

**OCO Monitoring Report to Washington Corrections Center
Conducted by LaQuesha Turner, OCO Early Resolution Ombuds and Race Equity Specialist,
and Domenica Campbell, Early Resolution Ombuds
Multi-Day Visits on December 10, 2020 and December 16, 2020**

Background

- On December 3, 2020, Washington Corrections Center (WCC) began reporting positive COVID-19 test results, indicating an outbreak had begun at the facility. The Office of the Corrections Ombuds (OCO) received numerous concerns regarding conditions of confinement at WCC. For that reason, LaQuesha Turner, OCO Early Resolution Ombuds and Race Equity Specialist decided to make a site visit to WCC to monitor and report back on conditions. The following week, Domenica Campbell, OCO Early Resolution Ombuds, accompanied LaQuesha Turner on a follow up visit to monitor for any changes.

Statutory Authority

- Per RCW 43.06C.050, OCO has “reasonable access” to all state correctional facilities in order to monitor compliance with respect to the rights and safety of incarcerated individuals.

Key Points

- OCO had previously visited WCC in August 2020 to conduct a COVID-19 monitoring visit. Much like the subsequent visit, WCC staff were doing everything they could to be helpful and the incarcerated persons reported few issues with individual staff. Unfortunately, like the last visit, staff and the incarcerated population felt DOC Headquarters were not doing all that they could to lighten the load or establish effective communication and practices in their response to COVID-19.
- OCO met with the individuals housed in IMU North, The Regional Care Facility (RCF), Cedar Hall, G Unit (gym), R1, R2, and R5 Units. Upon arrival December 10, 2020 OCO staff was notified of a minor disturbance the prior morning (December 9, 2020) in R1 regarding the use of phones. We were then notified that staff remade the meals that had been served cold or burnt in R2, and JPay (the electronic system through which families and friends connect with incarcerated individuals) was down but being addressed in the gym.
- During OCO’s visit, a staffperson reported that there had been a coordinated staff call out on the morning of December 9, 2020 in R1, the same day as the minor disturbance. Reportedly, the call out was in regard to the believed mismanagement of the COVID-19 response by DOC Headquarters that put their and the population’s safety at risk.¹ We were informed that written recommendations, which addressed safety concerns, were

¹ DOC administrators have relayed that there was no such call out to their awareness and staff were on leave for other reasons.

provided by said staff, and the population of R1 was standing in solidarity with them. The population had several concerns about the actions of the staff that were present the morning of the call out and the threats of disseminating OC (pepper spray) because staff felt unsafe even though the incarcerated population was locked in their cells. This issue is still being reviewed by DOC.

- OCO spoke to several incarcerated individuals who had sustained substantial injuries, some of which occurred the facility. Two individuals in the gym had fallen on a bolt protruding from a floor vent—one of those individuals required stitches. Another individual in the gym, who required a cane while waiting for back surgery, was in visible pain. There were also two other individuals with a possible broken arm, both awaiting x-ray's for confirmation—one who alleges the mechanical cell bars to his cell door opened without warning trapping his arm in the bars while the other arm and his legs suffered injuries as he tried to prevent the door from moving further. This person further alleges there was no staff response for approximately 5-minutes as the tier shouted for help. OCO and DOC personnel are still reviewing this concern.
- At the entrance to the facility and each unit, OCO observed PPE supplies for staff consisting of gowns, masks, gloves, face-shields, and hand sanitizer. In each living unit we observed supplies for the incarcerated population including masks. There were also various sources of information regarding COVID-19.
- Incarcerated individuals reported a number of concerns from being moved around to different units based on quarantine/isolation protocols, lack of laundry, cleaning supplies, a reduction in time outside of their cells, reduced access to medical/dental/mental health, lack of phone privileges, medications, lack of legal access, access to counselors, classification issues, overcrowding, new arrivals (prior to the governor's moratorium on transfers), obtaining COVID test results, and injuries sustained.
 - OCO learned that every transfer of an individual to a different location was approved by medical personnel. The facility is working within those constraints in addition to population anxiety about who they were housed with and their previous test results.
 - Laundry was a challenge due to the lack of staff members and incarcerated persons on isolation/quarantine. Staff members volunteered to do laundry to assist in the short fall.
 - The time an individual could spend out of their cell was increased from ten (10) minutes to twenty (20) minutes.
 - Classification concerns were and are still being reviewed by staff, with one resulting in a release.
 - WCC does have medical and mental health providers available through Tele-Health. OCO also witnessed mental health staff available both observation visits in person, in units with COVID-19 positive individuals.

