will not be able to view genitalia while the offender is unclothed. Offenders stated during interviews that female staff members do not view them if they are unclothed.

DOC 490.800 reads: An announcement will be made indicating "Man on unit" or "Woman on unit" by anyone who does not identify with the facility's gender designation, loud enough and often enough to reasonably be heard by the occupants of a housing unit, including the living area (e.g., where incarcerated individuals sleep), or any common area designated for offenders to disrobe or change their clothing (e.g., bathrooms, showers).



Onsite interviews with staff and offenders supported and confirmed compliance with agency policy and standard. Cross gender announcement were also completed during audit team facility tour and when audit team entered housing units to conduct interviews with staff and offenders.

DOC 490.800 reads: Employees/contract staff who may conduct pat searches will be trained in cross-gender searches and searches of transgender and intersex offenders.

All staff interviewed had a good understanding and knowledge of how to conduct a proper pat search. Staff was able to describe how they conduct or would conduct a pat search of Transgender/Intersex offenders.

Specialized interviews with transgender offenders further supported that staff knew how to conduct a proper pat search. This auditor reviewed 2014 Pat Search training slides which includes but not limited to; search of female, male and inter-sex/transgender offender. WADOC is in the process of updating revising the pat search training curriculum.

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

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

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

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

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

#### 115.16 (b)

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

#### 115.16 (c)

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

#### Auditor Overall Compliance Determination

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

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

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

310.000 Orientation for Offenders (8/27/12)

450.500 Language Services for Limited English Proficient (LEP) Offenders (1/14/13)

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

690.400 Offenders with Disabilities (4/25/17)

Additional supporting documentation.

Memos from Superintendent

DOC sign language Contract Interpreters log (7/7/18)

Copy of Correctional Specialist 3 (Deaf Services Coordinator) position description

Screen shots of DOC Americans with Disabilities Act staff training

Facilitator guide for offenders with limited intellectual capabilities

PREA brochure in Spanish

Memo regarding access to interpreters

Sample of Offender case note screen shot noting the use of interpreters

Interpreter service contracts:

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

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

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

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

Sign Language contracts:

K8652 – WADOC with Michelle Mile, commencement date 9/1/2010 extension expiration date 8/31/18.

K10329 – WADOC with Lynn Chun, commencement date 7/1/2013 extension expiration date 9/30/19.

K10357 – WADOC with Courtney Coddington, commencement date 8/1/2013 extension expiration date 7/31/20.

K10831 – WADOC with Andrew Gault, commencement date 4/20/15 extension expiration date 6/30/19.

K11255 – WADOC with Sarah Pettigrew, commencement date 6/25/18 extension expiration date 6/30/20.

K11283 – WADOC with Echo Zard, commencement date 9/1/16 extension expiration date 8/31/18.

K11309 – WADOC with Catherine Roy, commencement date 10/1/16 extension expiration date 9/30/18.

K11310 – WADOC with Luanne Conner, commencement 10/1/16 extension expiration date 9/30/18.

K11255 – WADOC with Elizabeth Baxter, dba Beth Dexter Interpreting Service, commencement date 1/1/17 extension expiration date 12/31/18.

K11511 – WADOC with Dawn Trouve, commencement date 4/17/17 extension expiration date 4/16/19.

K11734 – WADOC with Donna Walker, commencement date 3/1/18 extension expiration date 2/28/20.

K11255 – WADOC with Lanae Sanchez, commencement date 3/1/18 extension expiration date 2/28/20.

K11747 – WADOC with Lucinda Marie Porter, dba Cindy Porter, commencement date 4/1/18 extension expiration date 3/31/20.

K11760 – WADOC with David Morrison, commencement date 4/25/18 extension expiration date 4/24/20.

K11783 – WADOC with Melissa Klindlworth Sole Proprietor, commencement date 6/1/18 extension expiration date 5/31/20.

Specialized offender interviews supported compliance with agency policy and standards. Offenders confirmed that they received information and understood how to report and their right to be free from sexual abuse, sexual harassment and retaliations.

This auditor was provided with the contact number and instructions for the language bank. This service was used for conducting a specialized interview with an offender who was limited English proficient.

Specialized interview with a Deaf offender and hard of hearing offender was completed with both stating that they were comfortable communicating through lip reading and written communication. The hard of hearing was able to read lips and through written communication. The deaf offender was communicated with through writing. The deaf offender stated that there is a staff member that does sign language and she communicates with him often. Both offenders stated that they received the PREA education and assessments and understand how to report.

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

DOC 490.800 III Offender Accommodations reads: Professional interpreter or translation services, including sign language, are available to assist offenders in understanding this policy, reporting allegations, and/or participating in investigations of sexual misconduct per DOC 450.500 Language Services for Limited English Proficient (LEP) Offenders. Offenders are not authorized to use interpretation/translation services from other offenders, family members, or friends for these purposes. Staff interpreters/translators will only be used for these purposes in exigent circumstances. Americans with Disabilities Act (ADA) accommodations will be provided per DOC 690.400 Offenders with Disabilities.

