

OFFICE OF THE CORRECTIONS OMBUDS

Monthly Outcome Report: August 2021

The Office of the Corrections Ombuds (OCO) investigates complaints regarding any Department of Corrections' (DOC) actions or inactions that adversely affect the health, safety, welfare, and rights of incarcerated individuals (RCW 43.06C.040). Per RCW 43.06C.040(2)(k), at the conclusion of an investigation of a complaint, the ombuds must render a public decision on the merits of each complaint.

As of September 1, 2020, all cases open at the time and all cases opened since by OCO are considered "investigations" for the purposes of the statute. The following pages serve as the "public decision" required by RCW 43.06C.040(2)(k).

In providing an anonymous summary of each complaint, OCO staff have worked to limit as much identifying information as possible while still providing a substantive explanation of the concern so as to protect the complainant's confidentiality while also providing transparency into the office's work.

Note: The following case summaries also include OCO's closed case reviews, in which a complainant whose case was closed requests a review by the supervisor. These are marked in the summaries as such. OCO is still evaluating how to best portray these cases.

All published monthly reports are available on <https://oco.wa.gov/reports-publications>

Case Status	Explanation
Assistance Provided	OCO, through outreach to DOC staff, was able to achieve full or partial resolution of the person's complaint.
DOC Resolved	Case resolved by action of DOC staff prior to OCO action.
Lack Jurisdiction	Complaint does not meet OCO's jurisdictional requirements (not about an incarcerated individual, not about a DOC action, or person did not reasonably pursue grievance/apellate procedure)
No Violation of Policy	After reviewing all relevant documents and DOC policy, OCO staff determine that DOC policy was not violated.
Unable to Substantiate	Insufficient evidence exists to support the complainant's allegation.
Information Provided	OCO provides self-advocacy information.
Substantiated	OCO substantiates the concern/allegation and it is neither resolved by DOC nor can OCO assist with impacting change.
Decline/Other	Some other reason exists for the closure of the case, generally release.

Monthly Outcome Report

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Institution of Incident	Complaint/Concern	Outcome Summary	Case Closure Reason
Not specified			
1.	Former DOC employee reporting wrongful actions by DOC against her, including sexual harassment that was not fully investigated by DOC and a subsequent PREA investigation that was substantiated against her post-employment.	OCO does not have jurisdiction to investigate DOC actions against current or former employees.	Lack Jurisdiction
Airway Heights Corrections Center			
2.	Inadequate testing & treatment for heart, knee, shoulder issues. Dental delays for broken tooth and needs mouth guard through DME process.	Patient called to share thanks, confirmed xray and appointment. He said he had been trying but hadn't seen a provider for almost a year. Patient confirmed he was able to meet with a medical provider and get follow up that he needed. After that appointment, DOC ordered additional testing and follow up, then took xrays. Health Service Manager met with patient directly following family and OCO outreach. Discussed case via phone, patient said currently receiving care, issue resolved, and will reach out to OCO if additional concerns arise.	Assistance Provided
3.	Reporter states that DOC has not added his good time to his file after they agreed to allow the restoration at his latest review meeting. He wants the good time that he has restored to be reflected in his file.	Followed up with DOC staff and was assured that the final approvals of adding the good conduct time. I ensured that the change was in the DOC system prior to closing this case.	Assistance Provided
4.	Family member states that her husband told her that there is a rodent infestation in the kitchen at Airways Heights Corrections Center. The concern is that her husband can "smell the odor of death all the way in his unit".	AO elevated this concern to the facility management. The pest control contractor scheduled to be on-site the next day and DOC reports confidence that the facility has the correct resources and commitments to rectify any issues.	Assistance Provided

