**Prison Rape Elimination Act (PREA) Audit Report**

**Adult Prisons & Jails**

☐ Interim  ☒ Final

**Date of Report**  July 9, 2018

<table>
<thead>
<tr>
<th>Auditor Information</th>
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<tbody>
<tr>
<td><strong>Name:</strong> Deborah Striplin</td>
</tr>
<tr>
<td><strong>Company Name:</strong> Nevada Department of Corrections</td>
</tr>
<tr>
<td><strong>Mailing Address:</strong> P.O. Box 7011</td>
</tr>
<tr>
<td><strong>Telephone:</strong> 775-887-3142</td>
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<table>
<thead>
<tr>
<th>Agency Information</th>
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<tbody>
<tr>
<td><strong>Name of Agency:</strong> Washington State Department of Corrections</td>
</tr>
<tr>
<td><strong>Governing Authority or Parent Agency (If Applicable):</strong> Click or tap here to enter text.</td>
</tr>
<tr>
<td><strong>Physical Address:</strong> 7345 Linderson Way SW, Tumwater, WA 98504</td>
</tr>
<tr>
<td><strong>Mailing Address:</strong> PO Box 41131 Olympia, WA 98504</td>
</tr>
<tr>
<td><strong>Telephone:</strong> 360-725-8800</td>
</tr>
<tr>
<td><strong>The Agency Is:</strong></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td><strong>Agency mission:</strong> To improve public safety</td>
</tr>
<tr>
<td><strong>Agency Website with PREA Information:</strong> <a href="http://www.doc.wa.gov/corrections/prea/default.htm">http://www.doc.wa.gov/corrections/prea/default.htm</a></td>
</tr>
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<table>
<thead>
<tr>
<th>Agency Chief Executive Officer</th>
</tr>
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<tbody>
<tr>
<td><strong>Name:</strong> Stephen Sinclair</td>
</tr>
<tr>
<td><strong>Email:</strong> <a href="mailto:sdsinclair@doc1.wa.gov">sdsinclair@doc1.wa.gov</a></td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>Agency-Wide PREA Coordinator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name:</strong> Beth Schubach</td>
</tr>
<tr>
<td><strong>Email:</strong> <a href="mailto:blschubach1@doc1.wa.gov">blschubach1@doc1.wa.gov</a></td>
</tr>
<tr>
<td>PREA Coordinator Reports to:</td>
</tr>
<tr>
<td>------------------------------</td>
</tr>
<tr>
<td>John Aldana, Deputy Secretary Division of Prisons</td>
</tr>
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### Facility Information

<table>
<thead>
<tr>
<th>Name of Facility:</th>
<th>Washington Corrections Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address:</td>
<td>2321 West Dayton Airport Road, Washington 98584</td>
</tr>
<tr>
<td>Mailing Address (if different than above):</td>
<td>P.O. Box 900, Shelton, Washington 98584-0974</td>
</tr>
<tr>
<td>Telephone Number:</td>
<td>360-427-4696</td>
</tr>
<tr>
<td>The Facility Is:</td>
<td></td>
</tr>
<tr>
<td>- Military</td>
<td>☐</td>
</tr>
<tr>
<td>- Private for profit</td>
<td>☐</td>
</tr>
<tr>
<td>- Private not for profit</td>
<td>☐</td>
</tr>
<tr>
<td>- Municipal</td>
<td>☐</td>
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<tr>
<td>- County</td>
<td>☐</td>
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<tr>
<td>- State</td>
<td>☒</td>
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<tr>
<td>- Federal</td>
<td>☐</td>
</tr>
<tr>
<td>Facility Type:</td>
<td></td>
</tr>
<tr>
<td>- Jail</td>
<td>☐</td>
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<tr>
<td>- Prison</td>
<td>☒</td>
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<tr>
<td>Facility Mission:</td>
<td>To Improve Public Safety</td>
</tr>
<tr>
<td>Facility Website with PREA Information:</td>
<td><a href="http://www.doc.wa.gov/prea.asp">http://www.doc.wa.gov/prea.asp</a></td>
</tr>
</tbody>
</table>

### Warden/Superintendent

<table>
<thead>
<tr>
<th>Name:</th>
<th>Daniel W. White</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Superintendent</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:dwwhite@doc1.wa.gov">dwwhite@doc1.wa.gov</a></td>
</tr>
<tr>
<td>Telephone:</td>
<td>360-427-4696</td>
</tr>
</tbody>
</table>

### Facility PREA Compliance Manager

<table>
<thead>
<tr>
<th>Name:</th>
<th>Dean Mason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Associate Superintendent of Programs</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:Dean.mason@doc.wa.gov">Dean.mason@doc.wa.gov</a></td>
</tr>
<tr>
<td>Telephone:</td>
<td>360-432-5938</td>
</tr>
</tbody>
</table>

### Facility Health Service Administrator

<table>
<thead>
<tr>
<th>Name:</th>
<th>Melissa Mowder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Health Services Manager 3</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:mhmowder@doc1.wa.gov">mhmowder@doc1.wa.gov</a></td>
</tr>
<tr>
<td>Telephone:</td>
<td>360-427-4686</td>
</tr>
</tbody>
</table>

### Facility Characteristics

<p>| Designated Facility Capacity: | 1800                          |
| Current Population of Facility: | 1808                          |
| Number of inmates admitted to facility during the past 12 months | 13,154 |
| Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more: | 7,135 |
| Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more: | 12,258 |</p>
<table>
<thead>
<tr>
<th>Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:</th>
<th>81</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age Range of Population:</strong></td>
<td><strong>Youthful Inmates Under 18:</strong> 16-17 – none housed during time of audit</td>
</tr>
<tr>
<td><strong>Adults:</strong></td>
<td>18-77</td>
</tr>
<tr>
<td>Are youthful inmates housed separately from the adult population?</td>
<td>☒ Yes</td>
</tr>
<tr>
<td>Number of youthful inmates housed at this facility during the past 12 months:</td>
<td>28</td>
</tr>
<tr>
<td>Average length of stay or time under supervision:</td>
<td>3 days</td>
</tr>
<tr>
<td>Facility security level/inmate custody levels:</td>
<td>Minimum to maximum</td>
</tr>
<tr>
<td>Number of staff currently employed by the facility who may have contact with inmates:</td>
<td>654</td>
</tr>
<tr>
<td>Number of staff hired by the facility during the past 12 months who may have contact with inmates:</td>
<td>59</td>
</tr>
<tr>
<td>Number of contracts in the past 12 months for services with contractors who may have contact with inmates:</td>
<td>2</td>
</tr>
</tbody>
</table>

### Physical Plant

<table>
<thead>
<tr>
<th>Number of Buildings:</th>
<th>31</th>
<th>Number of Single Cell Housing Units:</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Multiple Occupancy Cell Housing Units:</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Open Bay/Dorm Housing Units:</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Segregation Cells (Administrative and Disciplinary):</td>
<td>124</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.):**

Cameras are placed in all high traffic areas where offenders might be present. Cameras are monitored from a number of locations to include unit or area control booths/offices. This auditor was provided with retention time frames, however this will not be included in this report as this is confidential information and not for public knowledge which could compromise investigations.

### Medical

<table>
<thead>
<tr>
<th>Type of Medical Facility:</th>
<th>Short-term infirmary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forensic sexual assault medical exams are conducted at:</td>
<td>Providence St. Peter’s Hospital, Olympia, WA</td>
</tr>
</tbody>
</table>

### Other

| Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility: | 166 |
| Number of investigators the agency currently employs to investigate allegations of sexual abuse: | 560 |
Audit Findings

Audit Narrative

Deborah Striplin, Nevada Department of Corrections and Department of Justice certified PREA auditor for adult facilities was one of the lead auditors to conduct the Prison Rape Elimination Act (PREA) audit for Washington State Department of Corrections (WADOC) as part of the Western States Consortium. Communication with WADOC agency PREA Coordinator began between April and June, 2017 with limited communication during this time frame for the development of Memorandum of Understanding and Statement of Work and dates for on-site audits for selected WADOC facilities. Washington Corrections Center was one of the facilities scheduled for during the 2017/2018 audit cycle.

Sunday, July 2, 2017 Deborah Striplin provided contact information for all facilities audit notifications she was selected to be lead on during this cycle of audits. The notification contained information on the upcoming audit and stated that any offenders or staff with information may write to the PREA auditor with my address, in addition the notification listed all correspondence must include “For Washington Corrections Center PREA Audit” on the envelope to be considered confidential to ensure mail to the auditor would get treated as privileged and confidential not to be opened by staff.

September 25, 2017 this auditor received an email from WCC PREA specialist that the audit notifications were posted which included photos. These photos were also included the pre audit documentation USB. This auditor did not receive any offender correspondence prior to or post audit. While conducting on-site audit tour of the facility audit notifications were observed by the auditor and support staff in all housing units, common areas and hallways.

July 13, 2017 auditor reviewed Washington State Department of Corrections website, www.doc.wa.gov PREA page and sent a “test” report sexual misconduct and called the hot line receiving a confirmation and call back the same day.

October 4, 2017 this auditor received the password protected flash drive from agency PREA coordinator for the Washington Corrections Center (WCC) audit. Flash drive contained all required documentation to include but not limited to:

- Pre Audit Questionnaire (PAQ)
- WADOC policies
- WADOC procedures
- Contracts
- Training documents
- Investigation information
- MOU with SAFE and victim advocacy

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.
Thursday, November 2, 2017 this auditor had a phone conference with WCC Superintendent, facility PREA compliance manager (PCM), facility PREA specialist, agency PREA coordinator and other WCC executive staff members. This conference was an informal introduction to discuss up-coming on-site audit and discussion of schedule which was provided to the agency PREA coordinator, WCC superintendent, and PCM and PREA specialist after the phone conference.

**Monday, November 13, 2017 7:40 a.m. (day one)**

The Nevada PREA audit team Deborah Striplin (lead auditor), Darin Baker (support staff) and Kirk Widmar (support staff) who are all DOJ certified PREA auditors arrived on-site at WCC. Audit team attended and was introduced to executive and support staff by the superintendent during the Monday morning in-brief with the facility tour commencing around 8:30 a.m.

**Facility tour:**

A and B buildings: Administration building, minor control and major control. Audit team had no areas of concerns, PREA posters were posted and observed to be placed in areas for all staff, volunteers and visitors to view. Impromptu informal interviews of staff working in this area were completed during the walk through.

Housing units R-1, R-2, R-3 are identical in design with 8 tiers of 10 cells each. These units in part are utilized for the agency reception center with each unit having communal showers which are available on each tier. In addition each unit has its own dining facility. Audit team toured every unit, every tier, dining hall. All levels and areas were toured and impromptu/informal interviews of staff and inmates were conducted during walk through. PREA posters were visible and in areas of high traffic. Auditor also viewed the outside agency reporting “Colorado” form in areas accessible for offenders. Audit team noticed the showers were not compliant as their current shower curtains did not provide sufficient privacy all offenders.

C-Bldg Receiving: Auditor observed the offender toilet was exposed from side views and did not meet compliance with §115.15 (d)

M-bldg lower R Gym: Audit team conducted tour and found the offender restroom did not provide privacy for offenders.

Grievance portable: No areas of concern noted and is off limits to offenders

Infirmary: The infirmary is able to house up to 18 offenders, during walk through impromptu informal interviews were conducted with staff an inmates. PREA posters were visible posted in areas for staff and inmates to view. Audit team noticed an area of concern and determined the observation rooms were not compliant with §115.15 (d).

Education Building: No areas of concern, PREA posters were visible and in areas for staff and inmates to view.

Cedar Unit: All areas were toured which included impromptu/informal interviews of staff and inmates conducted during walk through. PREA posters were visible and in areas of high traffic. Auditor also viewed the outside agency reporting “Colorado” form in areas accessible for offenders. No areas of concerns noted.
Evergreen Unit: All areas were toured which included impromptu/informal interviews of staff and inmates conducted during walk through. PREA posters were visible and in areas of high traffic. Auditor also viewed the outside agency reporting “Colorado” form in areas accessible for offenders. No areas of concerns noted.

Intensive Management Unit (IMU): All areas were toured which included impromptu/informal interviews of staff. PREA posters were visible and in areas offenders are able to view. Auditor also viewed the outside agency reporting “Colorado” form which can be requested by offender from staff. No areas of concerns noted.

R-4 (close custody): All areas were toured which included impromptu/informal interviews of staff. PREA posters were visible and in areas offenders are able to view. Auditor also viewed the outside agency reporting “Colorado” form which can be requested by offender from staff. No areas of concerns noted.

R-5, R-6: All areas were toured which included impromptu/informal interviews of staff and inmates conducted during walk through. PREA posters were visible and in areas of high traffic. Auditor also viewed the outside agency reporting “Colorado” form in areas accessible for offenders. No areas of concerns noted.

Gym/Training Center: No areas of concern

G-Building/Program/Work area: Audit team conducted tour and found that the offender large restroom toilet stalls did not have doors which allowed inmates to be exposed to cross gender viewing when the restroom door was opened. The main window was frosted which provided privacy for offenders using the toilets when staff or other offenders walk down the hall, but provided too much privacy where staff could not view in the restroom without walking into the restroom. Corrective action initiated for compliance with 115.15(d).

Laundry: No areas of concern

Kitchen: No areas of concern

Green house: No areas of concern

CI Warehouse: No areas of concern

M-Building: No areas of concern

E-Building: The sliding exterior restroom door lock needed to be changed out to ensure that offenders cannot lock other offenders in the restroom.

Steam Plant: No areas of concern

Day one ended around 6:00 p.m.

Tuesday, November 14, 2017 (day two)

Audit team arrived on-site around 7:45 am. Day two was scheduled for audit team to conduct specialized and random staff interviews for all staff, contractors and volunteers on all shifts. Custody staff work 8hr shifts which required audit team to work late in order to interview 1st shift (graveyard) staff coming into work. Formal interviews were conducted using DOJ interview guide questions.
Random staff interviews: 23 formal interviews completed (multiple impromptu during day 1 facility tour)

Specialized interviews

Facility Head: Superintendent
PREA Compliance Manager:
PREA Specialist:
Intermediate/higher level staff (Supervisors who conduct unannounced rounds): Interviews completed with supervisors on all shifts. (3)
Institution HR staff: (1)
Retaliation Monitor: (2) interviews conducted. PREA specialist and CUS who meets with the offender
Incident Review Team: (1)
Intake staff: (1)
Investigative staff: (1) Chief investigator interviewed
Medical staff: (1)
Mental health staff: (1)
Non-Medical staff involved in cross gender strip or visual searches: N/A against agency policy
First responder’s custody/non-custody: (2) interviews completed with custody staff
Staff who work in seg: (2)
Staff who perform risk screening assessment: (1)
Line staff who supervise youthful offenders: (2) Supervisor and correctional officer interview completed.
Education/program staff who work with youthful offender: (1) Education staff was interviewed on-site

Specialized agency level staff interviews completed when this auditor conducted WADOC audit at another facility during this audit cycle.