## **Standard 115.17: Hiring and promotion decisions**

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

#### **115.17 (a)**

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

#### 115.17 (b)

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

#### 115.17 (c)

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

#### 115.17 (d)

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

### 115.17 (e)

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

### 115.17 (f)

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

### 115.17 (g)

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

### 115.17 (h)

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

### Auditor Overall Compliance Determination

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

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

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
400.320 Terrorism Activity (9/12/11)

800.005 Personnel Files (11/1/13)

810.015 Criminal Record Disclosure and Fingerprinting (11/1/17)

810.800 Recruitment, Selection and Promotion (11/1/17)

Additional supporting documentation

Memos from Superintendent

MCC staff newly hired or promoted during audit time frame

Copy of DOC 03-502 Sexual Misconduct Disclosure

Copy of contract shell for agency and individual service providers

Copy of spreadsheet for all contracted sign language of interpreters (background check)

Examples of DOC 03-506, Sexual Misconduct and Institutional Employment / Service Disclosure forms for contractors

MCC Contractor roster

Contract K11806 religious services

Screen shot of PREA 101 curriculum regarding continuing affirmative duty to report

Auditor triangulated information in determining compliance with this standard. After reviewing agency policy, specialized interview with supervisor of facility HR division, reviewing supporting documentation provided pre on-site audit and information requested on-site to determine compliance with this standard.

Specialized interview with human resources staff member was conducted during on-site visit with the facility HR supervisor. HR supervisors stated that they complete NCIC and FBI background checks are all new employees and contractors and follows up on dispositions if a positive response returns. Prior to staff being promoted a review of the Offender Management Network Information (OMNI) system is reviewed for possible allegations or investigations.

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

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

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

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

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

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

## Standard 115.18: Upgrades to facilities and technologies

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

#### 115.18 (a)

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

#### 115.18 (b)

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

### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation



## MCC Project Security Procedures

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

Since the last PREA audit MCC had some modifications or expansions. WADOC works with the consultant during this process taking PREA into consideration. During the facility tour the audit team was able to view the modifications to the showers in WSR and toilet/urinals in MSU.

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

# RESPONSIVE PLANNING

## Standard 115.21: Evidence protocol and forensic medical examinations

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

### 115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)  
 Yes  No  NA

### 115.21 (b)

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

### 115.21 (c)

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

#### 115.21 (d)

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

#### 115.21 (e)

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

#### 115.21 (f)

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

#### 115.21 (g)

- Auditor is not required to audit this provision.

#### 115.21 (h)

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

### Auditor Overall Compliance Determination

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

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

490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
 490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
 600.000 Health Services Management (8/25/14)  
 600.025 Health Care Copayment Program (7/14/15)  
 610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct (10/14/16)

#### Additional supporting documentation

Memos from Superintendent  
 Excerpt from "A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents, Second edition, April 2013 (entire document was also provided)  
 Sexual Assault Evidence Collection: Uniform Evidence Protocol  
 Forensic Medical Exam Procedure for DOC Health Care Staff  
 Forensic Medical Exam Procedure for Transporting Staff  
 Crime Scene Containment/Preservation/Processing Checklist (DOC 16-357)  
 Crime Scene Log (DOC 16-358)  
 Informed Consent and Information Form (Providence Medical Center)  
 Memo from Superintendent regarding advocacy support during investigatory interview  
 Memo from Assistant Secretary, Health Services regarding documentation of SANE visits  
 Copy of Mutual Aid Agreement between State of Washington, Washington State Patrol and State of Washington Department of Corrections K8487 (contract extension 7/1/17 – 6/30/20)  
 Copy of Interagency Agreement (K11494) between The State of Washington Department of Corrections and Department of Commerce Office of Crime Victims Advocacy (current contract valid 7/1/17 – 6/30/19)  
 OCVA and WADOC Sexual Assault Support and Information Line offender brochure (English and Spanish)  
 Copy of In-Person Victim Advocacy Services Guide  
 Copy of PREA advocate qualifications

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

Wednesday, October 31, 2018 auditor conducted specialized telephonic interview with emergency room nurse at the Providence Medical Center Everett. Staff member stated that they have 15 on-call nurses who are trained in the PREA protocols for sexual assault medical forensic exams. When a call is received that an inmate was sexually abused within time frames for physical forensic evidence collection they will be transported to Providence Medical Center. A victim advocate from the Providence Intervention Center for Assault and Abuse is contacted and they respond to the hospital.

Thursday, November 1, 2018 this auditor conducted a specialized telephonic interview with a victim advocate from the Providence Intervention Center for Assault and Abuse. The advocate explained the process in response to a call that an offender was sexually abused. The advocated stated that they will respond to the hospital to offer support and if requested would provide support during the investigatory process. The advocated stated that they have a good working relationship with staff at MCC and have toured the facility. If requested by the offender the victim advocate will work with MCC to schedule meetings with the offender at the facility.

(f) The local sheriff's office or the police department if the facility is located within city limits is the primary investigator for criminal sexual abuse allegations. Should either of these agencies decline to conduct a criminal investigation, the Washington State Patrol could conduct the criminal investigation at the request of the Work Release Administrator.

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

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

#### **115.22 (a)**

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

#### **115.22 (b)**

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

### 115.22 (c)

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

### 115.22 (d)

- Auditor is not required to audit this provision.

### 115.22 (e)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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

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

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

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

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

Additional supporting documentation

Copy of MCC allegations received

MCC and Monroe Police Department (MPD) meeting minutes

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

Screen shot of agency website Prison Rape Elimination Act

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

Auditor triangulated information in determining compliance with this standard. After reviewing agency policy, supporting documentation provided prior to audit and specialized interview with the Superintendent and facility investigators the facility meets compliance with this standard.