5.	DOSA revoke - DOC took 300 days for failure to report in 2019, but the time happened when he was out of state and there is no warrant or other documentation to support that he was FTA for those days. Also says that there was a failure of due process for his DOSA revocation hearing (did not receive notice of waiver/rights, etc).	We reviewed the case and also requested that DOC review again, which they did. At this time, the person has been released.	Declined, Other
6.	Is requesting transfer to the westside of Washington. Reports mental health concerns in past and present situations.	Spoke to loved one who reported to me that this concern was resolved.	DOC Resolved
7.	Person had nose surgery for his deviated septum. Has not had any follow ups or medical care. Feels like something is wrong. Stitches falling out of his nose.	Patient had an ENT follow up two days after contacting our office and has another follow up scheduled.	DOC Resolved
8.	Has bacterial infection on left buttocks that is resisting anti bacterial medication and ointments. Has a "wet cell" currently and has become camp eligible. Concern that he could catch MERSA or Hep A, B, C if required to use a toilet shared by other individuals.	HSR was changed to require "wet cell" through I/I's ERD.	DOC Resolved
9.	Requester states that AHCC staff report that the reason they are not handing out the property packages and other items that are filling up the property room is due to them being understaffed and overworked. They are holding onto property that was sent weeks and even months ago. Requester states that her fiancé's new JPay tablet was sent and delivered to the facility weeks ago, yet he does not have it. Requester asks that OCO watch cameras in order to witness what staff are doing.	Property complaints can be grieved through the WADOC Resolution Program and review of grievance file found no grievance about property in his records. Per RCW 43.06C.040, the incarcerated person MUST file a grievance or appeal, as applicable prior to OCO opening a case, unless there is some reason that they cannot (such as a mental or physical disability).	Information Provided
10.	Issue with ISRB's decision and that there is no appeal process within DOC.	Reviewed the RCW in question of violation and was not able to find evidence to support that the ISRB was in violation of such RCW. I provided this person with information about appealing the decision with a personal restraint petition (PRP).	Information Provided

11.	Reports that they are experiencing delays in access to tooth care. He's had fillings fall out, broken teeth and pain with gum disease. At MCC he grieved the dentist because they wouldn't fix his teeth. Now, he's at AHCC, still not getting dental care. He reports that the grievance coordinator is not responding to him at AHCC and that he also needs to request a new mattress and no ones responding to him.	This person is on the list to receive dental care. I explained that if there are new issues or worsening symptoms, he'll need to make medical aware of that. If after he's reached out to DOC and does not received proper follow up, he was encouraged to follow up with us.	Information Provided
12.	Request states that his custodial assault charge is listed as violent, which he believes is a mistake. Reportedly, DOC staff told him that DOC policy 310.150 was updated in 2019 to include custodial assault. He was not able to locate the attachment in the law library. He wants to review the updated policies.	Provided a printed copy of History of Violence Form (DOC 310.150 Attachment 1) and RCW 9A.36.100 Custodial Assault. No Violation of DOC Policy 310.150 as custodial assault is listed as a violent offense.	No Violation of Policy
13.	Person says that they were infracted for a WAC 505 (fighting) and a WAC 633 (assault) for the same incident. He doesn't understand how he can be infracted for both and what made the situation different from a fight where DOC also can prove assault. He feels like he was doubly punished and that doesn't feel just. Also reports that this infraction took an extremely long time to complete.	There appeared to be no evidence to contradict staff statements that the I/I was involved in the activity that led to all three infractions. The I/I has since been released.	No Violation of Policy
14.	Patient had been in mental health institution and reports that DOC discontinued his medications. Reports having no access to mental health therapy despite being assaulted by staff earlier this year.	Confirmed patient seen by mental health and has ongoing access if needed. Verified CRC process for considering medication request and appeal were handled per policy. Outlined additional options for patient as CRC appeal was denied.	No Violation of Policy
15.	He has trouble getting art books through the mailroom. One book has been at HQ for 7 months and when he contacts them, they say they still haven't made a decision.	Publication in question was denied by the committee. Uplifted systemic concerns related to publication reviews to OCO staff compiling concerns for systemic mail review.	No Violation of Policy