Agency Head:  WADOC Peninsula Work Release facility audit
Agency Contract Administrator: WADOC Peninsula Work Release facility audit
Agency PREA Coordinator: WADOC Peninsula Work Release facility audit

Day two was completed Wednesday, November 15, 2017 at 12:05 a.m. Audit team day was about 16+ hours, taking a 1½ dinner break and was on-site for approximately 14 hours to ensure interviews were completed for all shifts.
**Wednesday, November 15, 2017 (day three)**

Audit team arrived on-site around 8:30 am. Day three was scheduled for audit team to conduct specialized and random offender interviews from all housing units. Formal interviews were conducted using DOJ interview guide questions revised September 6, 2017. The required total minimum offender interviews per auditor handbook is 40, audit team completed a total of 51 formal interviews.

Random offender interviews: 36 formal random interviews (multiple impromptu during facility tour)

**Specialized interviews** – (total 15 specialized interviews)

- Disabled (sight/hearing/physical): 1
- Disabled cognitive: 1
- Limited English: 1
- Transgender/intersex: 3
- Gay or bi-sexual: 2
- Offenders who reported sexual abuse in confinement: 4
- Offenders who reported sexual abuse during risk assessment: 3
- (2) Inmate in adseg for risk of sexual victimization:
  - None at time of on-site audit, the number added to random interviews
- (3) Youthful offenders
  - None at time of on-site audit, the number added to random interviews

While PREA auditors were conducting interviews four offenders has reported PREA related violations. Auditors reported to WCC staff to include completing incident reports. Thursday, November 30, 2017 auditor received an email with incident reports and current action being taken. Of the four incidents reported, one was reported prior to this audit time frame and had already been investigated. The other three were reviewed and assigned investigation.

*Day three ended around 7:30 pm.*

**Facility Characteristics**

Washington Corrections Center (WCC) is a Washington State Department Corrections men’s prison located in Shelton, Washington. WCC opened in 1964, the fifth oldest and sixth largest prison in the state. WCC serves as the intake facility for the reception and diagnostic center (6 of the 9 units) for male offenders for the state. It is also has two full housing units Cedar and Evergreen and G/H Tier of R-6. Evergreen is for offenders with less than 9 months to serve and Cedar and R-6 G/H Tier serve as long term housing. Staff work closely with the community to provide release planning, services and resources to the offenders housed in these units. WCC sits on 400 acres, 97 acres are fenced and contains the housing units and the majority of the programming areas.
Summary of Audit Findings

At the completion of the on-site and post on-site audit, this auditor determined WCC met compliance with 38 of the 42 standards. Four standards did not meet standards and placed into corrective action §115.15, §115.41, §115.42 (default to §41), §115.81.

Two standards (§115.41 and §115.81) had been identified by WCC as not meeting requirements while preparing for this audit. The Superintendent took action and sent a memo September, 2017 advising staff of new procedure effective October 1, 2017. Auditor placed §115.41, §115.42 and §115.81 into corrective action as there was not sufficient time to provide proof of practice to ensure continued compliance.

WCC corrective action period began the date of interim report of December 23, 2017 and completed June 22, 2018. PREA agency Coordinator and WCC communicated with this auditor over the corrective action time frame on the progress and completion of each area identified.

WCC is a very unique facility with a mission that is very complex. WCC staff should be commended for the phenomenal job that they do daily. During the on-site visit the audit team was welcomed by staff that was very respectful, hospitable and professional. All staff that the audit team encountered during the on-site visit was friendly, available for questions and provided general information related to their post assigned. During the on-site tour the audit team was escorted by WCC executive team which provided the auditor the opportunity to gain more insight and information about the mission of the facility. Having all the staff available and participating reflected how proactive they are not only to sexual safety of offenders but the safety and security for all offenders and staff. It is with great pleasure that this auditor finds WCC in full compliance.

Number of Standards Exceeded: 0

Number of Standards Met: 43


Number of Standards Not Met: 0

Summary of Corrective Action (if any)

§115.15 (d) During on site tour audit team found the following areas non-compliant with this standard element.

G-building: Offender large restroom toilets did not have privacy on each stall which allowed inmates to be exposed to cross gender viewing when opening the door. The main window is frosted which provided privacy when walking down the hall, but provided too much privacy where staff could not view
in the restroom without walking in. The frosting made it difficult for the prevention, detection and safety for offenders and staff as to what could be occurring prior to entering the restroom.

Corrective action required:
- Auditor recommended the following adjustments:
  - Half door type barrier on each stall. This would allow privacy for all offenders and any cross gender viewing.
  - Lowering the frosting on the window to allow staff the ability to view in the restroom.
- Auditor requested pictures at completion and should additional concerns arise possible on-site review was possible. No on-site follow up was necessary.
- January 9, 2018 email from agency PREA coordinator was received to include pictures reflecting auditor recommended changes had been completed meeting compliance with 115.15(d).

Infirmary close observation post: During on-site audit of infirmary close observation area cells WCC was found not compliant with policy DOC 320.265 (F) and standard element (d). Female staff member was assigned to this post and was able to view video monitor of cells. Audit team was informed that this area generally houses inmates who are not on suicide watch but are required to be monitored for different medical and mental health reasons. Corrective action placed, did not meet compliance with 115.15(d).

- While on site WCC Superintendent took immediate action having a discussion between Union representatives to reassign the female officer currently assigned on graveyard shift. November 16, 2017 a permanent assignment was effective for female staff member who was assigned.
- January 4, 2018 WCC Superintendent issued a memo that staff assigned to the observation post will be an officer of the same gender as offender. Memo included action to be taken should a cross gender staff member work this post for exigent circumstance requiring temporary assignment. This is reflected in operational memorandum WCC 320.265 III (F). Auditor finds that WCC meets compliance with 115.15(d) for this post.

R-1, R-2 and R-3: Audit team noticed the showers curtains did not provide sufficient privacy for all offenders.

Corrective action:
- Replace the existing shower curtains with ones which provide coverage from the neck to knees providing privacy of genitalia, while still allowing custody staff the ability to identify who is in the shower for offender and staff safety.
  - Auditor required pictures at completion and should additional concerns arise possible on-site review may needed. Follow up onsite review was not necessary.
  - November 14, 2017 while on-site auditor was provided a copy of an email for the PREA Specialist to maintenance department.
  - 5/21/18 this auditor received email notification to include photos of the curtains, meeting compliance with 115.15.
C-Bldg Receiving: auditor observed the offender toilet was exposed from side views.

Corrective action:
- A wall/barrier was needed to allow offenders privacy when using the toilet while still maintaining ADA compliance
- Auditor required pictures at completion and should additional concerns arise possible on-site review may needed. Follow up on-site review was not necessary.
  - November 14, 2017 this auditor was provided an initial email request from PREA Specialist to maintenance department.
  - April 18, 2018 this auditor received email notification to include photos of the offender stall, meeting compliance with 115.15.
    - The original plan that was presented to the auditor was revised due to structural issues which necessitated a new plan. WCC changed the staff stall into an offender stall, allowing privacy from staff and other offenders.

M-bldg lower R Gym: Audit team conducted tour and found the offender restroom did not provide privacy to inmates who utilize the urinal and toilet.

Corrective action:
- The current partition/barrier between the sink and urinal needed to be extended by 2 feet.
- A wall/barrier needed to be built between the urinal and the toilet while still maintaining ADA compliance
  - Auditor requested pictures at completion of modification.
  - November 14, 2017 while on-site, PREA Specialist provided a copy of the email request to maintenance.
  - April 19, 2018 this auditor received email notification to include photos showing completion of the walls. Due to ADA space requirements the wall between the urinal and toilet could not be extended as far. WCC updated policy that only one offender at a time is allowed to use the restroom at time. Auditor determined that they meet compliance.

E-Building restroom-lower-inmate-E05:

Corrective action:
- The sliding exterior restroom door lock needed to be changed out to ensure that offenders cannot lock other offenders in the restroom.
  - Auditor received a copy the maintenance request from PREA Specialist on Tuesday, November 14, 2017 while on-site.
  - January 29, 2018 auditor received an email which included photo of the door with the sliding lock changed to add a pad lock to secure slider open when inmates are in program area and bathroom is open for use.
§115.41 default §115.42

WCC identified non-compliance with this standard September, 2017. October 1, 2017 was the effective date that were to begin new procedure. While the deficiency was identified prior to on-site audit, this auditor placed into corrective action as there was not sufficient time to provide proof of practice to ensure continued compliance.

Corrective action:

- During on-site out brief auditor requested that a copy of the PRA tracking log be emailed at the beginning of each month. Reports were reviewed with a random sample of offenders selected and sent request for screen shots of OMNI to verify dates match.
  - While corrective action time frame did not begin until December 23, 2017 the agency coordinator email the 1st tracking log on December 10, 2017. Reports were emailed to the auditor monthly with the final report received on June 1, 2018.
  - Auditor determined that WCC maintained compliance during corrective action time frame and finds that they meet compliance with this standard.

§115.81

WCC identified non-compliance with this standard September, 2017. October 1, 2017 was the effective date that were to begin new procedure. While the deficiency was identified prior to on-site audit, this auditor needed to place corrective action as there was not sufficient time to provide proof of practice to ensure continued compliance

Corrective action:

- During on-site out brief auditor requested proof of documentation for 115.81 beginning December 1, 2017 as these areas had already been identified as not meeting standards prior to audit
  - WCC provided a monthly mental health referral tracking log at the beginning of each month to the auditor. Auditor reviewed report, selecting a random sample of offenders to review a screen shot of OMNI and copy DOC 13-509 verifying dates matched. While corrective action time frame did not begin until December 23, 2017 the agency coordinator email the 1st tracking log on December 10, 2017. Reports were emailed to the auditor monthly with the final report received on June 5, 2018. Over this time frame the auditor monitored for continued compliance which was met and found that WCC meets compliance with this standard.

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 three policies related to and meeting compliance with this standard. Auditor was provided policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 490.850 Prison Rape Elimination Act (PREA) Response
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation
Additional supporting documentation was provided:
- Agency PREA coordinator position description
- Headquarters organizational chart
- Agency organizational chart
- WCC organizational chart

Specialized interview with the Agency PREA coordinator was completed during Peninsula Work Release audit August 2017.

Facility Head interview:

Superintendent White has worked for WADOC for over 20 years in multiple capacities and recently was appointed as the Superintendent of WCC. This auditor found the Superintendent to have knowledge of PREA standards with the conversation going into depth regarding staffing, investigations and the new camera project being implemented. The interview further supported conversations which occurred informally while team was on facility tour the previous day. While on the facility tour, staff confirmed his involvement with PREA and sexual safety within the facility. Additionally, staff spoke very highly of him and the positive changes he has made since being appointed.

PREA Compliance Manager interview:

Associate Superintendent of Programs Mason has worked for WADOC for 28 years and has been the PCM at WCC since 2014. Mr. Mason oversees PREA compliance with the time to do so and supervises the PREA Specialist. Mr. Mason has working knowledge of PREA standards and agency policy, while he is the PCM most of the day to day responsibility of PREA compliance is completed by the PREA Specialist.

PREA Specialist interview:

Formal interview was completed with the PREA specialist with additional information learned informally during facility tour regarding her responsibilities. The PREA specialist completed the PAQ, completes tours to ensure PREA information is posted and had not been removed, maintains retaliation tracking log, risk assessment and mental health tracking. The PREA specialist has extensive knowledge of PREA and the commitment to sexual safety within the facility. The PREA specialist was spoken very highly of not only by management but all staff.

While conducting specialized interviews with the PCM and the PREA specialist during the on-site visit, this auditor had additional questions regarding responsibilities. After returning from on-site visit this auditor sent a request to the agency PREA coordinator requesting copies of their work performance standards for review.

This auditor determined that the PREA specialist is responsible for maintaining and completing a majority of the functions described in agency policy which is also reflected in the position description. This was further supported during the on-site visit as she was the point of contact, primary escort and provided clarification if needed. This was further supported after completing interviews with the PCM and PREA specialist.
Zero Tolerance Policy:

The Department recognizes the right of offenders to be free from sexual misconduct. The Department has a zero tolerance for all forms of sexual misconduct. The Department will impose disciplinary sanctions for such conduct, up to and including dismissal for staff. Incidents of sexual misconduct will be referred for criminal prosecution when appropriate. The department does not recognize consensual sexual contact between staff and offenders as a defense against allegation of sexual misconduct. The Department recognizes the right of staff and offenders to be free from retaliation for reporting sexual misconduct.

The Department has a 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. The Department has established procedures for recognizing, preventing, and reporting incidents of sexual misconduct and retaliation. Information related to allegations/incidents of sexual misconduct is confidential and will only be disclosed when necessary for related treatment, investigation, and other security and management decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action.

DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting outlines the responsibilities of the agency wide PREA coordinator.

The agency PREA coordinator responsibilities include but not limited to:

- Develop and implement PREA related policies.
- Develop and coordinate procedures to triage allegations received and identify, monitor, and track incidents of sexual misconduct. Coordinate and track referrals of allegations to law enforcement and prosecutors.
- Develop and implement a comprehensive system to audit facility compliance with PREA policies and applicable laws. Each facility will review and document continued compliance using a formal standardized system published by the PREA Coordinator.
- Oversee monitoring of PREA compliance for private and non-Department public entities contracted for offender confinement. Keep management informed on PREA-related issues.
- Maintain a memorandum of understanding for external victim advocacy services.
- Maintain PREA content for the Department website, including publication of required information and documents.

The agency policy outlines the requirements for a PREA compliance manager at each facility.

A PREA Compliance Manager will be identified by the Superintendent for each Prison, and the Work Release Administrator will assign a PREA Compliance Manager for each Work Release. The PREA Compliance Manager will be an employee outside of any Intelligence and Investigation Unit, who will coordinate local PREA compliance and:

- Serve as point of contact for the PREA Coordinator.
- Oversee completion of scheduled PREA vulnerability assessments.
- Coordinate audit preparation activities and corrective action plans.
- Track completion of PREA Risk Assessments for substantiated allegations of offender-on-offender sexual assault/abuse or staff sexual misconduct.
- For Prisons, ensure a monthly functionality test of a random sampling of offender telephones is completed to verify the toll-free number is operational, Inmate Personal Identification Number (IPIN) is not required, and calls are not being recorded locally.
- Coordinate monthly checks to verify:
The PREA hotline telephone number is posted on or near all offender telephones.
Posters and pamphlets provided by the PREA Coordinator are posted in areas accessible to offenders and the public, including Health Services areas and Classification Counselor/Community Corrections Officer (CCO) offices.