Specialized interviews were completed with Superintendent and PCM with both stating that they have a great working relationship with the Monroe Police Department, communicating with them regularly. Meeting minutes were provided to the auditor and supported the interviews. Auditor was provided with

the facility allegation/investigation tracking log and closed investigations for this audit time frame which was reviewed confirming that investigations are completed.

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

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

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

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

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

#### 115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?  Yes  No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  Yes  No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  Yes  No

- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?  Yes  No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  
 Yes  No

#### 115.31 (b)

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

#### 115.31 (c)

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

#### 115.31 (d)

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

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

Memo from Superintendent

MCC staff listing PREA annual report tracking log

Screen shot of transcript of PREA training completed by staff

PREA 2019 Annual In-Service Facilitator Guide

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

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

Random interviews with staff provided auditor the 3<sup>rd</sup> prong for determining compliance. Staff stated that they complete PREA in-service E-learning training annually and have good knowledge and understanding of the training received. All staff stated how they respond to and report should they receive an allegation of sexual abuse or imminent threat of sexual abuse. All security staff stated that they understood how to conduct a pat search of a transgender or intersex offender. Audit team probed on how they would conduct the pat search with staff describing the appropriate protocols to use blade/back of hand which is the same procedure that is used in the female facility.

(b) This element was marked no, as WADOC exceeds this standard element. WADOC PREA training curriculum includes information applicable to both male and female offenders. All new staff receive PREA training in the academy and current staff are required to complete on-line PREA training annually. Staff interviewed stated that they complete PREA training annually and the auditor reviewed the MCC staff training roster provided.

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



training. For online training, acknowledgment will be included in the electronic course. For in-person training, acknowledgment will be documented by signing the course roster, which will include a statement verifying participant understanding.

## Standard 115.32: Volunteer and contractor training

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

#### 115.32 (a)

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

#### 115.32 (b)

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

#### 115.32 (c)

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

### Auditor Overall Compliance Determination

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

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

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

530.100 Volunteer Program (11/1/17)

700.400 Class IV Off-Site Work Crew (6/1/13)

Additional supporting documentation

Memo from Superintendent

Contract shell for agency and individual service providers

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

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

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

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

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

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

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

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

## Standard 115.33: Inmate education

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

#### 115.33 (a)

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

#### 115.33 (b)

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

#### 115.33 (c)

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

#### 115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?  Yes  No

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

### 115.33 (e)

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

### 115.33 (f)

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

### Auditor Overall Compliance Determination

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

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

310.000 Orientation for Offenders (8/27/12)

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

Additional supporting documentation

Memo from Superintendent

MCC incoming offenders-Orientation tracking

MCC offenders who arrived prior to 2012

Statewide Offender Handbook Excerpt (entire handbook also provided)

Offender PREA brochure English and Spanish

Spreadsheet detailing offenders received and date orientation completed

Examples of orientation completion documentation

PREA orientation video transcript

Facilitator guide for offenders with limited intellectual capabilities

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

Offenders stated they had received PREA training upon arrival at MCC and understood the information provided and how to report. The majority of the offenders stated that they felt comfortable reporting to staff at MCC with some stating that they would report using the PREA hotline, contacting family to report on their behalf, filing a grievance or using the external reporting form. During specialized interviews with offenders who are limited English proficient or disabled received education in formats that they could read and understand.

## Standard 115.34: Specialized training: Investigations

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

### 115.34 (a)

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

### 115.34 (b)

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

### 115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does

not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).]  
 Yes  No  NA

#### 115.34 (d)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

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

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

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

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

#### Additional supporting documentation

Memo from Superintendent

Agency spreadsheet for staff that completed PREA Workplace Investigation Training

Sample documentation of trained investigators confirming completion of training

WAC 139-05-240 outlining requirements of the basic law enforcement academy

HB 1109 Supporting Victims of Sexual Assault

#### Training curriculum provided:

Responding to Sexual Misconduct for Appointing Authorities

PREA Investigations Booster training

Investigator Training revised in 2015

PREA for Appointing Authorities

Washington State Department of Corrections Workplace and PREA Investigations Training

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

WADOC developed specialized training curriculum for staff who may be assigned to conduct administrative PREA investigations. Three facility investigators who have completed PREA specialized training and PREA investigations during this audit time frame were selected for specialized interviews. Interviews were conducted at separate times in interview area's that allowed for privacy. Staff members stated that they had received the training to include regular PREA training. WADOC staff members are

not sworn peace officers and would never use Miranda. Investigators are familiar with Garrity and when it applies for investigations involving staff members.

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

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

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

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

#### **115.35 (a)**

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

#### **115.35 (b)**

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

#### **115.35 (c)**

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

#### **115.35 (d)**

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

### Auditor Overall Compliance Determination

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

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

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

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

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

#### Additional supporting documentation

Memo from Superintendent

PREA for Health Services training curriculum

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

Documentation of random samples of completed training

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

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

(b) is not applicable as facility staff do not conduct SAFE. These are conducted by SANE at the Providence Medical Center Everett in Monroe, Washington.

