PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS





[Following II	ntormation to be po	opula	ated automatica	ally from pre-audit questionnaire	
Name of facility:	Mission Creek Corre	ctions	s Center for Wom	en	
Physical address:	3420 Sand Hill Rd., Belfair, WA 98528				
Date report submitted:	August 26, 2014				
Auditor Information	Robert Real				
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Telephone number:	541-881-4606				
Date of facility visit:	July 17, 2014				
Facility Information					
Facility mailing address: (if different from above)					
Telephone number:					
The facility is:	☐ Military		☐ County	Federal	
	☐ Private for profit		☐ Municipal	State	
	☐ Private not for pr	ofit			
Facility Type:	☐ Jail x	Priso	n		
Name of PREA Complian	ce Manager: Denni	s Tab	b Title:	Correctional Program Manager	
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Agency Information					
Name of agency:	Washington State D	epart	ment of Correction	ons	
Governing authority or parent agency: (if applicable)					
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PREA AUDIT: AUDITOR'S SUMMARY REPORT

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AUDIT FINDINGS

NARRATIVE:

The PREA Audit of the Mission Creek Corrections Center for Women was conducted on July 17, 2014 and July 18, 2014. Notice of the audit was posted in the facility six weeks prior to the audit providing auditor contact information. One week prior to the audit, the auditor received the Pre-Audit Questionaire with attached documentation provided on a flash drive. The questionnaire was received by the auditor just prior to the audit, so interviews were not conducted prior to the onsite visit being accomplished. Prior to the audit the auditor reviewed the documentation and reviewed the agency website to evaluate compliance with PREA standards.

Following the entrance meeting with the facility management team the auditor conducted a tour of the facility which included but was not limited to Intake, all housing units to include segregated housing areas, medical, food services, industry areas, and programming and education areas. PREA signs and informational posters for services related to PREA were prominently posted throughout the facility.

As part of the facility audit, the auditor interviewed key agency and facility staff to include Deputy Secretary Pacholke; Superintendent Vernell; Beth Schubach, PREA Coordinator; Dennis Tabb, PREA Compliance Manager; Gary Banning, Contract Administrator; Ms. Dutt, Human Resources; and George Gasson, Facility Investigator.

All required staff and inmate interviews were conducted which included 10 staff and 10 inmates that were selected randomly from rosters provided by the facility. Addionally, specialized interviews were conducted for inmates identified as disabled, limited English proficient, LGBTI, or who had reported sexual abuse. Other specialized staff interviews conducted included 3 First Responders, 1 Medical, 1 Mental Health, and 1 staff assigned to supervise inmates in segregated housing as well as 1 volunteer and 1 contractor. Total interviews conducted were 25 staff, 16 inmates, and 2 volunteer/contractors.

During the audit, the auditor found that staff and inmates were very aware of PREA. Staff knew of their responsibilities and inmates knew how to report incidents of sexual abuse and sexual harassment and indicated that they could and would report.

The auditor reviewed staff, contractor, and volunteer training records to ensure all required PREA training had been completed.

DESCRIPTION OF FACILITY CHARACTERISTICS:

History:

Mission Crreek was opended in 1960 as a youth camp on land leased from the Department of Natural Resources. Prior to construction of the camp, the site was forest land. The facility sits deep in the Tahuya Penisula woods. The Mission Creek Youth Forest Camp originally housed 45 male juveniles.

When the Juvenile Rehabilitation Administration no longer had a need for the facility, the Department of Corrections took over the lease. MCCCW opened on April 13, 2005, with 80 inmates.

PREA AUDIT: AUDITOR'S SUMMARY REPORT

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Mission:

The Mission Creek Corrections Center for Women is a minimum security re-entry institution located in a remote area south of Bremerton, Washington, four miles outside of Belfair city limits. MCCCW maintains an average daily population of 300 female offenders. A significant number of the residents at MCCCW work on Community Services Crews.

Offenders also participate in therapeutic and academic programming. This correctrional facility is dedicated to the trasition of adult female offenders from higher custody settings to either a Work Release Program or direct release to the community.

Correctional Programs:

Each offender is assigned to work with a Correctional Counselor who meets with her to prepare the offender for return to the community. The following programs are provided to help prepare each female offender for re-entry to the community.