- DOC 21-379 Report of Prison Rape Elimination Act (PREA) Allegation forms are available for offenders to access.
- In Prisons, forms will be maintained in the living units and/or library. Review compliance with all PREA training requirements quarterly.
- Oversee the work of the PREA Compliance Specialist, if applicable, to include audit preparation, investigations, and other duties associated with PREA implementation.

### 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 one policy related to and meeting compliance with this standard. Auditor was provided policies which were reviewed for complete standard compliance.
• DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

Supporting documentation provided and reviewed by this auditor:

(a-c) WADOC policy DOC 490.800 reflects language meeting and consistent with this standard that any new or renewed contracts for the confinement of offenders will include the requirement that the contracted facility comply with federal PREA standards and allow the Department to monitor PREA compliance. The policy reflects the department will not enter into contracts with facilities that fail to comply with PREA standards, except in emergent situations.

Department of Health and Human Services (housing of youthful offenders):

DOC – K10491 / DSHS-1361-28731: Interagency Agreement between State of Washington Department of Corrections and State of Washington Department of Social and Health Services. Contract reviewed and meets compliance of PREA standards. Agreement effective January, 2015 and is an open ended contract. This agreement is for the housing of youthful offenders, WADOC will not house youthful offender’s long term.

American Behavior Health Services (ABHS):

Contract No. K8254 amendment #12 which had been provided had expired June 30, 2017, auditor contacted PREA coordinator who emailed the current contract amendment #15 effective July 1, 2017 with an expiration date of June 30, 2019 was reviewed. Contracts outline requirements related to PREA and meets compliance. ABHS operates three facilities for residential substance abuse treatment and all have completed DOJ audits. WADOC conducts regular visits to the facilities along with discussions to address PREA related issues.

Yakima County Department of Corrections:

Interagency agreement between Yakima County and WADOC for the purpose of provide total confinement house for up to three hundred DOC offenders. Yakima County is used as overflow bed capacity for female offenders. The agency completed DOJ audit March 2015, receiving compliance. Regular visit along with discussions related to PREA issues continue per the agreement and in meeting standard compliance. Auditor reviewed interagency agreement which outlines and meets compliance with this standard. The agreement originally commenced on February 12, 2014 and was amended each year; last amendment was 7/1/16 with an end date of 6/30/17. The contract is currently out for rebid and to allow for WADOC to allow for offender to be housed this contract was amended to extend to November 30, 2017. Yakima County Department of Corrections has received DOJ PREA audit which found them compliant. Auditor reviewed Yakima website for PREA information http://www.yakimacounty.us/1141/Prison-Rape-Elimination-Act and DOJ audit from March, 2015 is posted and reflects compliance.

GEO Group:

WADOC has an active contract #K10825 effective May, 2015 through August, 2018 to house offenders in an out of state facility, privately operated by the GEO group, however as of the date of pre audit review WADOC does not have any offenders housed in a GEO Group facility. Contract meets requirements of the standard to include WADOC PREA policies included as attachments.
# Standard 115.13: Supervision and monitoring

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

<table>
<thead>
<tr>
<th>115.13 (a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>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</td>
</tr>
<tr>
<td>Does the agency ensure that each facility’s staffing plan takes into consideration any applicable</td>
</tr>
</tbody>
</table>
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*)
The State of Washington Department of Corrections (WADOC) has five policies related to and meeting compliance with this standard. Auditor was provided policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 110.100 Prison Management Expectations
- DOC 400.210 Custody Roster Management
- DOC 400.200 Post Order/Operations Manual and Post Logs
- DOC 420.370 Security Inspections
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

Additional supporting documentation:
- Vulnerability assessment
- Monthly Staffing rosters for the 12 month audit period
- Staffing plan memo to agency PREA coordinator
- Random sample copies of unit logs reflecting supervisor unannounced rounds

Policy requires staffing plans to be reviewed annually which was supported by interview with WCC Superintendent who also stated he reviews staffing throughout the year for safety and security measures. This auditor was provided with copies of additional supporting documentation which further supported proof of practice and compliance with this standard.

Specialized interviews with supervisors confirmed compliance that they conduct random unannounced tours and staff are not alerted that these are being completed. This was further supported during interviews with random staff.

On-site tour audit team reviewed video monitoring and paid close attention to camera locations and placements. Audit team also observed staff working in the unit and throughout the facility.

490.800 Staffing Plans
- 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.
  - In 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.
Reporting requirements:
- Superintendents will compile quarterly reports on the following and submit them to their Deputy Director:
  - Major incidents and developments in each department or administrative unit, population data,
  - Compliance with the staffing plan, listing all vacancies open 30 days or more, and actions taken to fill or mitigate to ensure continuity of services,
  - Assessment of employee morale via personnel activities,
  - Assessment of offender morale via grievance statistics and major incidents,
  - Major problems and plans for solving them, and
  - Government Management Accountability and Performance (GMAP) assignments and status of action plans.

Management By Walking Around:
- Superintendents will ensure that each member of the facility executive team make unannounced tours of selected areas of the facility at least weekly. Employees are prohibited from alerting one another that these tours are occurring, except when necessary for the legitimate operational functions of the facility.
- At a minimum, the following areas must be toured each week:
  - Intensive Management/Segregation Unit, Food Services, including mainline operations, and Health Services.
- Executive team members will routinely modify their work schedules to conduct tours and interact with employees on all 3 shifts.
- Superintendents will document tours in a weekly report to their Deputy Director.

400.210
The Department will establish custody staffing guidelines to ensure:
- The safe and efficient operation of all Prisons.
- Custody staffing is deployed consistent with the Custody Staffing Model and Custody Post Audit Summary.
- Custody expenditures are managed consistent with available custody allotments.

400.200
Post logs will be kept in permanent, bound books with non-removable, numbered pages or maintained in a computer based program developed and provided by Headquarters (i.e., ATLAS).

Correctional staff will maintain a permanent log, providing a shift report that records routine information, emergency situations, unusual instances, and area visits by executive staff and designated Department heads in the post log.

420.370
The Superintendent will develop a rotation schedule to ensure weekly visits are conducted of all living units and activity areas (e.g., recreation, education, etc.) to encourage informal contact with personnel and offenders and to informally observe living and working conditions. Employees in the rotation schedule should include:
- Associate Superintendents, if applicable,
Captains/Senior Security Managers,
Correctional Program Managers, and
Other designated Department heads and managers.

**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 one policy related to and meeting compliance with this standard. Auditor was provided the policy which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 110.100 Youthful Offender Program

Additional supporting documentation:
- YOP spread sheet
- Daily report form
- Movement sheet
- RCW 72.01.410 – Child under eighteen convicted of crime amounting to felony – Placement-Segregation from adult offenders

The average stay of a youthful offender at WCC that is approximately 6 hours for a new commit and approximately 7 days for if transferred from a Juvenile Rehabilitation Facility (JRA) to WCC for disciplinary reasons. Youthful offenders are assigned to the Intensive Management Unit or infirmary and kept separate for adult offenders. Youthful offenders are housed in a single mane cell on a tier where they are isolated from adult offenders by sight, sound and physical contact. All youthful offenders are escorted by two adult staff members to all locations.

During on-site audit WCC did not have any youthful offenders housed. Auditor reviewed policy and supporting documentation which supported policy and procedure compliance with this standard.

Specialized interviews were conducted with staff which supported additional proof of practice of policy and procedures.

110.100

The Department and the JRA have an interagency agreement to coordinate the transfer and sharing of information regarding youthful offenders.

Admission: Youthful offenders sentenced to the Department will be received at Washington Corrections Center (WCC) or Washington Corrections Center for Women (WCCW) Reception Diagnostic Center.

Offenders admitted to WCC or WCCW will be housed to ensure direct supervision, safety, and security requirements are met. Pending transfer to a JRA facility, the youthful offender will be assigned a cell separate from adult offenders, within an intensive management or segregation unit or infirmary.

- The youthful offender will not be housed or participate in a program/activity (e.g., recreation, visiting) with any adult offender.
- The youthful offender will be under direct supervision by 2 custody employees whenever s/he leaves his/her cell.
- Sight or sound contact with adult offenders will be minimal and brief, and conform to applicable legal requirements while the youthful offender is housed at Department facilities.

Upon the youthful offender’s arrival at WCC or WCCW Reception Diagnostic Center, records
employees will notify:

- Appropriate facility employees,
- Headquarters Classification Correctional Program Manager,
- Headquarters Youthful Offender Program (YOP) Counselor III, and
- Headquarters Corrections Specialist for Records.

The YOP Counselor III/designee will make appropriate arrangements to provide educational services if the youthful offender is expected to remain or is unexpectedly detained at the facility more than 3 working days.

**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 five policies related to and meeting compliance with this standard. Auditor was provided with the policies which were reviewed for complete standard compliance. This auditor included some sections/segments from four of the five DOC policies that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 420.310 Searches of Offenders
- DOC 420.312 Body Cavity Search
- DOC 320.265 Close Observation Areas
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments
Additional supporting documentation:
- Directives to staff regarding cross gender announcements
- PowerPoint pat search training

During on-site tour cross gender announcement was completed by escorting WCC staff member. On-site interviews with staff and offenders further confirmed compliance with the policy and this standard.

WCC did not have in instances which required a visual body cavity search.

115.15 (b & c) is not applicable at WCC does not house female offenders.

115.15 (d) Audit team during on-site tour found WCC not compliant with this element and agency policy in the following unit and/or locations. Deficiencies have been noted in this audit report narrative and corrective action sections.

**Policy 320.265:** Observation assignments will be conducted by an officer of the same gender as the offender, except in emergent situations.

(e) During interviews of random staff the audit team confirmed staff received training via LMS regarding pat searches of transgender or intersex offenders. However, some staff reported that they would like a refresher to feel more comfortable in conducting pat searches of transgender or intersex offenders.
- WCC is compliant with this element. After audit team discussion regarding the staff interviews this auditor made a best practice recommendation that they develop an in-class instruction for staff.
- June 20, 2018 this auditor received a copy of the newly developed training curriculum for WADOC staff which included completed training rosters for the staff at WCC.

**490.800**

Offenders will be provided the opportunity to shower, perform bodily functions, and change clothing without non-medical 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. This includes viewing via surveillance systems.

Notices will be posted in living units and infirmaries indicating that personnel of both genders could be present in the unit.

An announcement will be made indicating “Man on unit” or “Woman on unit”, loud enough and often enough to reasonably be heard by the occupants of that area:
- At the start of the shift if an employee working that shift is the opposite gender of the offenders housed there.
- Whenever anyone of the opposite gender of the offenders enters a living unit who is not regularly assigned there (e.g., facility visitor).
- Whenever anyone of the opposite gender of the offenders enters offender restrooms or any area designated for offenders to disrobe or change their clothes.
420.310

A strip search must be conducted by 2 trained employees.

- Staffing will meet the following gender requirements, unless waiting for an employee of the designated gender may result in serious bodily injury to the offender, the employee, or others:
  - Strip searches of female offenders will be conducted by female employees.
  - Strip searches of male offenders require that one of the employees conducting the search be male. If the second person conducting the strip search is female, she will position herself to observe the employee doing the strip search, but will not be in direct line of sight with the offender.

- If a strip search is conducted that does not meet these gender requirements for staffing, a confidential report will be completed in IMRS and submitted before the end of shift. The distribution will include the PREA Coordinator.

320.265

Observation assignments will be conducted by an officer of the same gender as the offender, except in emergent situations.

- In the event of a cross-gender officer being assigned, a report will be completed by the Shift Commander in the Incident Management Reporting System (IMRS) before the end of shift. Distribution will include the Prison Rape Elimination Act (PREA) Coordinator.

498.820

Employees/contract staff will not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender’s genital status. If the offender’s genital status is unknown, it will be determined by health care providers during conversations with the offender, by reviewing medical records, or, if necessary, as part of a broader medical examination conducted in private by a health care practitioner.

**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 four policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 310.000 Orientation for Offenders
- DOC 450.500 Language Services for Limited English Proficient (LEP) Offenders
- DOC 690.400 Offenders With Disabilities
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

Additional supporting documentation:

- Contracts for Sign Language Interpreter
  - K10913, K10832, K11255, K11256, K11283, K11309, K11310
  - DOC contact list for contractors
  - Position description for WADOC Deaf Services Coordinator
  - Offender pamphlets/handouts for Offenders who are cognitively impaired / low comprehension
  - DOC Americans with Disabilities Act training for staff
  - Screen shot of inmates who required services and received information.(proof of practice)
  - Memo from unit Cedar Hall to PREA specialist regarding PREA orientation for offenders who require one-on-one orientation and inmate education.

- Contracts for Telephone Based Translation Services and awarded contractors
  - Contract 05614
    - Corporate Translation Services dba CTS Language Link
    - Linguistica International, Inc.
    - Voiance Language Services, LLC
  - Contract 03514 – Interpreter Services, Spokane

- Copy of PREA Spanish zero tolerance and reporting poster
- Copy of WADOC LEP Coordinator Monthly Report for telephonic contract interpreters and contract letter translation services (proof of practice)
- Screen shot of WCC tracking for offenders who are LEP (proof of practice)
- Memo from WCC superintendent that there were no instances where an interpreter was required in the course of a PREA allegation.

During on-site audit random and specialized interviews with staff confirmed compliance with this standard and agency policy. Specialized interview with LEP offender confirmed compliance and WADOC staff member provided translation service during the interview between the offender and the audit team member.

450.500

The Department will provide interpretation (i.e., oral) and translation (i.e., written) services through Department and/or contract services at all Department facilities and Field Offices. The Department will also provide guidelines for interpretation and translation services for Limited English Proficiency (LEP) offenders under Department jurisdiction.

490.800

Offender Accommodations
- 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.

310.000

Offenders will receive orientation information, both orally and in writing, in a manner that is clearly understood by offenders. The orientation will, at a minimum, include:
- Information on the Prison Rape Elimination Act (PREA), including:
  - DOC 490.800 Prevention and Reporting of Sexual Misconduct, DOC 490.850 Response to and Investigation of Sexual Misconduct, related operational memorandums, the Prison Rape Elimination Act of 2003, and other applicable state or federal laws, including potential criminal penalties,
  - Department zero tolerance stance,
  - Definitions and examples of prohibited and/or illegal behaviors that might constitute sexual misconduct,
  - Self-protection strategies,
  - Prevention and intervention,
  - Offender sexual harassment,
  - Examples of conduct, circumstances, and behaviors that may be precursors to sexual misconduct,
o Various ways sexual misconduct may be reported,
o That all allegations of sexual misconduct are taken seriously and investigated thoroughly,
o Confidentiality in cases of sexual misconduct,
o Treatment and counseling,
o Staff requirement to report allegations,
o Protection against retaliation, and
o Disciplinary actions for making false allegations.

- 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

690.400

- Offenders with disabilities will be provided reasonable accommodation that allows participation in services, programs, and activities, which may include:
  o Modifying policies, practices, or procedures, when reasonable,
  o Removing barriers to access, and/or
  o Providing auxiliary aids and services.