- Injuries were reported to upper management and some continue to be monitored by OCO.
- WCC is the only facility in this monitoring teams' visits with mental health and religious coordinators physically at the facility during the outbreak. OCO observed them actively engaged with the population including, bringing them spiritual and mental health supplies, and holding one-on-one meetings when requested. All the staff encountered on this visit were taxed but had a good attitude and treated incarcerated persons with dignity.

Observations

- Washington Corrections Center (WCC) is a medium, close, and maximum-security Department of Corrections (DOC) prison located in Shelton, WA. WCC has a capacity for 1,268 incarcerated individuals, but as of OCO's visit on December 16th, 2020 a total of 1,766 individuals were incarcerated with 145 housed on bunks in the gym. This was an increase of 45 incarcerated persons from the December 10th, 2020 visit. Each move potentially impacts another cohort or displaces individuals who then must be re-housed based on their status. Utilization of space that was never designed to house individuals creates significant logistical concerns. This is further complicated by the incoming of persons from city or county jails as WCC is the receiving prison.

Entry

- WCC has established an entry screening area complete with plastic barriers, temperature checks, and a questionnaire that includes dates of your last COVID-19 test. The testing center is adjacent to the main entrance to the facility and employees are tested on a weekly basis. This process was robust and organized.

IMU North

- OCO's first stop was to administrative segregation to visit incarnated persons who had recently reached out to our office with concerns. Most of the concerns pertained to long-term placement in the Intensive Management Unit (IMU). Due to the COVID-19 breakout, there has been minimal transfers. They shared concerns about out of cell time and lack of responses to Kites (official handwritten correspondence between incarcerated individuals and staff) or Grievances (formal written complaints). This information was shared with WCC's Superintendent on the first visit.

R1-Unit /Quarantine

- OCO visited the R-Units on both visits. Upon arrival we were informed there was a minor disturbance over the lack of phone access, DOC Headquarters' response to the pandemic, and lack of communication. A staffperson stated to OCO that the morning staff called out (did not show up to work) "in solidarity" over DOC Headquarters'

response to the pandemic and fellow coworkers' actions.² Staff on-site stated how they felt this put both them and the incarcerated population at risk. During that shift's replacement, staff members allegedly warned they would disseminate OC spray (pepper spray) because they felt threatened. It is to be noted all incarcerated persons were locked in their cell at this time.

- The atmosphere proved to be more positive on our second visit, but there are still valid concerns regarding communication from DOC and status of quarantine. The out of cell time did increase from ten (10) minutes to twenty (20) minutes, but the population shared they aren't receiving the full twenty (20) minutes and would like to be active during that time. We were informed by staff that they can utilize that time as yard time.
- Incarcerated persons complained of legal access, access to OCO forms and information about their quarantine status. The overall atmosphere of the population was concerned and frustrated. The overall atmosphere of staff was overwhelmed trying to perform multiple duties at once. There was no tension between the population and staff in this unit. Staff apologized to OCO for what they would encounter at the next stop.

R2-Unit/Quarantine

- OCO's visit to R2 was made after we were informed they received cold meals and staff remade them all the previous night. There was no further clarification on their status or what their current condition was. Upon walking into the C&G unit, we observed trash, food, clothing and other various items thrown on the floor, hanging from the walls and the cells. OCO staff called out to announce themselves before proceeding, and the tossing of items stopped. The incarcerated population was frustrated with DOC's response to the pandemic and the incoming incarcerated persons into their cohorts. They shared that they had limited out of cell time, cold food, COVID-19 positive individuals coming into their cells, lack of cleaning supplies, two cells with no lights, possible feces on the ceiling in one cell, untreated injuries, lack of legal access, time-served calculations, and no clean laundry. OCO spoke to staff in that unit and there was clear concern and frustration. They informed us of how sometimes urine is tossed out of the cells at them, and how—due to staff shortages—there was much that couldn't get done in the span of one shift. This included collecting trash, cleaning of cells vacated by COVID positive incarcerated persons, laundry, and time out for legal access to confidential phone calls with attorneys. OCO observed staff being called away from this unit to perform other duties when they were already shorthanded.
- The overall atmosphere of this unit was frustration from both staff and the incarcerated population.
- The following visit the unit still had visible trash. However, laundry was being done and they were thankful for the extra out of cell time although allegedly not the full twenty (20) minutes. There were multiple concerns with still the top concerns being incoming persons to their cohorts, lack of communication, and legal access.