Offender Work Programming:

Work assignments are intended to develop marketable job skills, to promote a positive work ethic and contribute to the operation of the facility. Food Services, Maintenance, and Grounds Keeping are examples of the employment opportunities for the women, who are paid a minimal income for their labor.

Offender crews are assigned to the Community Service Crews (CSC) Work Program through a competitive process. CSC provides appropriate training to the selected offenders and ensures that a safe work environment is maintained. Forest restoration, park cleanup, fishery projects, and Department of Transpertation are examples of projects they participate in annually.

Substance Abuse Treatment:

MCCCW provides inpatient and outpatient services as well as Relapse Prevention Therapy.

Education:

Tacoma Community College, in partnership with MCCCW, offers classes which include Adult Basic Education/GED and vocational certificates in Information Technology and Business Technology.

Offender Change Groups:

Offenders are assigned to Offender Change Groups based on needs identifies during their assessment or they are also able to volunteer for self-help classes.

Recreation:

MCCCW provides contstructive leisure time activities that promote wellness and pro-social lifestyles. Craft classes offer opportunities to learn skills with yarn, fabric, beads, and other materials.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 2 Number of standards met: 40 Number of standards not met: 0

Non-applicable: 1

§115.11 - Zero tolerance of sexual abuse and coordinator

☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. Overall, very impressed with Agency and Facility efforts towards gaining compliance with PREA standards. It was apparent that this was important to them. DOC Policy 490.800, Prison Rape Elimination Act (PREA) outlines the agency's approach towards eliminating sexual abuse and sexual harassment with a zero tolerance policy. The Agency has identified a Statewide PREA Compliance Coordinator and MCCCW has identified a PREA Liaison that services as the facility's PREA Compliance Manager.
§115.12 - Contracting with other entities for the confinement of inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)
The Washington State Department of Corrections has currently hired a staff person to conduct audits of county jails that it currently contracts with, for the confinement of inmates, to ensure that facilities are working to be compliant with PREA Standards. All confinement contracts are updated annually and language has been included through use of a shell agreement that requires that each facility agree to be PREA compliant and be actively working to maintain compliance.
§115.13 – Supervision and Monitoring
☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)

MCCCW has demonstrated compliance with all elements of this standard. MCCCW in coordination with WADOC Central Office, has demonstrated supervision and monitoring compliance by implementation of a staffing plan and an excellent camera system. These two measures enhance inmate monitoring and aide in safeguarding inmates from sexual abuse. Vulnerability assessments are conducted on a regular basis with findings being incorporated in a quarterly report that is forwarded to the Deputy Secretary. Any deviations to the staffing plan would be documented; although none were noted.

It was observed that rounds are being regularly conducted and documented by intermediate and higher level staff. A fact that was supported during interviews with staff.

§115.14 – Youthful Inmates ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) MCCCW is exempt from this standard. Washington State Department of Corrections has entered into an interagency agreement with Juvenile Rehabilitation Services to house all offenders under the age of 18 convicted of a felony. No youthful offenders are housed at the Mission Creek Corrections Center for Women. §115.15 – Limits to Cross-Gender Viewing and Searches ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) MCCCW demonstrated compliance with all elements of this standard. A review of their policies and procedures as well as interviews with staff and inmates shows that inmates are able to shower, preform bodily functions and change clothes without non-medical staff of the opposite gender being able to view their genitalia, breasts or buttocks, including during routine cell checks. Inmates are prohibited from changing in their assigned cell and are required to use an assigned changing area. MCCCW has a policy that requires staff of the opposite gender to announce their presence when entering a housing unit and the auditor observed male staff announce their presence when they enter the living area. Staff and inmate interviews confirmed that this was occurring as required. §115.16 - Inmates with Disabilities and Inmates who are Limited English **Proficient** ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)

MCCCW has met or exceeded compliance with all elements of this standard. MCCCW has taken significant steps to ensure that inmates with disabilities, or are otherwise limited English proficient, have equal access, opportunity and ability to benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Efforts toward compliance include PREA signs throughout the facility in both English and Spanish, pamphlets for Spanish speaking and/or low functioning inmates. Interpreter services are available for both deaf and limited English proficient inmates.