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 five policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 810.800 Recruitment, Selection, and Promotion
- DOC 400.320 Terrorism Activity
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 810-015 Criminal Records Disclosure and Fingerprinting
- DOC 800.005 Personnel Files

Additional supporting documentation:

- Agency contract shell for contractors
- Example contract K11279, K11280, K11281 (proof of practice of contract shell)
- Multiple examples DOC 03-502 Sexual Misconduct Disclosure (proof of practice (a) (1-3)
- Copy of WCC HR tracking log for new hires within the 12 month audit time frame
- WCC HR hire packet (random examples)
- Contract for supplemental nursing personnel to work temporarily as needed in correctional facilities throughout the state
  - K11279 Accountable Healthcare Staffing
  - K11280 Management Registry
  - K11281 Cell Staff
  - Copy of agency approved contractor list
  - WCC Contractor/Construction Worker Agreement
  - Copy of WCC staff tracking roster
Prior to on-site visit this auditor reviewed policies and supporting documentation to verify agency policy is compliant with PREA standards. This included reviewing supporting proof of practice documentation for compliance with agency policy.

On-site visit specialized interview was conducted with human resources staff member. Auditor also requested a random sampling of new hires and staff promoted within the 12 month audit time frame. Interview and review of documentation was completed which further supported compliance with this standard.

Element (e) - The designated unit/employee will establish a process to ensure that criminal background checks are run for all current volunteers, contract staff, and unarmed employees at least every 5 years.

Annual criminal background checks are required as part of weapons qualification for all armed employees per DOC 410.235 Use of Force Training and Qualifications and DOC 410.930 Community Corrections Use of Force Training.

**DOC 490.800**

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.

The Department will obtain information through one or more of the following: Washington Crime Information Center (WAGIC)/National Crime Information Center (NCIC) records checks, employment/volunteer applications, reference checks, personnel file review and contract disclosure statements.

**DOC 810.800:**

The Appointing Authority will ensure the following is conducted on the preferred Candidate before appointment: Completion of DOC 03-502 Sexual Misconduct Disclosure

To the extent possible for external candidates, including former employees/contract staff/volunteers, contact with all previous institutional employers for information on substantiated allegations of sexual misconduct or any resignation pending investigation of alleged sexual misconduct.

These candidates will be required to submit DOC 03-068 Applicant - Authorization to Release Information and DOC 03-506 Institutional Employment/Service Disclosure before any background, reference, or verification activity.

**DOC 810.015**

All applicants will be background checked before initial appointment or promotion.
The Department will provide guidance to hiring authorities consistent with RCW 9.94A.640 concerning disclosure and use of information about prior criminal convictions and subsequent incarcerations of employees, contract staff, and volunteers. Once appointed, criminal background checks will be performed at least every 5 years.

- Disclosure: All applicants, including former employees/contract staff/volunteers, will be required to complete DOC 03-031 Criminal Disclosure before being offered an initial appointment. Disclosure requirements are not limited to any time period and include: All convictions. This includes suspended and/or deferred sentences, convictions by a Juvenile Court where the applicant was 15 years of age or older at the time of the offense, and incarcerations for:
  - Felony offenses, Gross misdemeanor offenses involving violence, and any offenses involving sexual misconduct. This does not include convictions vacated by the court and removed from the official record. Current supervisory status as a result of a conviction. Whether all civil rights have been restored.

- Failure to fully divulge criminal information on the part of an individual subsequently employed, promoted, or authorized to provide services for the Department may be cause for disciplinary action, up to and including dismissal or termination of services.

- The designated unit/employee will establish a process to ensure that criminal background checks are run for all current volunteers, contract staff, and unarmed employees at least every 5 years.

**DOC 800.005**
To the extent possible, institutional employers seeking employment verification will be provided all available information on substantiated allegations of sexual misconduct or harassment. Employment verification requests from institutional employers will be directed to the Appointing Authority, who will coordinate the review and response.

**DOC 400.320**
Criminal record checks will be initiated on DOC 05-370 Request for Criminal History Record Information WASIS/NCIC III Check NCIC/WACIC Check and conducted per DOC 810.015 Criminal Record Disclosure and Fingerprinting for all new employees, contractors, and volunteers prior to assuming their duties.

**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 one policy related to and meeting compliance with this standard. Auditor was provided the policy which was reviewed for complete standard compliance. Policy is available on the agency website http://www.doc.wa.gov

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

Additional supporting documentation:
- KMB design groups, inc. p.s. WCC replace major/minor control gates and security video system design worksession#1- agenda

The Minor Control/Security video Systems Project for Washington Corrections Center (WCC) planning started in 2014 while Scott Russell was Superintendent. The Minor control project was completed in 2016. At the inception of the project KMB Design was utilized and noted in a letter to the Superintendent of WCC that they considered the requirements of PREA in the design and specification of both projects.

In planning a substantial expansion or modification of existing facilities, the Washington Department of Corrections (WADOC) hires a consultant who has expertise in the design of correctional facilities and understands the importance of inmate and staff safety. The agency provides instructions to consultants based upon the owner’s approved program and/or pre-design documents, WADOC policies, standards, guidelines and specifications, including the PREA standards, section115.18 (a).

Design decisions were made based upon man-made barriers, blind spots, locations contributing by their adjacencies and used to opportunities for sexual abuse and dark corners or other poorly lit areas in the facility. Through the course of the project PREA Compliance Manager or PREA Compliance Specialist were involved and consulted as needed to ensure compliance.

During on-site tour audit team paid close attention to cameras, placement, and observed monitoring which confirmed compliance.
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 five policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.850 Prison Rape Elimination Act (PREA) Response
- DOC 600.000 Health Services Management
- DOC 600.025 Health Care Co-Payment Program
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct

Additional supporting documentation:
- Forensic Medical Exam Procedure for DOC Health Care Staff
- Forensic Medical Exam Procedures – Transport Staff Procedures
- Sexual Assault Evidence Collection – Uniform Evidence Protocol
- PREA Response and Containment Check List (proof of practice)
- A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adelescents
- Recommendations for Administrators of Prisons, Jails, and Community Confinement Facilities for Adapting the U.S. Department of Justice’s a National Protocol for Sexual Assault Medical Forensic Examinations, adults/adolescents
- WADOC list of designated advocates and hospitals available for forensic medical exams
- WCC-SafePlace-St. Peter’s Meeting Notes
- Screen shot of OMNI for sexual assault allegations (proof of practice)
- Contract between WADOC and Department of Commerce Office of Crime Victims Advocacy (OCVA)
- Offender Sexual Assault Support and Information line pamphlet (English and Spanish)
- Sexual Assault Support and Information Line poster (English and Spanish)
- In-Person Victim Advocacy Services Guide
- Copy of a sexual abuse allegation supervisor entry log (proof of practice)
- Copy of WADOC aggravated sexual assault checklist (DOC 490.850 attachment 1) (proof of practice)
- Memo from OCVA regarding Selected Community Sexual Assault Programs for PREA Services. The services provided by Washington State Community Sexual Assault Programs (CSAPs) meet the PREA Standards for victim advocacy from a rape crisis center (115.21(d) and 115.53).
  - OCVA PREA advocate qualifications

WADOC provided the auditor with a list of designated advocates and hospitals who have sexual assault nurse examiners. In the event of a sexual assault, sexual abuse report, the victim would be taken to a local hospital and a victim advocate would be contacted to meet the victim resident at the hospital. Local Law Enforcement would also be contacted to conduct the criminal investigation which would include evidence collection.

During on-site tour audit team observed posters in areas to include but not limited to: Offender housing units, program/work areas and infirmary. Specialized and random interviews with staff and inmates confirmed compliance with this standard.

December 12, 2017 auditor contacted the community sexual assault program for WCC SafePlace and was able to conduct a phone interview with the on-call advocate. Advocate confirmed offenders are allowed to call for advocacy and she has received multiple calls. Offenders are provided an advocate
during the sexual assault forensic exams conducted by a certified sexual assault nurse examiner at Providence St. Peter’s Hospital. Offenders can call the hot line for ongoing victim advocacy which will continue when an offender releases from WADOC.

Auditor reviewed interagency agreement K11494 between WADOC and Department of Commerce Office of Crime Victims Advocacy (OCVA) which was renewed July 1, 2017 and will expire June 30, 2019. Agreement clearly articulates within the scope of work that the agreement provides a comprehensive and sustainable approach for DOC compliance with federal PREA requirements, as well as provides advocacy services for offenders who are or have been sexually harassed or assaulted and responding to sexual assaults within WADOC prison and work release centers. The scope of work is outlined with the introduction, advocacy services, work plan, service component, education, consultation and technical assistance component, budget, subcontractor and compliance plane. The subcontractor is a partnership between OVCA and the Washington Coalition of Sexual Assault Programs (WCSAP).

This agreement is also applicable to and outlines requirements under 115.53

**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 three policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments from two of the three policies which are applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.850 Prison Rape Elimination Act (PREA) Response
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigations
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

Additional supporting documentation:
- WADOC Triage flow chart
- WCC sample offender complaint log (proof of practice)
- Screen shot of WADOC website public PREA page
- Memo from WCC superintendent regarding annual meeting with outside law enforcement
- Contract K8487 with Washington State Patrol (WSP)

Element (e) is not applicable as no Department of Justice component conducts investigations for WADOC.

WADOC is responsible for conducting all administrative investigations related to PREA. WADOC staff do not have law enforcement powers and are not authorized to conduct any type of criminal investigation.

Washington Administrative Code (WAC) 137-28-190 requires that all felonies be reported to law enforcement authorities. The local Sheriff’s Office or Police Department if the facility is located within city limits is the primary investigator for a crime committed within a facility. If the local agency refuses to investigate, the Washington State Patrol (WSP) could conduct a criminal investigation at the request of the facility. The WSP Crime Scene Response Unit is available to all local agencies should they request services.
WAC 139-05-240 outlines the requirements of the basic law enforcement academy and 139-05250 outlines the basic law enforcement curriculum. WAC 139-25-110 outlines the career-level certification for law enforcement and corrections personnel.

The WADOC PREA investigation process is posted on the agency external website.

During on-site specialized interview with the Superintendent and Chief investigator auditor asked about the relationship with local law enforcement and was informed that they have a great working relationship. Reviewing investigations provided supported the interviews and confirmed compliance with this standard.

490.860

- 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.

- The Department may discipline and refer for prosecution, when appropriate, individuals determined to be perpetrators of sexual misconduct. Investigations involving represented employees will be conducted per the provisions of the applicable collective bargaining agreement.

- Information related to investigations of sexual misconduct is confidential and will only be disclosed when necessary for related treatment, security, and management decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action.
  - This provision is not intended to affect the Department’s obligation to gather, review, and potentially gather, review, and potentially produce records of allegations or incidents of sexual misconduct as required per RCW 42.56.

- Terms used in this policy are defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting.

- All allegations that appear to be criminal in nature will be referred for law enforcement investigation by the Appointing Authority/designee. Referrals may be made using DOC 03-505 Law Enforcement Referral of PREA Allegation.

490.800

Meetings 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.
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 one policy related to and meeting compliance with this standard. Auditor was provided the policy which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website [http://www.doc.wa.gov](http://www.doc.wa.gov).

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

**Additional supporting documentation:**

- WCC staff tracking log (proof of practice)
- Copy of memo to staff needing to complete annual refresher
- Copy of agency E-learning staff training

WADOC uses an electronic on-line venue, Learning Management System (LMS) for selected training courses. The LMS is used by all WADOC employees who must complete and pass PREA training with a 100%. WADOC policy requires all staff to complete PREA training annually which exceeds the standard, however WCC had a small amount of staff that did not complete annual training within the agency fiscal year (July 1 – June 30).
(b) Initial and annual PREA training curriculum includes information applicable to both male and female offenders. This training is provided to all agency employees, contract staff and volunteers. As such, WADOC exceeds this element.

WCC meets this standard as a substantial amount of staff had completed LMS PREA training within required time frames.

WCC would have exceeded this standard per policy to complete PREA training annually. However, it had been identified that some staff had not completed the training within the required training cycle. The staff that had not completed training per agency policy requirements were notified by WADOC Training Department. Staff were given a memo of concern requiring that they complete the training prior to October 10, 2017.

- December 16, 2017 auditor emailed WCC for update on staff identified as receiving a memo of concern to confirm training had been completed with the exception of staff that are on FMLA or military leave.
- December 22, 2017 auditor received email with attached memo confirming staff who received a memo of concern had completed PREA training prior to on-site audit.

On-site random and specialized interviews with staff were completed confirming compliance with agency policy and this standard.

**DOC 490.800**

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.

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.

- Training will address, but will not be limited to, the following:
  - Reviewing this policy and related operational memorandums, the Prison Rape Elimination Act of 2003, RCW 9A.44.160, RCW 9A.44.170, RCW 72.09.225, and potential criminal penalties and disciplinary consequences for engaging in prohibited activities.
  - 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 nonconforming 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.

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 three policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 530.100 Volunteer Program
- DOC 700.400 Class IV Off-Site Work Crew

Additional supporting documentation:
- Agency contract shell (proof of practice)
- Agency roster of volunteers and contractors with dates PREA acknowledgment form signed and date PREA LMS training completed (proof of practice)
- Copy of WCC Contractor / Construction Worker Agreement
- WADOC staff PREA pamphlet
- Example contractor PREA Acknowledgment form (proof of practice)

WADOC agency policy requires all contract staff and volunteers to complete PREA training annually which exceeds the standard, however WCC had a small amount of volunteers that did not complete annual training within the agency fiscal year (July 1 – June 30).

WCC meets standards as a substantial amount of volunteers had completed LMS PREA training within required time frames and those who had not completed training received notification and instructed to complete. The volunteers who had not completed did so prior to on-site audit. One of the volunteers did not complete the required training and had their badge pulled and are no longer authorized to volunteer at WCC.

On-site targeted interviews with contract staff and volunteers was completed and confirmed compliance with this standard. Those who were interviewed knew how to report allegations to include their responsibility as a first responder.

490.800
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.

- Training will address, but will not be limited to, the following:
  - Reviewing this policy and related operational memorandums, the Prison Rape Elimination Act of 2003, RCW 9A.44.160, RCW 9A.44.170, RCW 72.09.225, and
potential criminal penalties and disciplinary consequences for engaging in prohibited activities.

- 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 nonconforming 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.

530.100

All applicants must complete DOC 03-440 Volunteer Application and Registration, with the exception of occasional individual or group service volunteers, who will be processed as facility guests per DOC 150.150 Visits and Tours of Department Facilities and Offices.

- Before having contact with offenders, occasional individual or group service volunteers must complete DOC 03-478 PREA Acknowledgment Prior to Training.

