



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS

APPLICABILITY
PRISON/REENTRY/FIELD
FACILITY/SPANISH MANUALS

REVISION DATE
6/3/22

PAGE NUMBER
1 of 9

NUMBER
DOC 690.400

POLICY

TITLE
INDIVIDUALS WITH DISABILITIES

REVIEW/REVISION HISTORY

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Revised: 3/17/11	

SUMMARY OF REVISION/REVIEW:

Updated terminology throughout
IV.A.2.c., IV.B., IV.D., and IV.E.2.a. & b. - Adjusted language for clarification

APPROVED:

Signature on file

MARYANN CURL, MD
Chief Medical Officer

5/19/22

Date Signed

Signature on file

DAVID FLYNN,
Assistant Secretary for Health Services

5/25/22

Date Signed

Signature on file

CHERYL STRANGE, Secretary
Department of Corrections

5/31/22

Date Signed

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REFERENCES:

DOC 100.100 is hereby incorporated into this policy; DOC 420.250 Use of Restraints (RESTRICTED); DOC 550.100 Resolution Program; [29 U.S.C. § 794\(a\)](#); [Americans with Disabilities Act of 1990](#); Accommodation Status Report (ASR) Protocol; [OCIO Policy 188](#); [Records Retention Schedule](#); [Rehabilitation Act of 1973 Section 504\(a\)](#)

POLICY:

- I. The Department will not discriminate on the basis of disability when providing services, programs, and activities. The Department will ensure the rights of individuals under the Department’s jurisdiction with disabilities are addressed consistent with legitimate penological interests. Individuals with disabilities are those with identifiable disabilities as defined by state and federal law.
- II. The Department is committed to providing individuals with disabilities access to/use of information, data, and content that is available to individuals without disabilities per section 508 of the Rehabilitation Act and Office of the Chief Information Officer (OCIO) Policy 188.
- III. The Department will determine the appropriate accommodation based on assessment of the individual’s disability and access needs, facility security and safety, accommodation effectiveness, and cost.

DIRECTIVE:

- I. General Requirements
 - A. The Department will provide access to:
 1. All legal requirements for the protection of individuals with disabilities.
 2. Programs designed to educate and assist those with disabilities, and
 3. Qualified employees/contract staff familiar with the challenges faced by individuals with physical, mental, or other disabilities.
 - B. Individuals with disabilities will be provided reasonable accommodation that allows participation in services, programs, and activities, which may include:
 1. Modifying policies, practices, or procedures, when reasonable,
 2. Removing barriers to access, and/or
 3. Providing auxiliary aids and services.



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- C. During orientation, individuals will be provided the information on the Notice of Rights for Individuals with Disabilities (Attachment 1) using an effective means of communication.
 - 1. The notice will be posted or available in prominent places at each Department facility, including reception/intake areas, living units, and libraries.
- D. Restraint of individuals with disabilities will be addressed per DOC 420.250 Use of Restraints (RESTRICTED).
- E. Individuals will be searched consistent with prudent security practices and consideration for their specific disability. The shift supervisor will provide directions for searching an individual whose disability prevents a routine search.

II. Responsibilities

- A. The appropriate Appointing Authorities will designate Americans with Disabilities Act (ADA) Coordinators for each facility or geographical area, who will facilitate local compliance with ADA requirements and Department policy.
- B. The ADA Compliance Manager will train Prison, Reentry Center, and Community Corrections ADA Coordinators and will monitor compliance with ADA requirements.
- C. All facilities will develop emergency procedures for the rapid identification and safe evacuation of all individuals with disabilities. Individuals with disabilities will be instructed on emergency procedures specific to their needs.
 - 1. Employees will be trained regarding the evacuation of individuals with disabilities.
- D. Employees/contract staff will effectively communicate information, announcements, procedures, and other directions to individuals with disabilities.
 - 1. ADA Coordinators or designated instructors will provide disability awareness training for employees and contract staff in direct contact with individuals with disabilities.

III. Identifying Individuals with Disabilities

- A. Reasonable efforts will be made to identify individuals with disabilities at Reception Diagnostic Centers and Reentry Centers as soon as possible after coming under Department jurisdiction.