² DOC administrators have stated that no such "call out" happened by staff and that staff were on leave for other reasons.

R5-Unit/ Isolation

- This unit consists of an unused day room and individuals housed either individually or two to a cell. The major concerns coming out of this unit were about lack of communication from DOC, going up to six (6) days without speaking to their families, and mental health concerns.
- During the initial visit someone declared a mental health emergency to OCO staff stating they have “planned their suicide and was going to execute it then and there.” This individual and his roommate alleged that he had been trying to notify staff for six (6) hours, but no one had come into the unit for him to report it to. This was immediately reported to staff who acted quickly. OCO staff also noted the presence of mental health staff in several locations.

G Unit-The Gym/Isolation

- OCO visited the gym/G- Unit, which is where individuals on isolation were placed. This was part of WCC’s COVID-19 overflow placement. There are 149 individuals in the gym on rows of bunks, each bunk assigned a number taped on the floor. The noise echoing back from the high ceilings creates bothersome acoustics for those housed there, and many complained of headaches and difficulties obtaining Tylenol.
- Out of all the people we spoke with on both visits there were only four who received the result they were positive for COVID-19. We were further informed that this almost caused a fight on one occasion, when someone didn’t know they were positive and was speaking to someone who was and informed them of their results.
- The concerns arising from the gym were about length of stay, test results, access to commissary, medical assistance, legal access, laundry, JPay issues and property. DOC has already started to address the JPay issues, and has directed medical staff to print a paper copy of results for everyone.
- The overall atmosphere was positive between staff and the population. On several occasions each visit staff was praised by the incarcerated population for their efforts and kindness during this time.
- OCO observed several portable toilets, hand washing stations, and multiple showers. There is a designated TV area, game area and the population can get fresh air as often as they want as there is a back door open that leads to the restrooms and handwashing stations.
- There is an outside medical tent area outside of the gym. These were set up in case there was an increase in positive incarcerated persons. They have beds and heating. No one is housed in them at this time.

Regional Care Facility-RCF/ Isolation

- The RCF housed those who were symptomatic and positive for COVID-19. Each bed was blocked by protective plastic, there was a comfortable seating area and bathrooms for

their use. To enter the RCF, you are required to don full PPE in an isolated area set up specifically for this purpose. Medical staff were present and available for all concerns.

- The concerns received pertained to lack of testing results, some not feeling symptomatic until their arrival there and being near symptomatic persons, and time of stay in the RCF.
- The overall atmosphere was calm. Staff and the incarcerated population had a cohesive attitude and were friendly.

Cedar Unit/ Isolation

- Our final visit was to the Cedar Unit which housed separately those on quarantine status and those with confirmed COVID-19 results. The overall concerns were regarding lack of communication, lack of legal access, results of testing, the self-administering of COVID nose swab testing, and how they believe the virus spread. We were informed by the population that allegedly the first COVID positive individual at the facility was a kitchen staff member who worked while sick for a few days to get Thanksgiving dinner out. This led to the virus spreading to all kitchen workers. The kitchen workers were told they were exposed to a COVID positive individual a few days later and were immediately tested but sent back to work. It is our understanding that DOC is still reviewing the cause of this outbreak and its source.
- The overall atmosphere of the units is frustration but hopeful for change. The staff were positive and helpful.

Recommendations

OCO recognizes DOC's staff commitment to keeping the incarcerated population safe during this unprecedented time. We also know that there are valid concerns noted from both population and staff about the handling of the pandemic at WCC to date. With this in mind, the following are recommendations DOC should consider.