§115.17 – Hiring and Promotion Decisions

☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
MCCCW has demonstrated compliance with all elements of this standard. Through a review of documentation provided and interviews with staff, it was determined that MCCCW has established a system of conducting criminal background checks for new employees and contractors who may have contact with inmates to ensure they do not hire or promote anyone who has engaged in sexual abuse in prison or other confinement settings; been convicted of engaging or attempting to engage in sexual activity in the community or refuse; or had civilly or administratively been adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent.
Effective February 14, 2014, WADOC implemented a policy that required follow-up background checks for all employees, contractors, and volunteers. MCCCW provided documentation demonstrating these record checks are being completed as required. DOC Policy 810.800, Recruitment, Selection and Promotion outlines that a criminal background check will be completed for all promotional candidates and external candidates in the hiring process. DOC Policy 810.800 also states that for promotional candidates and former department employees, Human Resources will review the Offender Management Network and the PREA database for information on substantiated allegation of sexual misconduct or any resignation pending investigation of alleged sexual misconduct and provide the review results to the Appointing Authority.
This standard requires that material omissions or providing of false information be grounds for termination. While Washington Department of Corrections Policy 810.800, Recruitment, Selection and promotion states that any applicant who is found to have provided false information or failed to disclose criminal convictions and/or incarcerations may be declined further consideration for hiring or promotion, there is no indication that termination is required.
§115.18 – Upgrades to Facilities and Technology
☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

MCCCW demonstrated compliance with all elements of this standard. Through interviews with Deputy Secretary Pacholke and Superintendent Vernell, it was determined that MCCCW would consider the effects of the facility's design, expansion or modification and the potential impact this would have on the facility's ability to protect inmates from sexual abuse. While touring the facility the auditor noted that MCCCW had previously installed a very nice camera system that greatly enhanced the supervision of inmates and contributed to keeping inmates safe from sexual abuse.

☐ Does Not Meet Standard (requires corrective action)

§115.21 – Evidence Protocol and Forensic Medical Examinations
☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)
MCCCW has demonstrated compliance with all elements of this section. The Mason County Sherriff's Department is assigned as the primary investigative agency for the facility with the Washington State Police designated to investigate any cases not picked up by the county. The facility has specialized staff trained in conducting administrative investigations of sexual abuse and sexual harassment in a confinement setting. Staff is trained in evidence collection and preservation to maximize the potential of collecting usable evidence. The agency has contracted with two area hospitals for SAFE and SANE examinations.
The Kitsap County Sexual Assault Center provides victims of sexual abuse emotional support and counseling services. Their contact information is posted throughout the facility and inmates could can them anonymously for support services. During this audit period there were no noted requests for services made by inmates at MCCCW.
§115.22 – Policies to Ensure Referrals of Allegations for Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. WADOC Policy 490.860 Prison Rape Elimination Act (PREA) Investigation, outlines the agency requirement to investigate all allegations of sexual abuse and sexual harassment; that all allegations that appear to be criminal will be referred for law enforcement investigation. All allegations are referred for investigation to the appropriate authority. Investigative agencies that could potentially investigate criminal allegations have the authority to do so. As part of the referral process, it requires that information be shared at least every 30 days and upon completion of the investigation.
§115.31 – Employee Training
§115.31 – Employee Training □ Exceeds Standard (substantially exceeds requirement of standard)

for the relevant review period

☐ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. The agency requires all staff, contractors, and volunteers to complete an online PREA 101 curriculum that outlines the agency's zero tolerance policy towards sexual abuse and sexual harassment, including; how to prevent, detect, and report incidents of sexual abuse and harassment; inmate rights to be free from sexual abuse and sexual harassment; rights of staff and inmates to be free from retaliation for reporting incidents of sexual abuse and harassment; dynamics of sexual abuse and sexual harassment in a confinement setting; common reaction of sexual abuse and sexual harassment victims; how to avoid inappropriate relationships with offenders, and how to communicate effectively with LGBTI inmates.

The training is designed to address issues related to both genders and is provided to all staff, contractors and volunteers prior to them being allowed contact with inmates. All training is documented with training be provided annually.

§115.32 – Volunteer and Contractor Training

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. All contractors and volunteers who have contact with inmates have been trained regarding their responsibilities under the agency's sexual abuse, sexual harassment prevention, detection, and response policies and procedures. Interviews with contractors and volunteers demonstrated their knowledge of their responsibilities and the agencies zero tolerance policy regarding sexual abuse and harassment.