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



## SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

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

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

#### 115.41 (a)

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

#### 115.41 (b)

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

#### 115.41 (c)

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

#### 115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?  
 Yes  No

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

#### 115.41 (e)

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

#### 115.41 (f)

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

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral?  Yes  No

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

#### 115.41 (h)

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

#### 115.41 (i)

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

#### Auditor Overall Compliance Determination

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

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

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

#### Additional supporting documentation

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

PREA risk assessment (PRA) training curriculum  
Memo from WADOC Deputy Secretary

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

Prior to the on-site audit this auditor reviewed MCC prior audit report dated October 28, 2016. This audit report noted that this standard had a corrective action plan and the deficiency was corrected to meet compliance. This auditor reviewed documentation from time frame of last audit to current audit time frame and determined that MCC has continued to maintain compliance and meets full compliance with this standard. Staff should be commended on their hard work and continued commitment to PREA compliance and the sexual safety of offenders housed at MCC.

Specialized staff and offender interviews completed on-site further confirmed compliance with this standard and agency policy. Offenders stated during interviews that they had been affirmatively asked the PREA questions upon intake and shortly after arriving.

Policy 490.820 reads in part:

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

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

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

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

## Standard 115.42: Use of screening information

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

#### 115.42 (a)

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

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

#### 115.42 (b)

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

#### 115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?  Yes  No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?  Yes  No

#### 115.42 (d)

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

#### 115.42 (e)

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

#### 115.42 (f)

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

#### 115.42 (g)

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

### Auditor Overall Compliance Determination

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

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

300.380 Classification and Custody Facility Plan Review (3/7/18)

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

#### Additional supporting documentation

Memo from Superintendent

Learning Management System (LMS) for PREA risk assessment for housing assignments

PREA risk assessment for housing assignment user guide

Random examples of Chrono entries

Protocol For The Housing of Transgender and Intersex Offenders (DOC 02-384)

Protocol Housing Review For Transgender and Intersex Offenders (DOC-385)

MCC list of Transgender/Intersex Offenders

MCC Operational Memorandum 490.820

Sample documentation regarding work, education and programming assignments taking into account

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

Specialized interviews with Transgender offenders were completed during on-site visit. Offenders stated that they are able to shower privately and are not housed placed in dedicated areas based on how they identify. Audit team ensured that shower areas were reviewed during tour of the facility and determined that MCC showers provided privacy for all offenders. Targeted interviews with Transgender offenders supported compliance that they are seen at a minimum of every 6 months (twice a year) when they affirmatively stated that they to meet with staff.

Specialized interview conducted with the PCM who stated that the agency and facility have policy and procedures in place to review information prior to the Transgender Offender arriving at MCC. Transgender and intersex offenders are assessed upon intake, within 72 hours with a follow up assessment within 30 days. They are seen again every 6 months or when a change in housing assignment is indicated

Policy 490.820 requires that staff reassess placement and programming assignments every 6 months using DOC 02-385 Protocol for Housing Review for Transgender and Intersex Offenders to review any threats to the offender's safety.

Policy 490.820 outlines procedures which include but is not limited to staff review housing and programming initially and prior to any transfer by a local review committee for all offenders who identify as transgender or intersex. Reviews will be documented on DOC 02-384 Protocol for the Housing of Transgender and Intersex Offenders, which will be scanned into a secure site in the electronic imaging system accessible by staff who are authorized to review the is information for confidentiality.

## Standard 115.43: Protective Custody

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

#### 115.43 (a)

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

#### 115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  Yes  No

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

#### 115.43 (c)

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

#### 115.43 (d)

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

#### 115.43 (e)

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

#### Auditor Overall Compliance Determination

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



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

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

320.255 Restrictive Housing (10/26/16)

320.260 Secured Housing Units (10/26/16)

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

Additional supporting documentation

Memo from Superintendent

MCC Housing assignment of Offenders designated as Potential Victims

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

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

During this audit time frame and while on-site MCC did not and offenders involuntarily housed as victim of sexual abuse in protective custody.

## REPORTING

### Standard 115.51: Inmate reporting

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

#### 115.51 (a)

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

#### 115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?  Yes  No

- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the inmate to remain anonymous upon request?  Yes  No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?  Yes  No

#### 115.51 (c)

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

#### 115.51 (d)

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

#### Auditor Overall Compliance Determination

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

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

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

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

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

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

Additional supporting documentation

Memo from Superintendent

WAC 137-020

WADOC PREA AIS 2019 Facilitator Guide

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

Statewide offender handbook  
PREA brochure and posters (English and Spanish)  
Memorandum of Understanding (MOU) with Colorado DOC for external reporting  
Memorandum from agency ADA compliance manager  
Facility complaint log – methods allegations were reported  
MCC outside agency reporting log  
Brochure for staff, contractors, and volunteers.

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

During on-site tour auditor of the facility the audit team observed PREA reporting posters (English and Spanish), OCVA (victim advocacy posters – English and Spanish) and the external reporting forms in all housing units. PREA posters were also posted throughout MCC in high traffic areas, work and program areas. During on-site audit the visiting room was being painted and the PREA information was moved, MCC provided auditor with pictures showing that information had been replaced after painting was completed.

Auditor tested some of the inmate phones in housing unit to confirm that offenders were able to place a call and that the reporting system worked. Auditor received an email from agency PREA coordinator that the call was received to include the date, time and information I provided on the message.

All offenders interviewed stated that they know how to report with a majority of the offenders stating that they feel comfortable with staff and would report to them. They also knew that they could use the phone, grievance, kiosk and external reporting form.