700.400

Non-Department Staff Training

- Approved contract agency staff will receive initial and annual training that includes, at a minimum:
  - Prison Rape Elimination Act (PREA) training, which must be completed before having any contact with offenders.

**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 two policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 310.000 Orientation For Offenders

Additional supporting documentation:
- WADOC Statewide Offender Orientation Handbook
- WADOC PREA offender pamphlet in English and Spanish
- Example of WCC Offender tracking roster (proof of practice)
- Sample screen shots of OMNI chrono (proof of practice)
- WADOC PREA offender handbook for cognitively impaired offenders
- Transcript for WADOC PREA orientation video (English and Spanish)
- Example of WCC offender tracking roster of those requiring (Spanish orientation) (proof of practice)
- PREA posters English and Spanish

On-site random and specialized interviews with offenders confirmed compliance with this standard. Offenders reported that they had received the information upon arrival and were provided a brochure and watch the PREA video during the orientation process. Some of the offenders who have been incarcerated for a while or returned to WADOC stated that they get tired of watching the video and tune it out due to the amount of times they have to see it when they transfer. Interviews with inmates who are LEP and have disabilities reported that they receive the information that they understand.

All offenders who arrive at Washington Corrections Center receive a PREA Brochure upon intake to their unit which informs them how to report any incidents or suspicions of sexual abuse or sexual
harassment. A PREA housing/screening chrono is made noting that the offender informed about the zero tolerance policy regarding sexual abuse and sexual harassment and that they received the brochure.

Offenders who enter Washington Corrections Center (WCC) are scheduled to have orientation within 30 days — orientation is held daily in the Reception and Diagnostic Center (RDC).

Offenders who have been identified as being limited English proficient (LEP), deaf/hard of hearing, blind/limited sight or other disability these offenders are scheduled for an orientation that meets their needs. WCC has a Limited English Coordinator and ADA Coordinator who will meet with the offender to provide inmate education in format applicable to them.

490.800
PREA Information for Offenders

Offenders will be provided PREA related information, which will include information on the Department’s zero tolerance stance and ways to report sexual misconduct. Information will be presented in a manner allowing offenders to ask questions of the staff member facilitating the orientation.

If an orientation video is presented in-transit, offenders will be provided an opportunity to ask questions of the facilitator during onsite facility orientation. The need to provide targeted orientation will be determined on a case-by-case basis, taking into consideration:

- Reading comprehension levels,
- Mental health input/evaluation,
- Cognitive abilities,
- Interactions with staff, and/or
- Language barriers other than Spanish.

Prisons:
During intake at any Prison, offenders will be given an informational brochure provided by the PREA Coordinator.

Offenders will be provided additional PREA information during formal orientation at any Prison, or per local procedures for offenders arriving directly to restrictive housing or the infirmary. This information will be communicated in writing and verbally, using either the video or the script approved by the PREA Coordinator, in a manner that is clearly understood by offenders.

DOC 310.000
Prison Orientation:
All offenders arriving at or transferred to a Prison will receive:

- A facility specific orientation packet on the date of arrival, and
- An orientation to the new facility within one week of arrival, except when medical, mental health, or behavioral issues preclude completion of this process.

Offenders will receive orientation information, both orally and in writing, in a manner that is clearly understood by offenders. The orientation will, at a minimum, include:
- Information on educational, religious, work, recreation, health care, grievance and other facility programs.
- Facility rules and regulations.
- Processes for communicating with all levels of staff.
- Information on any sustainability efforts within the Department and how offenders can participate.
- Information on the Prison Rape Elimination Act (PREA), including:
  - DOC 490.800 Prevention and Reporting of Sexual Misconduct, DOC 490.850 Response to and Investigation of Sexual Misconduct, related operational memorandums, the Prison Rape Elimination Act of 2003, and other applicable state or federal laws, including potential criminal penalties,
- Department zero tolerance stance,

**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 three policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation
- DOC 880.100 Corrections Training and Development

Additional supporting documentation:

- Copy of PREA Workplace Investigation Training Participants
- Investigator training curriculum
- Student training manual
- PREA Investigation booster training

Prior to on-site visit this auditor reviewed the investigator training curriculum and supporting documentation to include agency policy. Specialized interview with investigator confirmed he had received the training to include refresher training.

WADOC is responsible for conducting all administrative investigations related to PREA. WADOC staff does not have law enforcement powers and are not authorized to conduct any type of criminal investigation.

Washington Administrative Code (WAC) 137-28-190 requires that all felonies be reported to law enforcement authorities. The local Sheriff’s Office or Police Department if the facility is located within city limits is the primary investigator for a crime committed within a facility. If the local agency refuses to investigate, the Washington State Patrol (WSP) could conduct a criminal investigation at
the request of the facility. The WSP Crime Scene Response Unit is available to all local agencies should they request services.

WAC 139-05-240 outlines the requirements of the basic law enforcement academy and 139-05250 outlines the basic law enforcement curriculum. WAC 139-25-110 outlines the career-level certification for law enforcement and corrections personnel.

**DOC 490.800**

**PREA investigators will be trained in**
- Crime scene management/investigation, including evidence collection in Prisons and Work Releases,
- Confidentiality of all investigation information,
- Miranda and Garrity warnings, compelled interviews, and the law enforcement referral process,
- Crisis intervention,
- Investigating sexual misconduct,
- Techniques for interviewing sexual misconduct victims, and
- Criteria and evidence required to substantiate administrative action or prosecution referral.
- 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,
  - Establish points of contact and agree upon investigatory update procedures

**DOC 490.860**

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

**DOC 880.100**

Staff Training and Tracking Information System (STATIS) will be used to document all official Department training.

**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 three policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 610.025 Health Services Management of Offenders In Cases of Alleged Sexual Misconduct
- DOC 880.100 Corrections Training and Development
Additional supporting documentation:
- WADOC PREA Health Services curriculum: Training for the Medical Management of PREA Cases
- WCC medical/mental health staff training tracking form

(b) is not applicable as offenders are transported to an outside medical facility to have a sexual assault nurse examiner conduct the forensic exam.

Prior to on-site visit this auditor reviewed DOC PREA specialized training curriculum for medical and mental health staff.

On-site specialized interviews with medical and mental health staff was completed with staff. During interviews staff confirmed that they have taken specialized training. Additionally, these staff confirmed they complete annual staff training in compliance with 115.31.

490.800
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.

610.025
Any offender in partial or total confinement alleging sexual assault, sexual abuse, and/or staff sexual misconduct will be referred to a health care provider to evaluate any injury and provide treatment and follow-up care. The offender will be offered medical and mental health treatment services that are clinically indicated based upon the evaluation. All forensic medical examinations will be provided at a health care facility in the community.

880.100
Staff Training and Tracking Information System (STATIS) will be used to document all official Department training.

**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 five policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 280.310 Information Technology Security
- DOC 280.515 Electronic Data Classification
- DOC 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:

- PREA Risk Assessment (PRA) offender tracking log
- The PREA Risk Assessment System OMNI screen shot
- WADOC OMNI PREA Risk Assessment Assessor & Reviewer User’s guide
- WADOC PREA Risk Assessment DOC 07-019 form

WADOC agency policy meets compliance with this standard, however it was determined WCC was not meeting compliance with this standard and agency policy.

This standard had been identified by WCC as not meeting requirements while preparing for this audit. The Superintendent took action and sent a memo September, 2017 advising staff of new procedure effective October 1, 2017. Auditor placed §115.41, §115.42 into corrective action as there was not sufficient time to provide proof of practice to ensure continued compliance.

During on-site visit and in conducting interviews with offenders and specialized interviews with staff confirmed the assessments completed. While there was verbal confirmation that these were being completed the tracking log reflected they were still not meeting time frames. Auditor was concerned
that the offenders who were identified as a “transfer” were not receiving at a minimum the initial assessment. Some of these offenders were remaining at WCC after 72hrs and currently there are no exceptions in the standards and FAQ’s. While these offenders are transferring between facilities and assessments have been completed some information may have changed.

- **PRC FAQ 10/26/15:** In order to comply with standard 115.41(a) & (b), are there any circumstances when an inmate might be held at a facility for a short period of time, but longer than 72-hours, or transferred to another facility within the same agency after spending a short period of time at the first facility, and a PREA screening or re-screening would not be required?
  - No. An initial PREA screening must be conducted during all intake screenings, which should ordinarily occur within 72 hours, and upon transfer to another facility. However, according to the preamble of the PREA standards Notice of Final Rule, a facility “is free to rely on information previously gathered with regard to a returning inmate” if the facility ensures “that its assessment captures any changes in risk factors that may have occurred subsequent to the facility’s prior gathering of information regarding that inmate.” See Vol. 77, Federal Register, No. 119, p. 37150.

490.800

Information related to allegations/incidents of sexual misconduct is confidential and will only be disclosed when necessary for related treatment, investigation, and other security and management decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action.

490.820

Intake Assessments

Classification Counselors and designated Work Release employees will complete a PREA Risk Assessment within 72 hours of arrival for all offenders arriving at any Department facility. Facilities will establish procedures to ensure completion within 72 hours, even on weekends and holidays.

- Facilities will take into account all available information (e.g., previous PREA Risk Assessments, medical/mental health assessment information).

For transfers, transport employees will review the transfer manifest before finalizing to minimize PREA-related issues before, during, or immediately after transport.

- The receiving facility will prescreen each offender on the transfer manifest for PREA-related risk issues per DOC 300.380 Classification and Custody Facility Plan Review.
- If an assessment was not previously completed, it will be completed before placement in a housing unit.

Follow-Up Assessments

- A follow-up assessment will be completed between 21 and 30 calendar days after the offender’s arrival at the facility.

490.860

All PREA data containing personal identifying information will be maintained as Category 4 data per DOC 280.515 Electronic Data Classification.

280.310
Department Information Technology (IT) resources are Department property, and the Department is obligated to protect them. The Department will take physical and technical precautions to prevent misuse, unauthorized use, and accidental damage to IT resources, including equipment and data. IT use and access must follow state law, regulations, and Department policies and IT Security Standards.

280.515

Data Classification and Handling: Electronic data will be classified into 4 groups per the Data Classification Standards:

Category 4 Data: Restricted Information - Data containing information that may endanger the health or safety of others or that has especially strict handling requirements by law, statute, or regulation.
- Staff must receive authorization from the data owner prior to accessing Category 4 data.
- Category 4 data requires Appointing Authority approval and a data sharing agreement approved through the Contracts Office to be released outside the Department, except for public disclosure or discovery/litigation hold requests or as covered in other Department policy.

Electronic data will be stored and transmitted consistent with their classification per the Data Classification Standards unless a more restrictive data sharing agreement is in place.

**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 two policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 300.380 Classification and Custody Facility Plan Review
- DOC 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments

Additional supporting documentation:
- PREA Risk Assessment (PRA) for Housing assignment staff curriculum training
- The PREA Risk Assessment System OMNI chrono screen shot
- OMNI job screening screen shot
- Example of Transgender tracking form
- WADOC Protocol for the housing of Transgender and Intersex offenders DOC 02-384 form

WADOC agency policy meets compliance with this standard, however it was determined WCC was not meeting compliance with this standard and agency policy.

Standard 115.41 had been identified by WCC as not meeting requirements while preparing for this audit. The Superintendent took action and sent a memo September, 2017 advising staff of new procedure effective October 1, 2017. With 115.41 not being compliant by default this standard is not compliant and placed into corrective action.

Auditor was concerned that the offenders who were identified as a “transfer” were not receiving at a minimum the initial assessment. Some of these offenders were remaining at WCC after 72hrs and currently there are no exceptions in the standards and FAQ’s. While these offenders are transferring between facilities and assessments have been completed some information may have changed.

- PRC FAQ 10/26/15: In order to comply with standard 115.41(a) & (b), are there any circumstances when an inmate might be held at a facility for a short period of time, but longer than 72-hours, or transferred to another facility within the same agency after spending a short period of time at the first facility, and a PREA screening or re-screening would not be required?
o No. An initial PREA screening must be conducted during all intake screenings, which should ordinarily occur within 72 hours, and upon transfer to another facility. However, according to the preamble of the PREA standards Notice of Final Rule, a facility “is free to rely on information previously gathered with regard to a returning inmate” if the facility ensures “that its assessment captures any changes in risk factors that may have occurred subsequent to the facility’s prior gathering of information regarding that inmate.” See Vol. 77, Federal Register, No. 119, p. 37150.

**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 three policies related to and meeting compliance with this standard. Policies were reviewed pre and post on-site audit for complete standard compliance. This auditor included sections/segments from two of the three policies referenced below. The sections referenced are applicable in part to this standard and is noted in the comment section.

- DOC 320.255 Restrictive Housing
- DOC 320.260 Secured Housing Units
- DOC 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments

Additional supporting documentation:

- Screen shot log of potential victims

Agency policies meets requirements for compliance with this standard. WCC has not house offenders in segregation due to their status as potential victim. Auditor also noted in the narrative of day three on-site visit that no offenders were housed in segregation.
In Prisons, this separation may include placement in Administrative Segregation. Placement in Administrative Segregation for more than 24 hours should only occur if no suitable alternative housing exists and will last only until alternative placement can be made. Each alternative considered, along with 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.

Offenders assigned to Restrictive Housing will be provided the following COCs, unless safety or security considerations dictate otherwise. If any of these conditions are refused or not provided, it will be documented on DOC 05-091 Daily Report of Segregated Offender.

- Religious guidance,
- Education,
- Self-help programs,
- Library and Law Library
- Grievance Program, and
- Offender Policy and Operational Memorandum Manuals

Offenders assigned to Restrictive Housing will have access to medical, dental, and mental health services.

### 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 three policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- **DOC 450.100 Mail for Prison Offenders**
• DOC 490.800 Rape Elimination Act (PREA) Prevention and Reporting
• DOC 490.850 Prison Rape Elimination Act (PREA) Response

Additional supporting documentation:
• WAC 137-48-020 Definitions
• Copy of WADOC Policer Terms and Definitions
• WADOC Statewide Offender Orientation Handbook
• Offender pamphlets (English and Spanish)
• State of Washington DOC Intergovernmental agreement with State of Colorado DOC contract CMS 65853
• WADOC PREA offender pamphlet (English and Spanish)
• Example of allegations received by Colorado DOC about WADOC
• Screen shot of WCC PREA allegation log
• WADOC staff PREA pamphlet
• Copy of E-Learning curriculum

July 13, 2017 this auditor reviewed WADOC website http://www.doc.wa.gov/corrections/prea/resources.htm and viewed all policy and standard required reporting information to be posted on the agency website. This auditor also contacted the reporting PREA hotline listed on posters to test and the call was answered and sent an email to the DOC web reporting address, receiving a response to my test the same day.

During on-site visit audit team viewed PREA posters which contained phone numbers and reporting contact information in English and Spanish. Auditor team also looked for the Colorado outside agency reporting forms which were located in all housing areas and infirmary. During on-site tour audit team conducted impromptu/informal interviews with offenders and confirmed they had received this information and knew how to report. Random and specialized interviews conducted during day three of on-site audit confirmed compliance with this standard.