§115.33 – Inmate Education

- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

MCCCW has demonstrated compliance with all elements of this standard and have exceeded in most. Every inmate receives PREA Training upon arrival at the facility as part of orientation. They were brought together in a town hall style meeting to again provide the PREA training and provided an opportunity to ask questions. Every effort is made to ensure that all inmates, regardless of limitation or disability, has the same access to PREA education resources. PREA information has been provided on an ongoing basis and has been documented to demonstrate compliance.

Posters and inmate materials are provided or posted in the housing units in formats accessible to all inmates. During interviews with inmates, they acknowledged the information being provided upon arrival. They knew the agency's zero tolerance policy, the difference between sexual abuse and sexual harassment, and how to contact an outside victim services agency as well as their rights to be free from retaliation for reporting such incidents.

§115.34 – Specialized Training: Investigations ☐ Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) MCCCW demonstrated compliance with all elements of this standard. All investigators completed the on line PREA 101 training as well as the specialized PREA Investigations training. The auditor checked training records to verify completion of the training. The training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. §115.35 – Specialized training: Medical and mental health care ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) MCCCW demonstrated compliance with all elements of this standard. Training records reflected that all medical and mental health staff, including part time contractors, has completed the required PREA 101 training as well as the Specialized PREA training for Health Services. Interviews of medical and mental health staff demonstrated their understanding of how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse or harassment, and how to report allegation or suspicions of sexual abuse or harassment. Medical staff at the facility do not conduct forensic medical examinations. SAFE and SANE exams are conducted at area hospitals when required.

§115.41 – Screening for Risk of Victimization and Abusiveness

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
CCCW demonstrated compliance with all elements of this standard. The only noted concern

MCCCW demonstrated compliance with all elements of this standard. The only noted concern was that "Whether the inmate is detained solely for civil immigration purposes" was not being considered as part of the assessment. While it was noted that Washington does not house inmates for this purpose and no evidence was found to contradict this, the auditor feels that this would be an easy fix to add this to the items already being considered.

All inmates are assessed during their initial intake screening and upon transfer to another facility for their risks of being sexually abused by other inmates or sexually abusive towards other inmates. This screening is generally conducted upon receipt to the facility but always within the first 72 hours. The risk screening is completed by medical personnel before being forwarded to the probation officer where it is reviewed as part of the classification review.

The screening instrument is objective in determining if the inmates are at risk for victimization or abusiveness. Anytime within the first 30 days, additional information is received indicating additional concerns related to the risk of victimization or abusiveness, a reassessment is completed.

§115.42 – Use of Screening Information

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. MCCCW demonstrated that it is effectively utilizing the information obtained from the vulnerability risk assessment to make housing, work, education, and programming assignments. Based upon the information received, individualized assessments are made related to inmates at high risk for victimization or abusiveness.

A would be completed for all transgender and intersex inmates to determine the most suitable housing assignment and it includes the offender's own views related to their safety. The facility does not have dedicated housing for LBGTI inmates but does provide separate showering for all inmates.

§115.43 – Protective Custody

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. DOC Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments outlines the process for reviewing inmates for risk of sexual victimization and sexual predation. A review of facility records indicated only one offender had been placed in segregation on a voluntary basis while allegations of sexual grooming were investigated. The investigation was completed in a timely manner and the inmate returned to general population. While there were no other instances to review, MCCCW follows DOC Policy and Operational Memorandum 320.200 Administrative Segregation, which outlines the criteria for segregating offenders administratively to include regular reviews.

At the time of the audit, staff interviews indicated that inmates at high risk for sexual victimization are not placed in involuntary segregation until all other measures have been assessed and no other alternative exists.

§115.51 – Inmate Reporting ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) MCCCW demonstrated compliance with all elements of this standard. The Washington State Department of Corrections and MCCCW have made every effort to ensure multiple ways for offenders to report concerns related to sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities. Overall, offenders were aware of many ways to report and/or stated that they felt safe reporting to staff at the facility. Staff knew and understood that regardless of how a report of sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities is received, it must be reported and investigated. MCCCW has established a procedure for staff to follow that requires an affirmative responsibility to report PREA concerns privately. Of the 11 reported incidents noted, 10 were received directly by verbal notification from the inmate. One was received through a hotline complaint. §115.52 – Exhaustion of Administrative Remedies ☐ Exceeds Standard (substantially exceeds requirement of standard) ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) MCCCW is exempt from this standard. WADOC Policy 550.100, Offender Grievance Program states that grievances alleging sexual abuse or sexual harassment will not be addressed through the grievance process but will be forwarded to the PREA Compliance Coordinator in accordance with WADOC Policy 490.800 Prison Rape Elimination Act (PREA). §115.53 – Inmate Access to Outside Confidential Support Services

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. WADOC and MCCCW have done a commendable job ensuring that these services are available for the offender population. Work should be done to enhance offender awareness of these services with clearer information regarding the confidentiality of these services.