## Standard 115.52: Exhaustion of administrative remedies

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

#### 115.52 (a)

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

#### 115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)  Yes  No  NA

- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (c)

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

#### 115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  
 Yes  No  NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (e)

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

#### 115.52 (f)

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

#### 115.52 (g)

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

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation  
Memo regarding handling of grievances  
MCC PREA allegations received log

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

When an offender submits an allegation through the grievance system, the grievance is sent to the PREA triage process and the offender is notified of that action via the grievance response. During the audit time frame no offenders filed an emergency grievance reporting a PREA allegation.

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

Interviews with offenders stated that they know they report and allegation of sexual abuse or sexual harassment on a grievance.

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

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

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

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

### 115.53 (a)

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

- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

#### 115.53 (b)

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

#### 115.53 (c)

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

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

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

WCSAP brochure regarding statewide community based victim advocacy services

Memo from Assistant Secretary – PREA advocacy

Interagency Agreement K11494

In person victim advocacy services guide

Memo regarding Advocacy Support during Investigatory Interview

Auditor triangulated information provided reviewing policy, supporting documentation and specialized interview with PCM and advocate from the Providence Intervention Center for Assault and Abuse.

Thursday, November 1, 2018 this auditor conducted a specialized telephonic interview with a victim advocate from the Providence Intervention Center for Assault and Abuse. The advocate explained the process in response to a call that an offender was sexually abused. The advocated stated that they will respond to the hospital to offer support and if requested would provide support during the investigatory process. The advocated stated that they have a good working relationship with staff at MCC and have toured the facility. If requested by the offender the victim advocate will work with MCC to schedule meetings with the offender at the facility.

Policy 490.800 reads in part: Community Victim Advocates

Sexual assault support services may be obtained through the Office of Crime Victims Advocacy (OCVA). Offenders may call 1-855-210-2087 toll-free Monday through Friday 8:00 a.m. - 5:00 p.m. to reach an OCVA PREA Support Specialist. Calls will not be monitored or recorded, and an IPIN will not be required. Abuse of the toll-free phone line will be reported to the Superintendent or the Work Release Administrator for action as needed. In-person consultations may be available to supplement phone based support for eligible offenders. Communication between the offender and the OCVA PREA Support Specialist is confidential and will not be disclosed unless the offender signs an authorization to release information.

## Standard 115.54: Third-party reporting

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

### 115.54 (a)

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

### Auditor Overall Compliance Determination

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

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

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



Additional supporting documentation

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

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

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

## OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

### Standard 115.61: Staff and agency reporting duties

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

#### 115.61 (a)

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

#### 115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent

necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?  Yes  No

#### 115.61 (c)

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

#### 115.61 (d)

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

#### 115.61 (e)

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

#### Auditor Overall Compliance Determination

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

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

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

#### Additional supporting documentation

Memos for Superintendent  
Staff, Contract Staff and Volunteer brochure  
PREA zero tolerance poster  
Statewide Offender Orientation Handbook  
PREA poster for medical/mental health areas  
MCC Allegations received log  
MCC Vulnerable Adult list  
RCW 74.34.020

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

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

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

During specialized interviews with medical and mental health staff, they explained how they inform the offenders of their duty to report and the limits of confidentiality. Mental health staff also stated that prior to meeting with an offender they explain the clinicians legal obligation to report certain information.

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

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

MCC does not house offenders under the age of 18. If an offender alleges sexual abuse and/or assault while a minor in the community, the staff member receiving the information will offer mental health and the need to report this information to CPS under the mandatory reporting requirements.

DOC Policy 350.550 addresses procedures to be taken if a vulnerable adult offender reports sexual or physical assault.

## Standard 115.62: Agency protection duties

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

#### 115.62 (a)

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

### Auditor Overall Compliance Determination

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

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

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

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)

Additional supporting documentation

- Memo from Superintendent
- Report of all offenders who have scored potential victim during audit time frame
- Examples of monitoring plans and housing assignment reviews
- Documentation and response check list showing immediate action taken to address potential risk

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

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

Policy 490.820 outlines procedures for offender monitoring plans completed by Classification Counselors or CCO's.

Policy 490.850 outlines procedures staff are required to follow when an offender reports an allegation of sexual abuse.

## Standard 115.63: Reporting to other confinement facilities

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

### 115.63 (a)

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

### 115.63 (b)

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

### 115.63 (c)

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

#### 115.63 (d)

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

#### Auditor Overall Compliance Determination

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

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

490.850 Prison Rape Elimination Act (PREA) Response (8/2/18)  
490.860 Prison Rape Elimination Act (PREA) Investigation (6/1/18)

Additional supporting documentation

Memos from Superintendent

List of allegations received by MCC about another facility or jurisdiction

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

Random sample of documentation of notification provided

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

Policy 490.850 reads in part: The Appointing Authority will notify the appropriate Appointing Authority or facility administrator within 72 hours of receipt of an allegation when the alleged incident:

Auditor reviewed proof of practice documentation provided which was completed within 72hrs of receiving the report. During the audit documentation time frame, MCC completed 6 notifications to other confinement facilities and received 18 notifications of allegations from other facilities or agencies.

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

#### Standard 115.64: Staff first responder duties

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

### 115.64 (a)

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

### 115.64 (b)

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

### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation  
Memo from Superintendent

First response actions brochure  
MCC PREA cases

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

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

DOC 490.850 addresses shift commander procedures that are to be taken upon receiving an allegation of sexual abuse to include process for initiating the Aggravated Sexual Assault Checklist and the PREA Response Team.

Policy 420.375 reference the procedures that shall be taken by staff for evidence retention and proper use of chain of command to include the forms staff need to use.