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1. The identification process will be interactive and will include employee/contract staff observations, self-reports, and/or documentation of an individual's disability.
 2. Referrals will be made to health services/mental health employees/contract staff and/or ADA Coordinators for evaluation and determination of disabilities.
- B. Individuals with disabilities who are housed in Department facilities are responsible for making their needs known to medical or classification employees/contract staff and/or the designated ADA Coordinator.
1. Employees/contract staff will refer individuals unable to make their accommodation needs known to the designated ADA Coordinator.
- C. Individuals may be identified by the Department of Social and Health Services Developmental Disabilities Administration (DDA) as intellectually disabled and as eligible for and enrolled in their services.
1. For individuals in Prison who are identified as intellectually disabled by the DDA, the case manager will complete an adaptive functioning review using DOC 13-457 Intellectual Disability Review at each regularly scheduled classification review.

IV. Accommodation Process

- A. Information provided by the individual, health care providers, and/or others qualified to evaluate disability and accommodation needs will be used to identify reasonable accommodations.
1. The need for durable medical equipment or other accommodation for disability will be evaluated by health services employees/contract staff or ADA Coordinators, or the Community Corrections Supervisor (CCS) as applicable.
 2. Safety and security concerns will take precedence when considering any accommodation and may result in the temporary or permanent suspension of any accommodation.
 - a. Any temporary or permanent suspension will be documented by the Superintendent.
 - b. The ADA Compliance Manager will document accommodations related to an Accommodation Status Report (ASR).

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- c. The Health Services Manager will document accommodations related to a Health Status Report (HSR).
 3. If the action needed to provide effective access would create an undue burden by fundamentally altering a service, program, or activity, or undue financial and administrative burdens on the Department, the action may not be required.
 - a. Denials will be referred through the ADA Compliance Manager to the Secretary/designee, and the Department will investigate other means to provide effective access.
- B. Health care providers will document a medically necessary device(s) or accommodation on a HSR in the Health Services section of the individual's electronic file (i.e., OMNI-HS). The HSR will specify the duration of the accommodation, which should not exceed one year.
 1. Health services employees/contract staff will issue medically necessary devices/accommodations.
 2. The individual will be provided with a copy of the HSR.
- C. Durable medical equipment or accommodations that does not meet medical necessity criteria but are medically appropriate to allow individuals to participate in programs, services, and activities may be issued as a reasonable accommodation for a disability per the ASR Protocol.
 1. The ADA Coordinator will:
 - a. Consult with the individual's health care provider to verify that a disabling condition requiring accommodation exists.
 - b. Complete DOC 13-508 Accommodation Status Report and submit it to the Captain/senior custody officer for security considerations.
 - 1) The Captain/senior custody officer will approve/deny the accommodation and sign the form. If denied, the Captain/senior custody officer may make a recommendation for an alternative reasonable accommodation.
 - c. Scan the signed form and email a copy to the ADA Compliance Manager.
 2. The ADA Compliance Manager will:

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- a. Chair the Accommodation Review Committee (ARC), which will review and approve, modify, or deny ASRs,
 - 1) The ADA Compliance Manager may temporarily approve an ASR until the ARC can consider it for approval.
 - 2) The ARC will include:
 - a) ADA Coordinators who have submitted an ASR for consideration,
 - b) A health care representative, if appropriate and requested by the ADA Coordinator,
 - c) Program employees/contract staff if an ASR will affect the individual's program or activity,
 - d) The facility's senior custody officer/designee when an ASR is not approved for security reasons.
 - (1) Safety/security concerns that cannot be resolved will be referred to the facility's Superintendent for a final determination.
 - b. Document decisions on DOC 13-510 Accommodation Review Committee - Decision Notification.
3. ASRs will be valid for a maximum of one year unless otherwise specified by the ARC.
 4. Approved ASRs will be honored across facilities and will not require re-approval due to transfer.
 - a. Exception approval for a pager is not transferable since pagers are not available at all facilities and are designed for use only at a specific facility.
 5. The individual will be provided with DOC 13-510 Accommodation Review Committee - Decision Notification and a copy of the ASR if approved.
 6. Individuals may appeal the ARC's decision in writing to the ADA Compliance Manager within 10 days of receiving notification using DOC 13-584 Patient Appeal of Accommodation Review Committee Decision, and send to:

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Department of Corrections, Health Services
 ADA Compliance Manager
 P.O. Box 41123
 Olympia, WA 98504-1123

- a. The appeal will be reviewed by the appeals committee consisting of:
 - 1) Chief Medical Officer/designee
 - 2) Medical Director/Quality Care Management/designee
 - 3) ADA Compliance Manager/designee
 - 4) Others designated as needed

- b. The individual will be notified in writing of the outcome of the appeal on DOC 13-585 HQ ARC Appeals Committee Response to Patient Appeal.

7. Individuals receiving durable medical equipment will sign DOC 13-400 Durable Medical Equipment (DME) Agreement.

- D. Health Services Managers may permit individuals to retain medically necessary durable medical equipment and/or customized assistive devices upon transfer or release unless the Facility Medical Director and/or the ADA Compliance Manager has been consulted and a determination has been made to the contrary. Such determination will be documented in the Health Record or the Health Services section of the electronic file as applicable.

- E. Previously approved durable medical equipment prescribed under an HSR may be permanently removed only by order of a health care practitioner.
 1. Facility employees/contract staff should not remove any assistive devices without approval of a health care practitioner or the ADA Coordinator.
 2. In Prison:
 - a. If the device presents a threat to safety and security, the Health Services Manager/designee will collaborate with the Superintendent on a decision regarding removal.
 - b. The Chief Medical Officer and appropriate Deputy Assistant Secretary for Prisons will resolve the issue if the Health Services Manager/designee and the Superintendent cannot come to an agreement.



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3. In Reentry Centers and the Community Corrections Division, the CCS or Field Administrator will make the decision regarding durable medical equipment removal.

F. Individuals may decline any accommodation offered.

G. Facilities will develop a process to ensure employees/contract staff receive updated information regarding the specific needs of individuals with disabilities.

H. Temporary disabilities and/or accommodations will receive case-by-case evaluation and review.

V. Facility/Program Placement

A. Individuals with disabilities will be placed in facilities consistent with their health, safety, and security requirements. Housing for individuals with disabilities will be accessible and allow for interaction with other individuals.

1. Individuals with disabilities will not be precluded from placement in a Level 2 facility or Reentry Center based solely on their disability.

2. Programs and services will be available and accessible to individuals residing in the facility.

B. Individuals with disabilities will be allowed the opportunity to participate in programs, including work programs. They will be provided effective access and must be able to perform basic and/or essential functions of the work or program assignment.

C. Individuals with disabilities will receive education, equipment, and support necessary to perform self-care and personal hygiene in a reasonably private environment.

D. Appropriately trained persons will be assigned to provide assistance to individuals with disabilities who are unable to perform activities of daily living.

VI. Documentation

A. The facility Health Services Forms/Records Analyst will enter approved accommodations noted on the ASR in the Comments for Custody section of the individual's electronic file.

B. Records related to individuals with disabilities, including assessments of accessibility and compliance with the Americans with Disabilities Act, will be retained per the Records Retention Schedule.

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DEFINITIONS:

The following words/terms are important to this policy and are defined in the glossary section of the Policy Manual: Intellectual Disability. Other words/terms appearing in this policy may be defined in the glossary section of the Policy Manual.

ATTACHMENTS:

Notice of Rights for Individuals with Disabilities (Attachment 1)

DOC FORMS:

- DOC 13-400 Durable Medical Equipment (DME) Agreement
- DOC 13-457 Intellectual Disability Review
- DOC 13-508 Accommodation Status Report
- DOC 13-510 Accommodation Review Committee - Decision Notification
- DOC 13-584 Patient Appeal of Accommodation Review Committee Decision
- DOC 13-585 HQ ARC Appeals Committee Response to Patient Appeal