The Kitsap Sexual Assault Center located in Port Orchard, Washington has been designated for confidential reporting and outside confidential support services. Phone numbers and mailing addresses are provided in a DOC brouchure regarding available Community Sexual Assault Programs in Washington State. These are available to all inmates. Additionally, this information is posted throughout the facility and in all housing units. Telephone calls to these

services are authorized to be made from telephones designated for legal calls and are not recorded.

§115.54 – Third-Party Reporting

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

MCCCW had demonstrated compliance in all elements of this standard. There are multiple methods that can be utilized for third party reporting. Agency policy directs that regardless of how a report is received, it will be investigated. WADOC's website has a PREA section that is easily accessible by the general public. It provides information about PREA that includes how to report sexual misconduct on behalf of an offender. The agency has provided posters and brochures that are posted throughout the facility with telephone numbers and addresses that inmates, family or friends can use to report sexual misconduct.

§115.61 – Staff and Agency Reporting Duties

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. They have a process outlined in policy that requires staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse, sexual harassment that occurred in a correctional facility, regardless if it is part of the agency. Medical and Mental Health staff have received PREA Training which includes information related to their reporting responsibilities. The facility has a policy that outlines all allegations, including third party or anonymous reports to be reviewed and assigned for appropriate investigation.

§115.62 - Agency Protection Duties

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

MCCCW has demonstrated compliance with all elements of this standard. The facility complies with DOC Policy and Operational Memorandum 490.850, Prison Rape Elimination Act (PREA) Response, that outlines staff responsibilities related to keeping an offender safe when it is learned that they may be at substantial risk of imminent sexual abuse. Interviews with staff demonstrate they know what actions to take to protect an inmate who is at imminent risk of being sexually abused.

9115.63 – Reporting to Other Confinement Facilities	
☐ Exceeds Standard (substantially exceeds requirement of standard)	-
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
MCCCW demonstrated compliance with all elements of this standard. Their Agency PREA Policy and Facility Operational Memorandum for PREA both outline the requirement for reporting allegations of sexual abuse that occurred while the inmate was confined at another facility. The Facility Head or designee that received the allegation shall notify the Facility Head or designee where the alleged abuse occurred within 72 hours after receiving the allegation. Interviews with Superintendent Vernell and Mr. Tabb, PREA Compliance Manager, demonstrated they were aware of the procedures to follow.	
§115.64 – Staff First Responder Duties	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
□ Does Not Meet Standard (requires corrective action)	
MCCCW demonstrated compliance with all elements of this standard. All staff from the superintendent to random staff and first responders knew of their responsibility to report. DOC Policy and MCCCW Operational Memorandum 490.850 Prison Rape Elimination Act (PREA) Response, directs employees and contract staff to separate the accused from the alleged victim and witnesses. The Shift Commander then initiates a Response and Containment Checklist or the Aggravated Sexual Assault Checklist based upon the information received.	
There were no reported incidents that occurred within the timeframe that would allow for the collection of physical evidence. Staff were aware of what actions could destroy evidence and knew what steps would be taken to help ensure that evidence was preserved.	
§115.65 – Coordinated Response	
☐ Exceeds Standard (substantially exceeds requirement of standard)	
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
☐ Does Not Meet Standard (requires corrective action)	

MCCW demonstrated compliance with all elements of this standard. They have an individualized response plan that is outlined in MCCCW Operational Memorandum 480.850, Prison Rape Elimination Act (PREA) Response. The plan includes definitions; responsibilities and duties of the PREA Response Team; the use of a PREA Response Kit for maintaining a crime scene and collection of evidence; and instructions for completing and submitting a proper PREA Response Packet (Investigation). Interviews with staff demonstrated that they were

aware of their first responder duties and that the facility had trained selected staff as PREA responders.