## Standard 115.65: Coordinated response

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

### 115.65 (a)

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

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

Memo from Superintendent

PREA response plan table of contents

Auditor reviewed agency policy(s), supporting documentation and information learned while on-site to determine compliance with this standard.

The PREA Response Plan for MCC is maintained in shift commanders offices. The Audit team observed the PREA response kits which were located in the WSRU, TRU and SOU Shift Commander offices.

DOC 490.850 addresses shift commander procedures that are to be taken upon receiving an allegation of sexual abuse to include process for initiating the Aggravated Sexual Assault Checklist and the PREA Response Team. The policy also states that the PREA response plan will be maintained in the Shift Commanders Office.

Policy 420.375 reference the procedures that shall be taken by staff for evidence retention and proper use of chain of command to include the forms staff need to use.

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

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

### 115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?  Yes  No

### 115.66 (b)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

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



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

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

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

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

## Standard 115.67: Agency protection against retaliation

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

### 115.67 (a)

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

### 115.67 (b)

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

### 115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?  Yes  No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?  Yes  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

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

#### 115.67 (e)

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

#### 115.67 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

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

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

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

Additional supporting documentation

Memo from Superintendent

Sample DOC 03-503 PREA Monthly retaliation monitoring reports

MCC monitoring tracking form

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

MCC PREA compliance specialist monitors and maintains the facilities retaliation tracking monitoring sheet. Designated staff within the unit the victim is housed conduct the monitoring and provides the information to the PREA compliance specialist. This auditor reviewed the retaliation monitoring sheet which was further supported when conducting specialized interview with PREA compliance specialist and selected CCS who meet with offenders which confirmed compliance with this standard.

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

Policy 490.860 reads in part: Retaliation against anyone for opposing or reporting sexual misconduct or participating in an investigation of such misconduct is prohibited. Individuals may be subject to disciplinary actions if found to have engaged in retaliation, failed to report such activities, or failed to take immediate steps to prevent retaliation. Staff and offenders who cooperate with an investigation will report all concerns regarding retaliation to the Appointing Authority. The Appointing Authority will take appropriate measures to address the concerns. When an investigation of offender-on-offender sexual assault/abuse or staff sexual misconduct is initiated, the Appointing Authority/designee of the facility where the alleged victim is housed will monitor to assess indicators or reports of retaliation against alleged victims and reporters. If another Appointing Authority is assigned to investigate, s/he or his/her designee will notify the applicable Appointing Authority to initiate monitoring.

## **Standard 115.68: Post-allegation protective custody**

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

### **115.68 (a)**

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

## Auditor Overall Compliance Determination

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

## Instructions for Overall Compliance Determination Narrative

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

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

Additional supporting documentation  
Memo from Superintendent

During this audit documentation time frame and while on-site MCC did not have any offenders involuntarily housed in Administrative segregation or restricted housing following a report of sexual abuse.

Specialized interviews with staff and offenders supported compliance with this standard and agency policy. The specialized offenders who were selected as part of targeted interviews for reporting sexual abuse stated that they were not placed involuntarily administrative segregation.

Policy 490.820 reads in part: Placement in Administrative Segregation for more than 24 hours should only occur if no suitable alternative housing exists and will last only until alternative placement can be made. Each alternative considered, along with the reason(s) it was determined unsuitable, will be documented in a PREA Housing chrono entry. In the rare event that placement lasts more than 30 days, a review will be conducted every 30 days to determine the continued need for the placement. Offenders on this type of placement will have access to programming and job assignments to the extent possible. When unavailable, the reason and duration will be documented in the offender's electronic file.

# INVESTIGATIONS

## Standard 115.71: Criminal and administrative agency investigations

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

### 115.71 (a)

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

#### 115.71 (b)

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

#### 115.71 (c)

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

#### 115.71 (d)

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

#### 115.71 (e)

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

#### 115.71 (f)

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

#### 115.71 (g)

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

#### 115.71 (h)

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

#### 115.71 (i)

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

#### 115.71 (j)

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

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

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

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

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

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

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

Criminal investigations are completed by one of the following outside agencies. Monroe Police Department would be the initial agency contacted, should the city policy decline to conduct the criminal investigation, the Appointing Authority or designee would complete a referral to the Snohomish County Sheriff's Office. If the County declined to conduct the criminal investigation a referral would be completed to the Washington State Patrol.

Three facility investigators were selected for targeted investigator interview. Interviews were conducted by audit team member who has extensive experience in conducting criminal and internal affairs investigation within confinement setting. Each of the three investigators were randomly selected and had conducted administrative investigations during this audit time frame and conducted separately in an office which allowed privacy. During the interview the investigators were able to explain the investigation process which included but was not limited to; how the case is assigned by the Appointing Authority, the interview process of alleged victims, suspects, witness etc., how they gather supporting evidence and complete the report which is then submitted to the Appointing Authority for review of completeness. Once the investigation has been determined to be complete the Appointing Authority will determine a finding of substantiated, unsubstantiated or unfounded. Investigators stated that the investigation would continue even if the offender was no longer in custody or the staff member was no longer employed with WADOC.

The three investigators interviewed have completed PREA training requirements 115.31 and 115.34.

Investigation reports provided to this auditor during the audit documentation time were reviewed. Reported allegations were assigned promptly and the investigators had conducted a thorough investigation. There were no investigations in which a compelled interview was conducted.