DOC 490.800

Offenders, visitors, offender family members/associates, and other community members can report: Allegations of sexual misconduct, retaliation by offenders or staff for reporting sexual misconduct, and/or staff actions or neglect that may have contributed to an incident of sexual misconduct.

Offenders may report PREA allegations in the following ways. Reporters may remain anonymous:
• Through the confidential PREA hotline at 800-586-9431, or at 844-2421201 for teletypewriter (TTY).
• The toll-free number will be posted on or near all offender telephones in Prisons and Work Releases and in the lobby/offender reception area in all Field Offices. Telephones will be accessible to Prison/Work Release offenders only during their free time hours.
• The facility/office will not record or monitor calls to the hotline.
• An IPIN will not be required to place a call to the hotline. Headquarters will record and monitor all calls to the hotline. Messages will be checked by Headquarters personnel each regular workday.
• Verbally to any staff.
• In writing, through the following processes:
  • Offender kites.
• Written notes or letters to staff.
• Legal mail addressed to the State Attorney General, the Office of the Governor, law enforcement, and/or the PREA Coordinator, per DOC 450.100 Mail for Prison Offenders or DOC 450.100

Legal Mail: Offenders have the ability to correspond by means of legal mail. Legal mail must meet all of the following requirements and is subject to inspection to ensure the contents qualify as legal mail:

Legal mail must be correspondence to or from, as indicated in the mailing address or return address on the front of the envelope:

Any court or opposing counsel/party, the Washington State Bar Association, the Indeterminate Sentence Review Board (ISRB), the Washington State Department of Enterprise Services’ Office of Risk Management, Prison Rape Elimination Act (PREA) auditors certified by the United States Department of Justice, and/or the PREA Coordinator at Headquarters.

490.850

Staff must immediately report any knowledge, suspicion, or information received, including anonymous and third party reports, regarding an allegation or incident of sexual misconduct. This also includes related retaliation and knowledge of staff actions or neglect that may have contributed to an incident.

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

**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 two policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.
DOC 490.800 Rape Elimination Act (PREA) Prevention and Reporting
DOC 550.100 Offender Grievance Program

Additional supporting documentation:

- WCC offender compliant log
- Examples of Offender Compliant DOC 05-165 and response memo to offenders

WADOC does not process PREA-related allegations through the offender grievance program. Complaints and grievances alleging any form of sexual assault, sexual abuse, sexual harassment and/or employee sexual misconduct are immediately process in accordance with DOC policy 490.800.

This policy allows PREA allegations received through the grievance process to be handled with the same level as allegations received in any other manner.

Additionally, there are no time limits within which an offender may submit a PREA-related allegation through the grievance process. Removing PREA allegations from the established grievance process, the submission of a formal grievance would not be a prerequisite for an offender to file related litigation.

DOC 550.0100

Grievances alleging sexual misconduct will be forwarded to the PREA Coordinator per DOC 490.800 Prevention and Reporting of Sexual Misconduct and will not be reviewed through the grievance process.

DOC 490.800

Offenders may report PREA allegations in the following ways.

Offender grievances, including emergency offender grievances, per DOC 550.100 Offender Grievance Program and the Offender Grievance Program Manual.

- Copies of grievances alleging sexual misconduct will be forwarded immediately to the applicable authority per the PREA Reporting Process 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 one policy related to and meeting compliance with this standard. Policy, agency website and supporting documents were reviewed pre-on-site visit for complete standard compliance.

- DOC 490.800 Rape Elimination Act (PREA) Prevention and Reporting

Additional supporting documentation:
- Offender orientation video
- Community Sexual Assault Programs in Washington State brochure
- OCVA posters and brochures (English and Spanish)
- Memo from Assistant Secretary to all prison staff on PREA advocacy
- In-Person Victim Advocacy Services Guide
• Memo from PREA coordinator explaining The Revised Code of Washington (RCW) 5.60.060 regarding confidentiality standards for community victim advocates.
• Flyer regarding advocates’ communications with survivors, and any client records maintained by Community Sexual Assault Programs (CSAPs)

December 12, 2017 auditor contacted the community sexual assault program for WCC Safeplace and was able to conduct a phone interview with the on-call advocate. Advocate confirmed offenders are allowed to call for advocacy and she has received multiple calls. Offenders are provided an advocate during the sexual assault forensic exams conducted by a certified sexual assault nurse examiner at Providence St. Peter’s Hospital. Offenders can call the hot line for ongoing victim advocacy which will be continued should the offender choose when released from WADOC.

**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 one policy related to and meeting compliance with this standard. Policy, agency website and supporting documents were reviewed pre on-site visit for complete standard compliance.

- DOC 490.800 Rape Elimination Act (PREA) Prevention and Reporting

Additional supporting documentation:

- Screen shot of WADOC public website PREA page
- PREA poster (English and Spanish)

Impromptu and formal interviews conducted during on-site visit with offenders and staff were conducted supporting compliance with this standard.
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 person’s 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 three policies related to and meeting compliance with this standard. Auditor was provided the policies and supporting documentation which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.800 Rape Elimination Act (PREA) Prevention and Reporting
- DOC 490.850 Rape Elimination Act (PREA) Response
- DOC 350.550 Reporting Abuse and Neglect/Mandatory Reporting

Additional supporting documentation:
- Staff PREA reporting poster
- Staff PREA brochures
- WADOC Statewide Offender Orientation Handbook
- Offender PREA poster for medical areas
- RCW 74.34.020 Definitions
- Interagency Agreement (K10912) between WADOC and WA Department of Social and Health Services (DSHS) / Adult Protective Services (APS)
- Example of vulnerable adult log
- Example screen shot of OMNI WCC incident report
- Example of WCC complaint report log
- Example of PREA hotline report

During on-site visit impromptu, random and specialized interviews were completed with staff which supported proof of practice. In addition, while audit team was conducting interviews with offenders they had received allegations from some of the offenders. Audit team member receiving report, immediate notified WCC escort who then contact custody supervisor. Audit team members were required to submit a report. November 30, 2017 agency PREA coordinator sent an email to this auditor with the incident report numbers, incident reports and information regarding action taken. Of the four incidents reported, one was a prior incident which the inmate had reported and investigation completed. The other three initiated investigations two were closed prior to final report and one was still an open investigation.

The response by WCC during the on-site audit when receiving auditor reports supported the agency policy which further supported full compliance with this standard.

**DOC 490.850**
Staff must immediately report any knowledge, suspicion, or information received, including anonymous and third party reports, regarding an allegation or incident of sexual misconduct. This also includes related retaliation and knowledge of staff actions or neglect that may have contributed to an incident. Information related to allegations/incidents of sexual misconduct is confidential and will only be disclosed when necessary for related treatment, investigation, and other security and management decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action.

When an offender displays signs of sexual misconduct or discloses to a medical or mental health provider sexual misconduct that occurred while in any correctional setting, the provider must inform the offender of the provider’s duty to report before providing treatment. Offenders will also be informed of this requirement at Reception, and information will be posted in Health Services areas where it can be viewed by offenders.

The Appointing Authority/designee will ensure that notification is made to:

- Child Protective Services (CPS), if the alleged incident occurred in any correctional setting and the alleged victim is/was under the age of 18 at the time.
- Adult Protective Services (APS), if the alleged victim is classified as a vulnerable adult.

**DOC 350.550**

The Department will report suspected child abuse/neglect and incidents of abuse, abandonment, financial exploitation, or neglect involving vulnerable adults to the appropriate authority. Information regarding abuse and neglect will be immediately reported to the appropriate authority, as follows: Any employee, contract staff, or volunteer who has reasonable cause to believe, based on observations made or information received in the course of his/her duties, that a child has suffered abuse and/or neglect, vulnerable adult has suffered abuse, abandonment, financial exploitation, and/or neglect.

Reports involving a child victim will be made to:

- Child Protective Services (CPS) at 1-866-363-4276 or per the Department of Social and Health Services (DSHS) website, or the law enforcement agency with jurisdiction where the abuse/neglect is believed to have occurred.
- Reports of sexual or physical assault involving a vulnerable adult victim, or an act that has caused a vulnerable adult victim fear of imminent harm, will be made to the law enforcement agency with jurisdiction where the act is believed to have occurred.
- All other reports involving a vulnerable adult victim will be made to Adult Protective Services (APS) at 1-866-363-4276 or per the Department of Social and Health Services (DSHS) website.

**DOC 490.800**

Staff will report all allegations, related retaliation, and knowledge of related staff actions or neglect that may have contributed to an incident per DOC 490.850 Prison Rape Elimination Act (PREA) Response.

**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 two policies related to and meeting compliance with this standard. Auditor was provided the policies and supporting documentation which were reviewed pre and post on-site audit for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.820 Rape Elimination Act (PREA) Risk Assessments and Assignments
- DOC 490.850 Prison Rape Elimination Act (PREA) Response

Additional supporting documentation:

- WCC screen shot of potential victim housing
- Screen shot of OMNI chrono
- Example of OMNI incident report

On-site specialized and random staff interviews were completed and supported compliance with agency policy and this standard.

**DOC 490.820**

Classification Counselors/CCOs will develop a monitoring plan for:

- Offenders at increased risk for sexual victimization or predation.
- Transgender and intersex offenders.

Immediate actions will be taken to protect the offender when it has been determined that s/he is at substantial risk of immediate sexual assault or abuse.

Elements to consider in the monitoring plan include:

- Increased Classification Counselor/CCO initiated contact with the offender (e.g., checking in with the offender).
- Increased offender reporting to employees (e.g., checking in with custody officer, assigned Classification Counselor/CCO).
- Notification of screening results to a unit employee with a note to monitor the offender for changes in baseline behavior (e.g., cell change requests, giving/receiving store, depression,
avoidance) and referral to mental health using DOC 13-509 PREA Mental Health Notification if changes occur.

- Instructing the offender to immediately report any sexually motivated interactions by other offenders.
- Encouraging the offender to maintain scheduled meetings with mental health providers, if applicable.
- Addressing any contact made between the perpetrator and the victim in cases of substantiated staff sexual misconduct.
- Other items that correlate with any of the specific information contained in the assessment.

Classification Counselors and CCOs will document the monitoring plan in a PREA Monitoring chrono entry in the offender’s electronic file.

The monitoring plan will be reviewed during routine Facility Risk Management Team (FRMT) meetings and documented in a PREA Monitoring chrono entry.

**DOC 490.850**

Appointing Authority Response

Offender-on-Offender Sexual Misconduct:

- Upon receipt of an allegation of offender-on-offender sexual assault, the Appointing Authority/Shift Commander/CCS will immediately direct employees/contract staff to separate the accused from the alleged victim and witnesses.
  
  - In Prisons, the accused may be placed in restrictive housing per DOC 320.200 Administrative Segregation or DOC 320.260 Secured Housing Units in Stand Alone Minimum Security Facilities.
    - Placement decisions will be based on the seriousness of the allegation. Least restrictive housing options should be considered before placement in restrictive housing.
  
  - In Work Releases, the accused may be transferred to a Prison.

- Upon receipt of an allegation of offender-on-offender sexual abuse or sexual harassment, the Appointing Authority/Shift Commander/CCS will take necessary actions to protect the alleged victim and will consider:
  
  - The nature of the allegation,
  - The expressed mental health needs of the alleged victim, and
  - Staff observations of the alleged victim’s behavior or demeanor.

Staff Sexual Misconduct

- Upon receipt of an allegation of staff sexual misconduct, the Appointing Authority/designee will direct that one-on-one contact between the accused and the alleged victim is prohibited while the allegation is investigated. The Appointing Authority may temporarily reassign and/or restrict/modify the job duties of the accused during the investigation. If the accused is a contract staff or volunteer, the Appointing Authority may restrict his/her entry into the facility while the allegation is investigated.
  
  - The Appointing Authority/designee will attempt to minimize any disturbance to the alleged victim’s housing location, program activities, and/or supervision during the investigation.
In Prisons, an alleged victim will be placed in Administrative Segregation/Secured Housing per DOC 320.200 Administrative Segregation or DOC 320.260 Secured Housing Units in Stand Alone Minimum Security Facilities only:
- At his/her documented request
- If the Appointing Authority/designee has specific information that the alleged victim may be a danger to him/herself or in danger from other offenders.
  - The placement should only be made when no suitable alternative housing exists and last only as long as necessary for the offender’s protection.

**Standard 115.63: 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 two policies related to and meeting compliance with this standard. Auditor was provided the policies and supporting documentation which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.
• DOC 490.860 Rape Elimination Act (PREA) Investigations
• DOC 490.850 Prison Rape Elimination Act (PREA) Response

Additional supporting documentation:
• Copy of reporting log to other facilities or agencies
• Copy of email reporting to other agency (proof of practice)
• Copy of WCC reported or received notifications

On-site specialized interview with the Superintendent was conducted on Tuesday, November 14, 2017. The interview further supported policy and the supporting documentation that this auditor reviewed prior to on-site visit.

**DOC 490.850**

The Appointing Authority will notify the appropriate Appointing Authority or facility administrator within 72 hours of receipt of an allegation when the alleged incident:
- Occurred in another Department location or another jurisdiction.
- Involved a staff who reports through another Appointing Authority.

**DOC 490.860**

The Department will thoroughly, promptly, and objectively investigate all allegations of sexual misconduct involving offenders under the jurisdiction or authority of the Department.

**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 two policies related to and meeting compliance with this standard. Auditor was provided the policies and supporting documentation which were reviewed for complete standard compliance. This auditor included some sections/segments from one of the two DOC policies provided which is applicable in part to this standard.

- DOC 420.375 Contraband and Evidence Handling
- DOC 490.850 Prison Rape Elimination Act (PREA) Response

Additional supporting documentation:

- WADOC First Response Actions pamphlet
- Copy of WCC PREA case log during audit time frame
- Copy of investigations

On-site impromptu staff and contract staff interviews were completed during on-site tour (day one). These impromptu interviews were random questions from the DOJ random staff interview guide. Additionally formal random staff, contractor and volunteer interviews were completed which supported agency policy requirements and meeting compliance with this standard.

Prior to on-site visit this auditor reviewed incident reports/investigation provided and randomly selected 2 staff that had been a first responder (separate) incident to conduct the specialized interview with during on-site visit. Audit team member conducted specialized interview with the staff member selected in a private office to ensure confidentiality. Interviews confirmed full compliance with policy and this standard.

490.850

Staff receiving any information regarding an allegation or incident of sexual misconduct must deliver the information confidentially and immediately per the PREA Reporting Process (Attachment 3).
For all allegations except aggravated sexual assault, the Shift Commander/Community Corrections Supervisor (CCS)/designee will implement appropriate security procedures and initiate the PREA Response and Containment Checklist.