§115.66 – Preservation of ability to protect inmates from contact with

abusers
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance to all elements of this standard. MCCCW provided a copy of the Collective Bargaining Agreement between the State of Washington and Teamsters Local Union 117. The agreement showed no limitations that would prevent accused staff sexual abusers from contact with inmates pending the outcome of an investigation or determination of whether and to what extent discipline is warranted.
§115.67 – Agency protection against retaliation
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
MCCCW has demonstrated compliance with all elements of this standard. The Associate Superintendent and Correctional Program Manager are responsible for offender retaliation monitoring and the Human Resources Manager is responsible for Staff retaliation monitoring. This sets the tone in the facility that retaliation is not accepted. These checks are documented monthly and forwarded to the superintendent for her review.
§115.68 – Post-Allegation Protective Custody
☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. After interviewing the Superintendent, PREA Compliance Manager, staff assigned to supervise segregated housing,

and inmates there was no instances of using segregation to protect an inmate who had alleged to have been sexually abused.

§115.71 – Criminal and Administrative Agency Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. MCCCW has demonstrated that all allegations of sexual abuse and sexual harassment are all investigated, including anonymous and third party reports. Criminal investigations are referred to local law enforcement and administrative investigations are conducted by the agency staff who has received specialized training in conducting PREA related investigations in a confinement setting.
The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as a staff or inmate. WADOC does not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth telling devices as a condition for proceeding with the investigation of such an allegation.
MCCCW had no examples of a criminal investigation, but did provide a copy of an administrative PREA investigation and have shown that these reports are maintained by the agency for 50 years after the investigation is completed.
§115.72 – Evidentiary Standard for Administrative Investigations
☐ Exceeds Standard (substantially exceeds requirement of standard)
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□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. MCCCW conducts al investigations of sexual abuse or sexual harassment in accordance with DOC Policy and MCCCW Operational Memorandum 490.860, Investigations. The findings in an investigation of sexual abuse and sexual harassment are based on a preponderance of evidence.
§115.73 – Reporting to Inmate

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. DOC Policy and Operational Memorandum 490.860, Prison Rape Elimination Act (PREA) Investigation, directs the Appointing Authority who is familiar with the case to notify the victim in person whether the allegation was substantiated, unsubstantiated, or unfounded. The Appointing Authority will also inform the victim anytime the staff member is no longer posted within the inmate's unit, no longer employed at the facility, if the staff member has been indicted of a charge related to sexual abuse within the facility or the staff member has been convicted on a charge related to sexual abuse with the facility.

§115.76 – Disciplinary sanctions for staff
☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. MCCCW staff is subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who has engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be 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.
MCCCW has had no cases of sexual misconduct involving staff during this audit period.
§115.77 – Corrective action for contractors and volunteers
☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. MCCCW demonstrated compliance with DOC Policy and MCCCW Operational Memorandum 490.860, Prison Rape Elimination Act (PREA) which requires all reports of sexual abuse and sexual harassment be investigated. DOC policy prohibits contractors and volunteers who engaged in sexual abuse from any contact with inmates and requires referral to local law enforcement for investigation unless the conduct is clearly not criminal. DOC Policy also requires notification of licensing bodies if applicable.
MCCCW had one case of sexual harassment involving a contractor and an inmate. The contracting agency was contacted and a subsequent investigation resulted in the contractor's employment being terminated. The contractor's licensing body was notified.
§115.78 – Disciplinary sanctions for inmates
☐ Exceeds Standard (substantially exceeds requirement of standard)
extstyle ext
□ Does Not Meet Standard (requires corrective action)

MCCCW has demonstrated compliance with all elements of this standard. Offenders at MCCCW are subject to disciplinary sanctions as part of an administrative hearings process. The hearings process and sanctions imposed are clearly described in MCCCW Operational Memorandum 460.000 Disciplinary Process for Prisons and DOC Policy 320.150 Disciplinary Sanctions. The

disciplinary process allows the hearings officer to consider mental disabilities/mental illness and utilizes a sanctioning grid to ensure sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed are comparable for same offenses committed by other inmates with similar histories.

WADOC and MCCCW prohibits all sexual activity among offenders, does not deem such activity to be sexual abuse if the activity is consensual.