- Incarcerated persons relayed that they are not getting adequate communication from DOC regarding the outbreak, their or the facility's current status, nor any plans the facility has or why actions have taken place that directly impact them. OCO recommends improving the quality, amount, and frequency of communication to the incarcerated population.
- If there hasn't been at the time of this publication, medical staff should be delivering results of the COVID-19 test to each incarcerated person at the facility.
- Ensure that staff regularly walkthrough units like R5, as there are periods of time when no staff members are within shouting distance.
- Staff should not disable call buttons or threaten negative actions for their use.
- DOC needs to develop a plan for legal access for those who need it or speak with the courts concerning filings which, if DOC cannot facilitate the completion of, need to be communicated to the courts as extenuating circumstances.



STATE OF WASHINGTON
DEPARTMENT OF CORRECTIONS
P.O. Box 41100 • Olympia, Washington 98504-1110

February 18, 2021

Joanna Carns
Office of Corrections Ombuds
2700 Evergreen Parkway NW
Olympia, WA 98505

Dear Ms. Carns:

The Washington Department of Corrections appreciates the opportunity to respond to the OCO Report on the 'OCO Monitoring Visit to Washington Corrections Center (WCC) December 10th and December 16th, 2020' completed by the Office of Corrections Ombuds.

Recommendation	Response
Incarcerated persons relayed that they are not getting adequate communication from DOC regarding the outbreak, their or the facility's current status, nor any plans the facility has or why actions have taken place that directly impact them. OCO recommends improving the quality, amount, and frequency of communication to the incarcerated population.	The department has provided many venues for communication to the population and will continue to strategize and implement additional methods as the pandemic progresses. At this time, the facility is conducting a weekly COVID-19 informational call with loved ones of the incarcerated population to provide a facility update and answer any questions posed. The notes from these calls are shared with all living units for reference. Additionally, the facility is providing a written weekly facility update as well as written operational daily updates to the population as the pandemic response progresses. The department will continue to provide information through these venues as well as through verbal communication from daily facility walk-throughs conducted by facility staff.
If there hasn't been at the time of this publication, medical staff should be	Health services staff delivers an incarcerated individual's test results to the



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<p>delivering results of the COVID-19 test to each incarcerated person at the facility.</p>	<p>individual in a sealed envelopes with the individual's name, DOC number, and current housing assignment. If the result is positive, it is given to the individual by the transport team assigned to move the individual to medical isolation. All negative results are handed out by unit staff. The process for distributing negative results can take some time to identify and verify individuals for accuracy. The Department will continue to work to provide these results as promptly as possible.</p>
<p>Ensure that staff regularly walkthrough units like R5, as there are periods of time when no staff members are within shouting distance.</p>	<p>Officers, counselors, correctional unit supervisors and leadership staff are consistently doing tier walks throughout the facility. In addition to the prison staff, mental health and health services staff are performing regular rounds of the population and in accordance with the WA State DOC COVID-19 Screening, Testing, and Infection Prevention Guideline and COVID-19 mental health COVID-19 protocols. The facility appreciates the intent of the recommendation and will continue to improve processes and procedures.</p>
<p>Staff should not disable call buttons or threaten negative actions for their use.</p>	<p>The only locations where the facility has call buttons are in the Intensive Management Unit (IMU) cells and nursing call buttons in the In-Patient Unit (IPU). None of these call buttons can be disabled by staff.</p>
<p>DOC needs to develop a plan for legal access for those who need it or speak with the courts concerning filings which, if</p>	<p>While facilities are on restricted movement, the legal liaison at each facility, and specifically at WCC, has been</p>



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<p>DOC cannot facilitate the completion of, need to be communicated to the courts as extenuating circumstances.</p>	<p>reaching out to courts and advising them of the facility operational status and restrictions. The liaison then works with the attorneys or courts, who have all be very receptive, and ensured that matters were not adversely affected. For example, the courts and/or the attorney would request continuing matters and continuing deadlines, which have all been approved. The department would encourage all individuals to continue communicating with the facility staff to ensure that the facility can appropriately assist all individuals through this global crisis. The facility has been able to resume law library functions which will enable incarcerated individuals access to legal assistance and documentation resources.</p>
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Staff in all capacities are working extremely hard to mitigate the potential spread of the COVID-19 virus within the state's correctional facilities. The Department's work is conducted with an understanding that each day may present a different challenge and our teams are dedicated to performing their jobs and fulfilling their mission to the best of their ability.