16.	Complainant told the staff at DOC that he is treated on the outside for low testosterone and that he receives testosterone shots. He has been in for months no and has grieved this to a level 3 and has not even been tested for low testosterone levels. DOC staff stated to him that testosterone is provided to the Transgender community and not someone that has low levels. Wants to be tested for low testosterone and treated accordingly.	treatment for low testosterone levels not included in OHP	No Violation of Policy
17.	Patient was experiencing fatigue and sought medical attention. Blood panel was taken and found blood platelets/ white blood cells were out of normal range. Medical told individual that white blood cell count was low but stable, and could be 'his normal'. He feels something is wrong and should be investigated further. Requested testing be done by another lab in WA to confirm no medical issues missed.	Confirmed care meets DOC Health Plan. Cannot impact change related to testing request.	No Violation of Policy
18.	Person states that they appealed a hearing decision due to the fact that the disciplinary hearing minutes and findings reportedly violated their due process and procedures. The hearing document was not filled out correctly and was clearly filled out before the hearing was conducted, which isn't consistent with the individual's right to an impartial hearing.	OCO reviewed the hearing paperwork. While the errors did exist, they were considered 'harmless' by DOC and not grounds for overturning the infraction. DOC does appear to have video evidence to substantiate the infraction.	No Violation of Policy
19.	Update on previous OCO case: Received CT scan & appt with surgeon. He does not have lipoma; was told he has broken ribs. As of right now he still has not receive Tylenol or ibuprofen no pain medication. He has been waiting to get clear diagnosis. In constant pain, especially on right side, cannot lay flat without pain.	Confirmed with facility that patient had an x-ray on that revealed no broken ribs. Patient has had broken ribs in the past and DOC has treated them and his pain.	No Violation of Policy
20.	Caller states that DOC staff are lying about him in his Behavior Observation Entries (BOE'S). He also is concerned that he cannot include a letter when sending out finished hobby products.	Reviewed BOE and all relevant documents. Could not substantiate a violation of policy or inaccurate BOE response.	No Violation of Policy

21.	I/I says that his concern is about the elimination of good time given by court orders signed by a judge. I/I says that this added 161 days to his sentence. I/I says that his good time is being ignored, which is extending his sentence.	Facility records staff and HQ staff have accurately reviewed this calculation. No findings to support a miscalculation.	Unable to Substantiate
22.	Complainant checked his Behavior Observation Entries (BOE's) in December and noticed that a couple of them were infractions that he had received. There were 10 BOE's that had inappropriate language in them. He filed an appeal of all 12 BOE's with the CPM. The appeal resulted in 2 BOE's being deleted because they were directly related infractions he had received. The complainant is stating that the CPM is not viewing staff misconduct because 9 of the BOE's had language that the complainant deemed inappropriate.	Reviewed case via appeal process. Cannot impact change due to the fact the BOE's are before new policy change.	Unable to Substantiate
Cedar Creek Corrections Center			
23.	Needs ADA assistance completing grievances as they keep getting kicked back for re-writes and he claims he has no way to contact the grievance coordinator. Has dyslexia and mental health issues. Frustrated and needs assistance. He wants to get assistance writing grievances in his own words not other's interpretation of the issues.	Alerted Resolution Program Director of concerns related to accessibility. Records show resolution coordinator then met with complainant regarding grievances. Individual now released.	Assistance Provided
Clallam Bay Corrections Center			
24.	I/I complaint racism at CBCC is subtle but rampant. As a result, many administrative decisions are made without awareness of racial impact.	These concerns were tracked and recorded by the Race Equity Specialist and discussed with HQ as part of systemic issue at CBCC. Complainant was also moved to desired facility with desired custody level.	Assistance Provided
25.	Son was threatened; he reported the incident and was put in solitary confinement. Wants assistance in her son moving to Airway Heights.	Family member wanted assistance with her loved one being moved to the desired facility before incident. DOC did move them to the desired facility- we have no jurisdiction over placements. The issues at this prison are being reviewed.	DOC Resolved