§115.81 – Medical and mental health screenings; history of sexual abuse

□ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

MCCCW demonstrated compliance with all elements of this standard. All offenders are screened during the intake process and asked a series of questions. These questions include if they had ever been assaulted in your life, including sexually while in jail or prison; Has anyone ever accused you of being sexually aggressive; or is it difficult to stand up for yourself. Any offender providing information indicating past victimization or sexual abusiveness is immediately referred for a follow-up meeting with a mental health practitioner. Medical and Mental Health staff knew of their duty to report any incident of sexual abuse that had occurred in an institutional setting and the need to obtain an informed consent in cases that did not occur in a correctional setting, unless the offender was under the age of 18.

§115.82 – Access to Emergency Medical and Mental Health Services

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

MCCCW has demonstrated compliance with all elements of this standard. Inmates who report sexual abuse are provided immediate access to medical and mental health care at no cost to the inmate. When a report of sexual abuse is reported, MCCCW Staff take immediate steps to protect the inmate and to report the information to medical. Medical staff has received specialized training in how to preserve evidence and ensure that the victim is provided timely information about emergency contraception and sexually transmitted disease prophylaxis when medically appropriate. Care is provided for victims of sexual abuse at no cost to the inmate regardless of whether or not they cooperate in identifying the abuser or cooperate with the investigation.

§115.83 – Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers

☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
MCCCW has demonstrated compliance with all elements of this standard. WCCW provides services to offender victims regardless of their cooperation with investigators or refusal to identify an aggressor. MCCCW provides medical and mental health care to all inmates who have reported to be victims of sexual abuse in an institutional setting at no cost to the inmate. As part of the medical and mental health care, they receive follow-up care and counseling as well as outside services with rape crisis centers and other contracted advocacy groups. As part of the medical care, when medically indicated, victims receive pregnancy tests, tests for sexually transmitted diseases, hepatitis and offered any appropriate care as indicated to include information regarding the interruption of a pregnancy.
§115.86 – Sexual Abuse Incident Reviews
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
MCCCW demonstrated compliance with all elements of this standard. At the conclusion of every investigation into a sexual abuse allegation, MCCCW's PREA Review Committee meets to discuss the outcome and findings and consider what causal factors may or may not have been a factor into the incident and if needed, how to respond to identified concerns. An Incident Review had been completed for substantiated and unsubstantiated PREA cases within the required 30 days.
§115.87 – Data Collection
☐ Exceeds Standard (substantially exceeds requirement of standard)
oxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
MCCCW has demonstrated compliance with all elements of this standard as evidenced by the facility incident reviews that occur up completion of each substantiated and unsubstantiated PREA allegation. This data is compiled from all agency facilities and aggregated into a report that is submitted to the agency secretary for review and to U.S. Department of Justice upon request.

\$115.88 – Data Review for Corrective Action □ Exceeds Standard (substantially exceeds requirement of standard) □ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action) MCCCW has demonstrated compliance with all elements of this standard. The Facility Incident Reviews occur upon completion of each substantiated and unsubstantiated PREA allegation confirms this. This data is compiled from all agency facilities and aggregated into a report that is submitted to the agency secretary for review and to U.S. Department of Justice upon request.

The Agency reviews collected data to assess and improve the effectiveness of its efforts to prevent, detect, and respond to PREA related concerns. The data is used to help identify problem areas and to determine what corrective action is needed. An annual report was published on March 1, 2014, that has been reviewed and approved by Secretary Warner.

§§115.89 – Data Storage, Publication, and Destruction

☐ Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

MCCCW and the Washington State Department of Corrections have demonstrated compliance with all elements of this standard. The Agency PREA Coordinator collects data and reports from all facilities and compiles a report annually of investigations of all allegations of sexual abuse and sexual harassment.

The Agency Coordinator compiles the report which consists of prevention and response, findings of corrective action and the assessment of the Department's progress in addressing sexual abuse and sexual harassment allegations. This report is compared against previous years. The Agency PREA Coordinator will then submit the report to the WADOC Secretary for their review. Once the review is complete a copy is then placed on the department's website. All data and reports are submitted to the U.S. Department of Justice upon request.

The PREA Coordinator maintains electronic records of sexual abuse and sexual harassment cases pursuant to the state's Records Retention Schedule. All investigation records are retained for five years after the close of the investigation. Excluded are records covered by the Prison Rape Elimination Act which are retained for 50 years after the close of the investigation. This includes incident and investigative reports, evidence cards, photographs, interviews, and other related items.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and
no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under
review.

Robert Real	September 9, 2014
Auditor Signature	Date