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

## Standard 115.72: Evidentiary standard for administrative investigations

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

#### 115.72 (a)

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

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

Memos from Superintendent

RCW 72.09.225 regarding actions to be taken with employees or contractors who have engaged in sexual contact with offenders

Appointing Authority curriculum

Facility case datasheet

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

The Appointing Authority determines if the investigation meets preponderance of evidence (51% or more) to substantiate a case closure finding. If the investigation resulted in less than preponderance of



evidence the case closure finding would be unsubstantiated. If determined that the allegation could not have occurred this would be closed as unfounded.

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

## Standard 115.73: Reporting to inmates

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

#### 115.73 (a)

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

#### 115.73 (b)

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

#### 115.73 (c)

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

#### 115.73 (d)

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

#### 115.73 (e)

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

#### 115.73 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

Memos from Superintendent

Facility case data sheet

Law enforcement referral log

Documentation of applicable offender notifications regarding staff sex

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

Investigation reports provided to this auditor during the audit documentation time were reviewed and included form DOC 02-378 which has an area to document Final Notifications to the victim and Offender suspect. Victims and offender suspects were notified not only for allegations of sexual abuse

as required by this standard, notifications were provided to victim and offender suspects of sexual harassment. MCC has substantially exceeded this standard for notifications to offenders.

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

<b>DISCIPLINE</b>
-------------------

**Standard 115.76: Disciplinary sanctions for staff**

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

**115.76 (a)**

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

**115.76 (b)**

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

**115.76 (c)**

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

**115.76 (d)**

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

**Auditor Overall Compliance Determination**

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

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

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

450.050 Prohibited Contact (11/21/15)

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

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

Additional supporting documentation

Memo from Superintendent

RCW 72.09.225 state law regarding Custodial Sexual Misconduct

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

Memorandum from agency Secretary regarding WADOC disciplinary processes and presumptive discipline

Collective Bargaining Agreement – Teamsters Local Union 117

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

During the audit time frame MCC completed two investigations which resulted in a substantiated finding of staff sexual abuse. Administrative investigations were completed with one of the staff members resigning prior to issuance of the investigation and the other staff member was discharged from DOC employment at completion of investigation. MCC did not refer either allegation to outside agency as they did not meet the level of a criminal violation

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

Policy 450.050 Policy 450.050 Restriction Process for Staff Sexual Misconduct/Harassment, outlines procedures for substantiated findings of staff on offender sexual abuse, to include but not limited to; Presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender. Should a staff member be discharged or resign from employment and an investigation results in a substantiated finding of sexual intercourse, WADOC will place a permanent restriction on visitation, which may be appealed after 3 years with an 18 month restriction on telephone and mail communication, including eMessaging.

All other substantiated allegations of staff sexual misconduct will result in a one year restriction on telephone and mail communication, including eMessaging, and a 2 year restriction on visitation.

## **Standard 115.77: Corrective action for contractors and volunteers**

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

**115.77 (a)**

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

**115.77 (b)**

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

**Auditor Overall Compliance Determination**

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

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

450.050 Prohibited Contact (11/21/15)

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

Additional supporting documentation

Memo from Superintendent

RCW 72.09.225 state law regarding Custodial Sexual Misconduct

Memo regarding termination of volunteers with applicable criminal backgrounds

During this audit time frame MCC did not have any substantiated investigations involving contractors or volunteers. Had an allegation been reported a referral to outside law enforcement would have been initiated to include notification to a licensing body.

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

Policy 450.050 Policy 450.050 Restriction Process for Staff Sexual Misconduct/Harassment, outlines procedures for substantiated findings of staff on offender sexual abuse, to include but not limited to; Presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender. Should a staff member be discharged or resign from employment and an investigation results in a substantiated finding of sexual intercourse, WADOC will place a permanent restriction on visitation, which may be appealed after 3 years with an 18 month restriction on telephone and mail communication, including eMessaging.

All other substantiated allegations of staff sexual misconduct will result in a one year restriction on telephone and mail communication, including eMessaging, and a 2 year restriction on visitation.

## **Standard 115.78: Disciplinary sanctions for inmates**

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

#### **115.78 (a)**

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

#### **115.78 (b)**

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

#### **115.78 (c)**

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

#### **115.78 (d)**

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

#### **115.78 (e)**

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

#### **115.78 (f)**

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

### 115.78 (g)

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

### Auditor Overall Compliance Determination

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

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

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

450.050 Prohibited Contact (11/21/15)

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

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

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

Additional supporting documentation

Memo from Superintendent

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

Facility case data sheet

Documentation of offender discipline for substantiated PREA investigations

Documentation of offender discipline for infractions

During the audit documentation time frame three offenders received infractions for PREA violations. Two (2) offenders received disciplinary infractions for substantiated allegations of offender on offender sexual harassment. One (1) offender received disciplinary infraction for offender on offender sexual abuse, not amounting to violation for criminal referral.

Investigation reports were reviewed which supported the finding of substantiated. MCC also place a keep separate for the offender on offender sexual abuse.

(f) Review of policy DOC 490.860 supports compliance with this element where offenders who report 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.