For allegations of aggravated sexual assault, the Shift Commander/CCS/designee will initiate the Aggravated Sexual Assault Checklist and the PREA Response Team will conduct a coordinated, multidisciplinary response to the allegation.

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.

Victims in all cases of reported sexual misconduct, regardless of who the misconduct is reported to, will receive immediate medical and mental health services per DOC 610.025 Medical Management of Offenders in Cases of Alleged Sexual Abuse or Assault.

**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 one policy related to and meeting compliance with this standard. Auditor was provided the policy and supporting documentation pre on-site audit. The agency policy and supporting documentation was reviewed and meets compliance with this standard. Random and specialized interviews with staff were completed further supporting compliance with this standard.

- DOC 490.850 Prison Rape Elimination Act (PREA) Response

Additional supporting documentation:

- WADOC PREA Response Plan

**DOC 490.850**
PREA Response Plan

Each Prison, Work Release, and Field Office will maintain a PREA Response Plan providing detailed instructions for responding to allegations of sexual misconduct.

The PREA Response Plan will consist of 4 sections composed of the documents listed in PREA Response Plan Contents.

The plan will be maintained by the PREA Compliance Manager/Specialist:

- In the Shift Commander’s office in each Prison.
- With the Emergency Management Plan in each Work Release and Field Office.

**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)*

Documents provided to auditor to support compliance:

- 2017-2019 The State of Washington and Teamsters Local Union 117

Contracts reviewed and meet compliance with this standard. Arbitration has no impact on the agency’s ability to remove and alleged staff abuser from contact with an offender(s) 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 who 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 residents 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 one policy related to and meeting compliance with this standard. Auditor was provided the policy and supporting proof documentation which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard.

- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:
- Copy of WCC offender compliant log (proof of practice)
- Copy of electronic 03-503 tracking log
- Copy of WADOC PREA Monthly Retaliation Monitoring Report DOC 03-503 form (proof of practice)
On-site interviews with random and specialized staff were completed using the DOJ interview guide questions. Additionally, interviews with offenders were completed to confirm that they were informed and understood retaliation protection measures. Specialized interviews with offenders who had reported PREA allegations confirmed that they understood how to report. WCC additionally will monitor the accused for possible retaliation. Auditor asked why they monitored the suspect as it was not a requirement. Explanation to auditor is understandable as incident is an open investigation. This provides protection measures to ensure there is no alleged retaliation occurring with any of the involved persons.

Reviewing policy 490.860 II Retaliation section 4.b. reflects: If a reporter or alleged victim transfers to another facility during the monitoring period, the receiving facility will assume monitoring responsibilities.

- Best practice recommendation: The policy should reference who is responsible for notification to receiving facility when an offender who is under retaliation monitoring is transferred.

### 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)*

The State of Washington Department of Corrections (WADOC) has one policy related to and meeting compliance with this standard. Auditor was provided the policy and supporting documentation which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard.

- DOC 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments

Additional supporting documentation:

- Copy of case tracking log
- Screen shot of OMNI segregation placement referral
WCC did not have offenders who were placed in segregation housing who alleged to have suffered sexual abuse during on-site audit.

**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 four policies related to and meeting compliance with this standard. Auditor reviewed the policies and supporting documentation pre and post on-site audit for complete standard compliance. This auditor included sections/segments from 3 of the four policies provided that is applicable in part to this standard.

- DOC 420.375 Contraband and Evidence Handling
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 400.360 Polygraph Testing of Offenders

Additional supporting documentation:

- Copy of investigation training log for investigators and appointing authorities
- Copy of WCC PREA cases during audit time frame
- Copy of lesson plan: Introduction to Investigations
- Copy of Appointing Authority training curriculum
- Department of Corrections Records Retention Schedule
- WADOC contract K8487 with Washington State Patrol.

Auditor reviewed supporting documentation/investigation reports and selected an investigator who completed one or more PREA investigations for specialized interview when during on-site visit. Investigator selected has worked for WADOC for over 25 years with the last 15 years assigned as an investigator. This investigator has vast knowledge of how to conduct investigations and has completed the annual PREA staff training and PREA specialized training for investigating sexual abuse allegations in confinement. WCC has a great working relationship with Mason County and communicate regularly on criminal investigations Mason County is conducted for criminal acts which were committed at WCC.

WCC investigations provided were reviewed and confirm compliance with policy and this standard.

Related to the audit team members receiving PREA reports from offenders during on-site interviews, noted in 115.61, 3 of the four allegations were assigned for investigation. One of the three had previously been reported by the offender to WADOC and had been investigated.

IMRS 17-58484: Investigation initiated 17-17214 – incident alleged to have occurred at Washington State Prison, closed unsubstantiated.
IMRS 17-58486: Investigation initiated 17-17335, closed unsubstantiated.
IMRS 17-58488: Investigation initiated 17-17325, closed unfounded.

490.800
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.

490.860

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. The Department may discipline and refer for prosecution, when appropriate, individuals determined to be perpetrators of sexual misconduct. Investigations involving represented employees will be conducted per the provisions of the applicable collective bargaining agreement.

Information related to investigations of sexual misconduct is confidential and will only be disclosed when necessary for related treatment, security, and management decisions. Staff who breach confidentiality may be subject to corrective/disciplinary action.

- This provision is not intended to affect the Department’s obligation to gather, review, and potentially produce records of allegations or incidents of sexual misconduct as required per RCW 42.56

400.360

Offenders who are alleged victims, reporters, or witnesses in Prison Rape Elimination Act (PREA) investigations will not be asked or required to submit to a polygraph examination regarding the alleged misconduct under investigation.

**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 one policy related to and meeting compliance with this standard. Auditor was provided the policy which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:
- RCW 72.09.225 Sexual misconduct by state employees, contractors.
- Copy of Appointing Authority training curriculum

Auditor was provided with investigations which were reviewed and found the investigations were complete and thorough. WADOC investigators and appointing authorities have received specialized training as referenced in 115.34 which includes but not limited to evidentiary standard of preponderance of evidence.

Memo dated December 20, 2016 from the agency coordinator clarifying WADOC investigation procedure. To ensure neutrality and consistency in the sanction application, the investigator remain separate from the finding process and the Appointing Authority determines if the allegation(s) are substantiated, unsubstantiated or unfounded based upon a preponderance of the evidence.

490.860

For each allegation in the report, the Appointing Authority will determine whether the allegation is:
- 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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 resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident 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.
The State of Washington Department of Corrections (WADOC) has one policy related to and meeting compliance with this standard. Auditor was provided the policy which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:
- Copy WCC PREA case log
- Operational Memorandum WCC 490.860 Prison Rape Elimination Act (PREA) Investigation
- WCC case closure reporting log
- Copy of criminal referral notification letter sent to victim who had transferred from WCC to another facility

Auditor was provided with full investigation files which included notification information for offenders. WCC tracking log was reviewed and supported proof of practice to this standard and the policy.

On-site specialized interviews with investigator and PREA Specialist further confirmed compliance with this standard.

Criminal investigations are conducted by law enforcement officials at either the city or county level, depending on the location of the facility. Additionally, the Washington State Patrol can be contacted to conduct or assist with a criminal investigation.

Any criminal investigation conducted by a law enforcement entity is forwarded to the Appointing Authority responsible for the investigation. The Appointing Authority, in consultation with law enforcement officials, will also ensure an administrative investigation is completed. The Appointing Authority will then determine investigation findings based on evidence, witness testimony, prior complaints and reports, and witness credibility. These findings are documented on form DOC 02-378 Investigative Finding Sheet which also documents when and how findings are provided to the alleged victim.

(d) During this audit time frame WCC did not have any instances involving an offender on offender investigation wherein the suspect had been indicted or convicted.

490.860

Once the Appointing Authority has made a determination, the alleged victim will be notified of the findings.
The Appointing Authority/designee of the facility where the offender is housed will inform the offender of the findings in person, in a confidential manner.

If the offender has been released, the Appointing Authority will inform the offender of the findings in writing to the offender’s last known address as documented in his/her electronic file.

**Investigations:**

All allegations that appear to be criminal in nature will be referred for law enforcement investigation by the Appointing Authority/designee.

Investigation reports received from law enforcement will be an attachment to the final PREA investigation report submitted.

**Ongoing Notification to Alleged Victims**

The Department will make the following notifications, in writing, to alleged victims until they are no longer under Department jurisdiction:

- **Offender-on-Offender Allegations of Sexual Assault or Abuse**
  - The alleged victim will be notified if the Department learns that the accused has been indicted on or convicted of a charge related to sexual assault or abuse within the facility.
  - The PREA Coordinator/designee will track all cases and make required notifications.
- **Substantiated/Unsubstantiated Allegations of Staff Sexual Misconduct**
  - The alleged victim will be notified:
    - When the accused staff is no longer regularly assigned to the offender’s housing unit,
    - When the accused staff no longer works at the same facility as the offender, and
    - If the Department learns that the accused staff has been indicted on or convicted of any charge related to staff sexual misconduct within the facility.
  - The Appointing Authority/designee will track all cases, make required notifications, and forward copies to the PREA Coordinator.
  - Notifications will be provided to alleged victims in a confidential manner through legal mail or by another method determined by the Appointing Authority.

### DISCIPLINE

**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 three policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 450.050 Prohibited Contact
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting

Additional supporting documentation:
- RCW 72.09.225 Sexual misconduct by state employees, contractors.
- WAC 357-40-010 Can an appointing authority take disciplinary action?
- Copy 2017-2019 Teamsters Local Union 117 collective bargaining agreement
- Copy OMNI incident report which reflects outside law enforcement was contacted
- Copy of email from WCC superintendent to licensing agency
During this audit cycle WCC had two substantiated case of staff on offender sexual misconduct. These investigation reports were provided to this auditor during the pre-audit phase. Both investigations were reviewed and found that investigation was thorough and evidence supported the appointing authority finding. Additionally, specialized interview with the investigator assigned to one of the cases was conducted during on-site visit. Both staff member resigned during the investigation process and as such no agency discipline sanctions were given.

450.050
Restriction Process for Staff Sexual Misconduct/Harassment

Presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender, except an offender who is the staff’s non-victim family member, are as follows:

- Substantiated allegations of sexual intercourse, as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting, will result in:
  - Permanent restriction on visitation, which may be appealed after 3 years.
  - 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.

- At the time the allegation is substantiated, the Appointing Authority will ensure notification is made to the mailroom, Visiting, and the Intelligence Officer to ensure the restrictions are put in place.

With Deputy Director or Work Release/Residential Administrator approval, the Appointing Authority may grant a request for an exception to the presumptive restrictions, but only when extraordinary circumstances support the request and granting the requested exception will not undermine the Department’s zero tolerance of all forms of sexual misconduct.

- Before exception or lifting of restriction will be considered, the offender must submit a signed DOC 21-067 Request for Visitation/Release, confirming s/he is freely participating in communication with the individual.
- Appointing Authorities will consult with the Deputy Secretary for possible pursuit of a no contact order between the individual and the offender.

Violation of restrictions may result in an extension of the restriction.

490.800

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 may discipline and refer for prosecution, when appropriate, individuals determined to be perpetrators of sexual misconduct. Investigations involving represented employees will be conducted per the provisions of the applicable collective bargaining agreement.

Staff Discipline: Employees may be subject to disciplinary action, up to and including termination, for violating Department PREA policies.

### 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 two policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 450.050 Prohibited Contact
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:

- RCW 72.09.225 Sexual misconduct by state employees, contractors.
WCC did not have any reported PREA allegations or investigation involving contractors or volunteers during this audit cycle. On-site interviews with volunteers and contract staff confirmed understanding of the agency policy and disciplinary actions that could be taken if they were to violate any of the agency or institution PREA policies. During the 12 month audit cycle WCC did not have any allegations reported against a volunteer or contractor.

450.050

Restriction Process for Staff Sexual Misconduct/Harassment

Presumptive restrictions for contact between an individual found to have engaged in staff sexual misconduct and any offender, except an offender who is the staff’s non-victim family member, are as follows:

- Substantiated allegations of sexual intercourse, as defined in DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting, will result in:
  - Permanent restriction on visitation, which may be appealed after 3 years.
  - 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.

- At the time the allegation is substantiated, the Appointing Authority will ensure notification is made to the mailroom, Visiting, and the Intelligence Officer to ensure the restrictions are put in place.

- With Deputy Director or Work Release/Residential Administrator approval, the Appointing Authority may grant a request for an exception to the presumptive restrictions, but only when extraordinary circumstances support the request and granting the requested exception will not undermine the Department’s zero tolerance of all forms of sexual misconduct.
  - Before exception or lifting of restriction will be considered, the offender must submit a signed DOC 21-067 Request for Visitation/Release, confirming s/he is freely participating in communication with the individual.
  - Appointing Authorities will consult with the Deputy Secretary for possible pursuit of a no contact order between the individual and the offender.

Violation of restrictions may result in an extension of the restriction.

490.860

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

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

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 three policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov

- DOC 460.000 Disciplinary Process for Prisons
- DOC 460.050 Disciplinary Sanctions
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:
- Screen shot of OMNI offender discipline screen (proof of practice)
- Chapter 137-28 WAC Prisons-Discipline
- WAC 137-28-310 Decision of hearing officer
- WAC 137-28-360 Sanction and mental status
- WAC 137-25-020 Definitions

Auditor was provided with investigations prior to on-site visit. These reports and investigations of offender on offender sexual abuse and sexual harassment allegations were reviewed.

(e) During this 12 month audit cycle WCC did not have any incidents applicable to this element.

DOC 460.000

Alleged victims are not subject to disciplinary action related to violating PREA policies except when:
- An investigation of staff sexual misconduct determines that the staff did not consent to the contact.
- The Appointing Authority determines, by a preponderance of evidence, that the offender caused an innocent person to be accused by providing false or misleading information during any stage of the investigation.
- The Appointing Authority must authorize a 549 violation before it is written and served.
- A report of sexual abuse made in good faith will not constitute providing false information, even if the investigation does not establish sufficient evidence to substantiate the allegation.

460.050

The Disciplinary Hearing Officer will determine the appropriate sanction(s) when an offender is found guilty of a serious violation.

In determining an appropriate sanction, the Disciplinary Hearing Officer may consider factors such as the offender’s facility/infraction file, prior conduct, mental status, and overall facility adjustment.
Sexual misconduct includes aggravated sexual assault, offender-on-offender sexual assault, sexual abuse, and sexual harassment. It also includes staff-on-offender sexual harassment and staff sexual misconduct.