26.	He is set to be released soon. He was recently moved to imu for an incident, in which he was found guilty, given credit for time served in IMU, and his last 2 days of good time were taken. However, they have not released him back to mainline and told him they do not intend to. The negative effects solitary confinement has on individuals is not hidden, and keeping him in imu when he is so close to release is setting him up to fail.	DOC was following policy 320.200 Administrative Segregation. He will be releasing this week.	No Violation of Policy
27.	Has spent 3-years in IMU MAX custody. I/I claims that every time he gets recommended for close custody, it gets overridden by HQ.	DOC will be reviewing I/I's classification and placement. Concerns shared with DOC management and any changes will be communicated to I/I in future correspondence. Agree IMU placement has been long, but there is no violation of policy. Will continue to monitor the situation.	No Violation of Policy

Coyote Ridge Corrections Center

28.	Family complainant regarding loved one's eligibility for the GRE Program.	Complainant received a call from the counselor followed by a surprise visit from GRE Program security. Complainant was able to sign paperwork regarding loved one's housing in the community. Complainant feels they're on track to be approved for the GRE program and happy to have case closed via email.	Assistance Provided
29.	Reporter has stated that during the COVID-19 outbreak at CRCC in 2020 there was a lack of access to toilet paper. This made it so folks couldn't use the bathroom when they needed to.	Spoke to this person and confirmed he is now getting adequate access to toilet paper. Uplifted concern to assistant ombuds for further monitoring.	Assistance Provided
30.	Patient experiencing pain in groin, requested ultrasound and testing. He went to outside specialist. Additional knots have grown outside of scrotum and inside left testicle. He got the ultrasound and a box was checked regarding concerning results and a need for follow up. This was in 2019.	Confirmed appointment with provider scheduled and will assess for specialist follow up at that appointment. Scheduler cannot request offsite specialist without patient first being seen by DOC provider for updated assessment.	Assistance Provided

31.	This person had eye surgery and did not get a follow-up appointment requested by the eye surgeon. He states that he did not elect to leave the inert mass in his eye and he never was allowed to follow up with the eye surgeon about it.	DOC medical reports patient had two follow-up appointments with the eye surgeon post-op and that this is standard procedure. The surgeon did not request any further follow-up. DOC medical is scheduling him for an appointment to check if anything is in his eye.	DOC Resolved
32.	Family member concerned her loved one was in Administrative Segregation (Ad Seg), would be infractioned to inciting a hunger strike and ultimately transferred to another facility.	Complainant's loved one is no longer in Ad Seg and did not receive a serious infraction 746 for Engaging in or Inciting an Organized Hunger Strike. Additionally, there are currently no transfer orders in his Central File.	Information Provided
33.	Complainant received two mail rejections. Two Manga books (adult content) that were ordered from bookseller. Asked the CRCC mailroom to have them returned to the seller in May so that the money could be refunded. Never heard back. His concern is not that they were rejected, but he wants them returned so that the bookseller will refund the money.	Made outreach to DOC and learned the following: In the case of publication rejection the mailroom typically does not allow for publications to be returned until after the Publication Review Committee renders a decision whether to uphold or overturn the rejection. However, because the committee is so far behind, the mailroom has the discretion to return the item prior to the rejection outcome if it's believed the rejection will be upheld. This is what happened in this case, and the publications were returned to the vendor as requested.	Information Provided
34.	Complainant's cell was searched and his glasses, 2 books, 2 ear phones 3 soaps and 1 lotion were taken from his cell. He was told by his counselor numerous times he would get the items back. Under the impression that the Counselor would retrieve and return his property, he did not grieve. Then he was told that his property was destroyed. He then filed a grievance and was told that it was beyond the times frames.	Made outreach to DOC and learned complainants attempts to resolve this issue via the internal grievance, administrative, or appellate procedures include filing a grievance which was not accepted for being outside the 20-day timeframe from the alleged incident. As the property has now been destroyed, and OCO cannot dictate he be financially compensated by DOC, we provided self-advocacy information for filing a tort claim with the State. Advised complainant this information should not be construed as legal advice.	Information Provided