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

## MEDICAL AND MENTAL CARE

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

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

##### 115.81 (a)

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

##### 115.81 (b)

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

##### 115.81 (c)

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

##### 115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work,



education, and program assignments, or as otherwise required by Federal, State, or local law?  
 Yes  No

### 115.81 (e)

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

### Auditor Overall Compliance Determination

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

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

490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments (6/18/18)  
490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting (5/22/18)  
630.500 Mental Health Services (4/28/17)  
610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct

#### Additional supporting documentation

Memo from Superintendent  
Listing of offenders who required referral to mental health  
Examples of 13-509 PREA Mental Health Notification forms for offenders who declined or requested follow up meeting  
Health information management protocols  
Random sample of incoming transport / job screening checklists

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

Prior to the on-site audit this auditor reviewed MCC prior audit report dated October 28, 2016. This audit report noted that this standard had a corrective action plan and the deficiency was corrected to meet compliance. This auditor reviewed documentation and determined that MCC has continued to meet compliance since the last PREA audit. Staff should be commended on their hard work, commitment to PREA and sexual safety of offenders housed at MCC.

Specialized interviews with staff supported compliance and that offenders are offered mental health services. Staff members utilize the 13-509 form to document whether or not the offender accepts or

declines a follow up meeting with a mental health practitioner. If the offender wishes to be seen by mental the notification form is sent to Health Services with schedule the follow-up within 14 days of the assessment.

(c) is not applicable

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

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

#### 115.82 (a)

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

#### 115.82 (b)

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

#### 115.82 (c)

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

#### 115.82 (d)

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

### Auditor Overall Compliance Determination

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

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

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

600.000 Health Services Management (8/25/14)

600.025 Health Care Co-Payment Program (7/24/15)

610.300 Health Services for Work Release Offenders (6/22/15)

Additional supporting documentation

Memo from Superintendent

Aggravated Sexual Assault Checklist and health services documentation

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

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

Specialized interviews with medical and mental health staff complete on-site who all stated that evaluations and treatments plans are completed to include referrals for continued care. All staff stated that offenders receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

Victims of sexual abuse that required transport to community hospital for SAFE are provided with information regarding emergency contraception and sexually transmitted infection prophylaxis. Victim will be seen for follow up by MCC health services staff. Victims are not charged for hospital costs or on-going treatment related to the sexual abuse.

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

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

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

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

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

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

**115.83 (a)**

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

**115.83 (b)**

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

**115.83 (c)**

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

**115.83 (d)**

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

**115.83 (e)**

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

**115.83 (f)**

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

**115.83 (g)**

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

**115.83 (h)**

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

## Auditor Overall Compliance Determination

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

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

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

### Additional supporting documentation

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

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

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

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

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

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

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

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

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

#### 115.86 (a)

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

#### 115.86 (b)

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

#### 115.86 (c)

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

#### 115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?  Yes  No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?  Yes  No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  Yes  No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for

improvement and submit such report to the facility head and PREA compliance manager?

Yes  No

### 115.86 (e)

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

### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

Memo from Superintendent

MCC Local Review Committee

Sample Local PREA Investigation Review Checklist

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

Auditor reviewed sexual abuse investigation reports which were closed substantiated and unsubstantiated during this audit time frame, which included the local PREA Review Committee form.

MCC PREA Compliance Specialist is responsible for scheduling the local PREA Review Committee within 30 days of an investigation being completed. The committee generally will include an Associate Superintendent, Health Care Manager, Correctional Captain, Correctional Program Manager, Case Investigator, PREA Compliance Manager and Chief investigator. The PREA Compliance Specialist stated that they do consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian/ gay, bisexual, transgender, or intersex identification status, or perceived status; or gang affiliation. The committee members also examine that area and look at the staffing level and if they do not have monitoring technology in the area. The form completed by the Local Review Committee is signed by the Appointing Authority or designee.

Policy 490.860 reads in part: Multidisciplinary PREA Review - For each substantiated or unsubstantiated finding of offender-on-offender sexual assault/abuse and staff sexual misconduct, the Appointing

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

## Standard 115.87: Data collection

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

#### 115.87 (a)

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

#### 115.87 (b)

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

#### 115.87 (c)

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

#### 115.87 (d)

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

#### 115.87 (e)

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

#### 115.87 (f)

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

### Auditor Overall Compliance Determination



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

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

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

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

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

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

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

## Standard 115.88: Data review for corrective action

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

### 115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?  Yes  No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?  
 Yes  No

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

#### 115.88 (b)

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

#### 115.88 (c)

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

#### 115.88 (d)

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

#### Auditor Overall Compliance Determination

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

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

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

Additional supporting documentation

Memo from Superintendent

Screen shot of agency's external website – PREA page

Agency PREA coordinator stated that each facility/operational area included in the report is required to develop their own goals and strategies each year regarding PREA based on data and incidents and update the ones from the previous year.

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

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

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

#### 115.89 (a)

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

#### 115.89 (b)

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

#### 115.89 (c)

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

#### 115.89 (d)

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

### Auditor Overall Compliance Determination

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

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

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

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

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

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

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

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

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

#### 115.401 (a)

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

#### 115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*)  Yes  No

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

#### 115.401 (h)

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

#### 115.401 (i)

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

#### 115.401 (m)

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

#### 115.401 (n)

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

#### Auditor Overall Compliance Determination

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

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

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

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

Auditor received correspondence which was sent as if they were communicating with legal counsel.

## Standard 115.403: Audit contents and findings

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

#### 115.403 (f)

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

#### Auditor Overall Compliance Determination

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

Auditor reviewed agency public website

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

## AUDITOR CERTIFICATION

I certify that:

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

*Deborah Striplin*

December 20, 2018

**Auditor Signature**

**Date**