- These terms are further defined in Prison Rape Elimination Act

### 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? ☒ Yes ☐ No

**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 four policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments
- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct
- DOC 630.500 Mental Health Services

Additional supporting documentation:

- Copy of offender tracking for those who said yes to history of sexual abuse/victimization
- WADOC PREA Mental Health Notification DOC 13-509 form (random samples)
- WADOC Health Information Management Protocols
- Screen shot of job screening for an offender

While preparing for this audit WCC identified that they were not meeting requirements with this standard when it was discovered that referrals to mental health were not being tracking correctly. A new tracking sheet was created and the Superintendent took action and sent a memo September, 2017 advising staff of new procedure effective October 1, 2017. Auditor placed §115.81 into corrective action as there was not sufficient time for WCC to provide substantial proof of practice to ensure continued compliance.

On-site specialized interviews were conducted and confirmed staff were conducting interviews when referrals were submitted to them and would continue will mental health treatment plans is required.

(c) This element is not applicable as it is related to Jail inmates.

490.820

Prison Mental Health Services

- At the time the PREA Risk Assessment is completed, Classification Counselors will complete referrals for mental health services using DOC 13-509 PREA Mental Health Notification if the
screening indicates that the offender has perpetrated sexual abuse and/or has experienced prior sexual victimization, whether in an institutional setting or in the community.

- The referring employee will ask the offender if s/he wishes to meet with a mental health provider as a result of the assessment information and will document the offender’s response on the DOC 13-509 PREA Mental Health Notification.

630.500
Routine Mental Health Services
- Assessment
  o A mental health employee/contract staff will complete a mental health appraisal per DOC 610.040 Health Screenings, Appraisals, and Status within 14 days of screening for offenders identified as needing mental health services.
  o In order for an offender to qualify for outpatient mental health services or admission to a Residential Treatment Unit, DOC 13-376 Mental Health Appraisal must be completed and the offender must have a qualifying condition as defined by the Offender Health Plan.

610.025
Medical and mental health practitioners will obtain informed consent before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18.

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 four policies related to and meeting compliance with this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website [http://www.doc.wa.gov](http://www.doc.wa.gov)

- DOC 490.850 Prison Rape Elimination Act (PREA) Response
  - Best practice recommendation - Rap House and Lincoln Park need to be removed from this policy as they have closed these sites.
    ▪ 6/13/18 auditor received email notification and copy of revised 490.850 removing Rap House and Lincoln Park
- DOC 610.025 Medical Management of Offenders in Cases of Alleged Sexual Abuse or Assault
- DOC 600.000 Health Services Management
- DOC 600.025 Health Care Co-Payment Program

Additional supporting documentation:
- Examples of OMNI incident reports
- Screen shot of OMNI Health Services
- WADOC PREA Mental Health Notification DOC 13-509 supporting OMNI screen shot

On-site specialized and random staff interviews were conducted confirming compliance with the standard and agency policies. Medical and mental health staff have completed specialized training and offenders received timely and unimpeded access to emergency medical treatment and crisis intervention.

490.850

Each Prison will establish a local PREA Response Team. One team will be established for Work Release, and one team will be established for community supervision.

- Each Prison PREA Response Team will include:
  - A Sergeant
  - The Chief Investigator/designee
  - A designated medical employee/contract staff
  - A designated mental health employee/contract staff
Other staff as necessary, which will be designated by the Superintendent and may include:

- Correctional Unit Supervisors
- Counselors
- Chaplain
- The PREA Compliance Manager/Specialist
- Response and Movement officers
- Facility Duty Officers

Employees/contract staff designated to participate on a PREA Response Team will complete facility specific training on responding to aggravated sexual assault which will include, but not be limited to:

- Requirements of this policy and the PREA Response Plan
- Issues of offender sexual assault victims
- Gender responsive issues related to PREA response
- Evidence collection and retention
- Interactions with law enforcement

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.

Victims in all cases of reported sexual misconduct, regardless of who the misconduct is reported to, will receive immediate medical and mental health services per DOC 610.025 Medical Management of Offenders in Cases of Alleged Sexual Abuse or Assault.

Offenders alleging sexual acts perpetrated by either staff or another offender that occurred within the previous 120 hours and involve penetration or exchange of body fluids will be assessed for immediate medical needs before transport to the designated community health care facility for a forensic medical examination.

Offenders will also be referred for medical evaluation if a report of sexual assault is made within 12 months of the alleged incident.

For all allegations, the offender will be referred for follow up to a mental health care provider using DOC 13-509 PREA Mental Health Notification.

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

610.025

When an offender reports that s/he has been a victim of sexual misconduct, s/he will be offered medical and mental health treatment services as follows:

- If a report of aggravated sexual assault is made within 120 hours of the alleged assault and involves penetration and/or exchange of bodily fluids, the facility will attempt to transport the offender to the designated community health care facility within 2 hours of the report, unless an appropriate health care provider determines a forensic medical examination is not needed due to the nature of the alleged assault.
Upon return to the facility from the forensic medical examination:

- The offender will be offered a mental health appointment and, unless the patient declines, will be seen by mental health within one business day.

If a report of sexual assault or staff sexual misconduct is made more than 120 hours after and within 12 months of the alleged incident, offenders will be referred for medical follow-up. The health care provider will evaluate and treat the offender as medically necessary, including testing for and treatment of sexually transmitted infections and prevention of pregnancy, if applicable. The offender will also be offered a mental health appointment and, unless the patient declines, will be seen by mental health within 14 days.

For all other sexual misconduct related reports (e.g., assault outside of 12 months, abuse, harassment), the offender will be offered a mental health appointment and, unless the patient declines, will be seen by mental health within 14 days.

- Follow-up appointments with a health care practitioner and mental health professional will be scheduled within a clinically appropriate timeframe to:
  - Assess the offender’s physical and emotional status.
  - Review the consultation sheet from the community health care facility to determine if all the medical aspects of the evaluation were completed.
  - Provide any additional evaluation and treatment that is medically necessary, including testing, prophylaxis, and treatment of sexually transmitted diseases.
  - Offer pregnancy testing and other lawful pregnancy related medical services, if applicable.
  - Provide additional crisis intervention, mental health treatment, and follow-up for trauma as clinically indicated.

600.000

The Health Services Division Standard Operations and Procedure Manual, including the Offender Health Plan and DOC-DOH Health, Environmental, & Safety Standards established under RCW 43.70.130(8).

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.

600.025

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.

**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)
| 115.83 (b) | 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 (c) | 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 (d) | Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No |

| 115.83 (e) | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) ☐ Yes ☐ No ☒ NA |

| 115.83 (f) | 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 (g) | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No |

| 115.83 (h) | 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 six policies related to and meeting compliance with applicable elements of this standard. Auditor was provided the policies which were reviewed. This auditor included some sections/segments from five of the six DOC policies that is applicable in part to this standard. Agency policies are available on the agency website [http://www.doc.wa.gov](http://www.doc.wa.gov)

- DOC 490.850 Prison Rape Elimination Act (PREA) Response
- DOC 610.025 Health Services Management of Offenders in Cases of Alleged Sexual Misconduct
- DOC 610.040 Health Screenings, Appraisals, and Status
- DOC 600.000 Health Services Management
- DOC 600.025 Health Care Co-Payment Program
- DOC 630.500 Mental Health Services – meets all elements, policy available on website

Additional supporting documentation:
- WADOC Transfer/Release of Offender DOC13-380
- WADOC Health Services Offender Health Plan manual
- Screen shot of OMNI medical encounter
- WADOC Request For Mental Health Assessment DOC 13-420
- WADOC PREA Mental Health Notification DOC 13-509
- Example email 14 day notification to mental health

On-site specialized and random staff interviews were conducted confirming compliance with the standard and agency policies.

**610.025**

When an offender reports that s/he has been a victim of sexual misconduct, s/he will be offered medical and mental health treatment services as follows:
- If a report of aggravated sexual assault is made within 120 hours of the alleged assault and involves penetration and/or exchange of bodily fluids, the facility will attempt to transport the offender to the designated community health care facility within 2 hours of the report, unless an appropriate health care provider determines a forensic medical examination is not needed due to the nature of the alleged assault.

Upon return to the facility from the forensic medical examination:
- The offender will be offered a mental health appointment and, unless the patient declines, will be seen by mental health within one business day.

If a report of sexual assault or staff sexual misconduct is made more than 120 hours after and within 12 months of the alleged incident, offenders will be referred for medical follow-up. The health care provider will evaluate and treat the offender as medically necessary, including testing for and treatment of
sexually transmitted infections and prevention of pregnancy, if applicable. The offender will also be offered a mental health appointment and, unless the patient declines, will be seen by mental health within 14 days.

For all other sexual misconduct related reports (e.g., assault outside of 12 months, abuse, harassment), the offender will be offered a mental health appointment and, unless the patient declines, will be seen by mental health within 14 days.

Follow-up appointments with a health care practitioner and mental health professional will be offered within a clinically appropriate timeframe to:

- Assess the offender’s physical and emotional status.
- Review the consultation sheet from the community health care facility to determine if all the medical aspects of the evaluation were completed.
- Provide any additional evaluation and treatment that is medically necessary, including testing, prophylaxis, and treatment of sexually transmitted diseases.
- Offer pregnancy testing and other lawful pregnancy-related medical services, if applicable.
- Provide additional crisis intervention, mental health treatment, and follow-up for trauma as clinically indicated.

Mental Health Evaluations for Substantiated Perpetrators

- Mental health professionals will attempt to conduct a mental health evaluation within 60 days of receiving the information for all offenders who have been identified as the perpetrator in substantiated allegations of sexual assault and/or sexual abuse, both within the Department and from other jurisdictions unless one has already been conducted for the specific allegation.

610.040
When indicated, offenders may be referred to community providers by filling out a discipline specific General Consult in OMNI-HS. DOC 13-380 Transfer/Release of Offender must also be completed if a referral results in a transfer to another Department facility, and may be used to facilitate referrals to community providers when continuing treatment is appropriate.

600.000
The Health Services Division Standard Operations and Procedure Manual, including the Offender Health Plan and DOC-DOH Health, Environmental, & Safety Standards established under RCW 43.70.130(8).

- 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.

Health Services

- The Health Services Division Standard Operations and Procedure Manual, approved by the Assistant Secretary for Health Services and Chief Medical Officer, includes the current operational procedures and standards that are expected practice for health services employees and contract staff. The Manual includes, but is not limited to:
  - Offender Health Plan,
  - Department Clinical Protocols and Guidelines,
  - DOC-DOH Health, Environmental, & Safety Standards,
  - Pharmaceutical Management and Formulary Manual,
All medical and mental health services for victims of sexual misconduct will be provided at no cost to the offender while s/he is housed in a Department or contracted facility.

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.

### 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 one policy related to and meeting compliance with this standard. Auditor was provided the policy which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov

- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:

- Example of WCC PREA committee case tracking
- WADOC Local PREA investigation Review Checklist DOC 02-383

DOC 490.860

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.

- 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
- 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 two policies related to and meeting compliance with applicable elements of this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov

- DOC 490.800 Prison Rape Elimination Act (PREA) Prevention and Reporting
- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:
- Copy of DOJ BJS Survey of Sexual Victimization 2016

WADOC has received the Department of Justice (DOJ), Bureau of Justice Statistics (BJS) for submission of data regarding the Survey of Sexual Victimization and has submitted the information required to include forms for substantiated investigations. Prior to on-site audits the annual reports posted on the WADOC website for 2013, 2014 and 2015 were reviewed. The 2016 annual report posted December 2017 was reviewed during interim and final report time frame.

**DOC 490.860**

Data will be collected by the PREA Coordinator/designee for each allegation of sexual misconduct.

Data will be aggregated at least annually and include available information from investigation reports and incident review committees, as well as from each private facility contracted to confine or house Department offenders.

Data will be analyzed to identify factors contributing to sexual misconduct in Department facilities and offices.

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.

All data/reports will be provided on request to the U.S. Department of Justice.

**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 one policy related to and meeting compliance with this standard. Auditor was provided the policy which was reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

• DOC 490.860 Prison Rape Elimination Act (PREA) Investigation

Additional supporting documentation:
WADOC redacts personal identifying information from annual report for safety and security purposes. However, the annual report does contain statistical data regarding cases and demographics. Auditor did review agency website which confirmed compliance with policy and standard. http://www.doc.wa.gov/corrections/prea/resources.htm

DOC 490.860

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 three policies related to and meeting compliance with applicable elements of this standard. Auditor was provided the policies which were reviewed for complete standard compliance. This auditor included some sections/segments of the DOC policy that is applicable in part to this standard. Policies are available on the agency website http://www.doc.wa.gov.

- DOC 490.860 Prison Rape Elimination Act (PREA) Investigation
- DOC 280.310 Information Technology Security
- DOC 280.515 Electronic Data Classification

Additional supporting documentation:
- Copy of OMNI PREA Access/Security Groups
- Department of Corrections Records Retention Schedule
- Screen shot of WADOC public PREA website page

Auditor reviewed agency policies and supporting documentation supporting full compliance with this standard.

**DOC 490.860**
All PREA data containing personal identifying information will be maintained as Category 4 data per DOC 280.515 Electronic Data Classification

Data will be collected by the PREA Coordinator/designee for each allegation of sexual misconduct.

Data will be aggregated at least annually and include available information from investigation reports and incident review committees, as well as from each private facility contracted to confine or house Department offenders.

Records associated with allegations of sexual misconduct will be maintained according to the Records Retention Schedule.

**DOC 280.310**
Mandatory criminal history background checks, as required in DOC 810.015 Criminal Record Disclosure and Fingerprinting, must be completed and cleared prior to granting access to IT resources.

Access rights and privileges to IT resources will require prior authorization

Passwords or other means of authenticating user identity will be required for access to IT computer resources. At a minimum, every user accessing a Department computer will be required to authenticate with a unique login name and password.

All users with access to confidential Department data must maintain the integrity of the data per DOC 280.515 Electronic Data Classification

DOC 280.515
Electronic data will be classified into 4 groups per the Data Classification Standards

Category 4 Data: Restricted Information - Data containing information that may endanger the health or safety of others or that has especially strict handling requirements by law, statute, or regulation

Each staff is responsible for electronic data in his/her care, and will:

- Protect data at all times to avoid unauthorized access, loss, theft, or improper disclosure

Staff will immediately report to the Chief Information Security Officer any:

- Unauthorized access or release of Category 2, 3, and 4 data

Failure or refusal to perform assigned responsibilities or willful violation of data classification policy or standards may result in disciplinary action, up to and including termination.

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 three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.) ☒ Yes □ No □ NA

115.401 (b)

- During each one-year period starting on August 20, 2013, 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? ☒ Yes □ No
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)*

This auditor finds the WADOC and WCC are compliant with all the requirements related to this standard. This auditor did not receive any written documentation prior to on-site audit and during on-site visit no offender requested to speak to auditors. Auditors were provided offices in units to conduct private interviews with offenders and staff.

**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)*

This auditor reviewed WADOC public website and confirmed compliance with this standard to include all prior audit reports posted.
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.

Auditor Instructions:

Deborah Striplin July 9, 2018
Auditor Signature Date