The Department of Corrections continues to appropriately align its practices to reflect the guidance of the Centers for Disease Control (CDC) and Department of Health (DOH) to ensure the health and safety of the incarcerated population and staff in the state's correctional facilities. The department will continue being part of the solution, adjusting protocols and precautionary measures being taken accordingly during this global crisis.

Sincerely,

Dean Mason, Associate Superintendent
Washington Corrections Center

APPENDIX



Photos A&B

Images mages of the R2 unit where items were tossed out of cells. Pictured is trash, food and clothing on the floor and hanging from the walls.

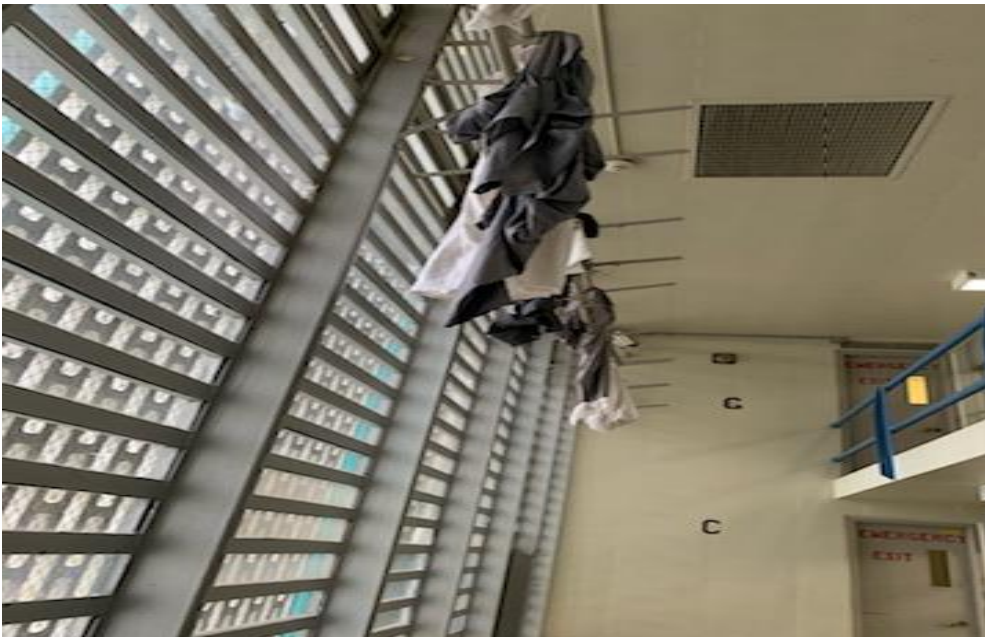




Photo C

Within some of the cells there is overcrowding. Incarcerated persons are sleeping on the floor on a bed mat, three individuals occupying a two-man cell. In this image we can see how the cell next door only has one occupant.



Photo D

The yard where there are phones available for the population housed in R unit to use. There are limited phones and they are released in cohorts during their out of cell time to give everyone a chance to speak with their loved ones.



Photo E

The inside of the RCF. Each person receives a plastic tote with bedding and individual supplies for their stay. Each bed is separated by plastic dividers. They have sanitation stations near their TV and restrooms.



Photo F

Area designated for positive case overflow. There are beds and heating in these medical tents. Currently they are not in use.



Photo G

View looking into the gym from the entrance, where individuals are housed with COVID-19. Here you can see the cots set up on the gym floor. Each person has a pack of bottled water and various other items underneath or near their bed.



Photo H
Within the gym they have an entertainment center where they can sit and watch television or movies. There is a kiosk in this area.



Photo I
Within the gym is the phone bank that is readily available for use. The table is full of kites, grievances and other forms available for the population. They can also find medical mask here.



Photo J

There is a game area located directly above the sleeping area. One side is used for those who want to exercise.



Photo K

The pump hand washing station for the population housed in the gym to use. There is also a line of portable restrooms they can utilize. From our understanding the door remains unlocked for easy access to this area. The population can also have fresh air in this area.