35.	Complainant was moved from E unit to C unit and alleges he was assigned a cell with a white supremacist who told him he was not allowed to cell with him. he refused the cell assignment, was sent to Administrative Segregation and infraacted. He's releasing soon and would like to spend remainder of his time in E unit.	Per RCW 43.06C.040, all persons requesting OCO assistance must first have "reasonably pursued resolution of the complaint through the internal grievance, administrative, or appellate procedures." Our outreach to DOC shows the complainant filed a grievance for "Verbal Abuse" by an officer. Grievance currently at Level 0. We require non-medical grievances reach Level 2. Complainant also received a serious infraction for refusing cell assignment. hearing has not yet been held. Executive team at CRCC are aware of this and other situations arising from DOC headquarter directives for Unit Consolidations.	Lack Jurisdiction
36.	Patient was injured as the result of an alleged group assault at recreational yard time. Originally injuries were deemed "non emergent" at initial exam by medical staff, subsequent x rays taken revealed broken and cracked ribs. He was given ability to access ice for one week, which ended and has been threatened with infraction if he attempts to access ice machine for pain. Patient requested longer HSR to access ice for healing ribs.	Ice not indicated after 72 hours of injury, used as anti-inflammatory. Care meets DOC Health Plan.	No Violation of Policy
37.	Concern is that in 2019 he grieved that a named officer and a named sergeant were involved in an assault on him in 2018. He learned this information from another incarcerated person and wants DOC staff investigated.	AO reviewed DOC staff response to claim that a named officer and a named sergeant were directly involved in an assault on him in 2018. DOC staff responded in 2019 using the Grievance Program Manual – which does not accept grievances based on hearsay (third party information). The Resolution Program Manual (revised March 2021) also does not accept concerns based on speculation or hearsay information (third-party information or what someone heard). OCO not able to make change on a hearsay claim from 2018 and no violation of DOC Policy #550.100.	No Violation of Policy
38.	I/I says that he is being subjected to undue censorship of his mail. He says that he has not received a notice of rejection or any correspondence about why his mail is being censored. I/I says that	In effort to obtain more information about your situation, we contacted DOC HQ and the information we received back indicates that mail rejections have been upheld. DOC 450.100, Section	No Violation of Policy

	him and his family are not breaking policy and staff made lewd remarks to his wife about her body. I/I says that this is unprofessional.	D.1(A) states: if rejection of incoming mail/eMessage is appealed, the Superintendent/designee will review the appeal within 10 business days of receipt and either uphold the rejection or allow delivery. The decision may be appealed by submitting a written request to the mailroom within 10 days of the decision if appealed by the individual. The mailroom will document and forward the appeal to the HQ Correctional Manager for review and final decision. DOC 450.100, Section E states that the HQ Correctional Manager will review mail rejection notices and appeal requests, if filed, to uphold or reverse the action taken by the Superintendent/designee. A copy of the DOC 05-525 Rejection, or equivalent notice for eMessages, will be provided to the individuals/sender with the decision.	
39.	Was told by his counselor he qualified for GRE, then heard from another counselor that he does not because of an infraction incurred for a 602 Possess Weapon. Cited the recent Kiosk from HQ regarding the GRE Program Expansion Updates on 07/16/2021 which removed the infraction criteria.	DOC is following policy 390.590, which states an individual may be eligible for Graduated re-entry if there are no guilty findings for serious infractions for the previous six months. Eligibility for this individual will be after September 29, 2021.	No Violation of Policy
40.	Complainant relayed concerns regarding mail rejection notices claiming said rejections are retaliatory in nature.	One mailroom rejection contains sexually explicit material per WAC 137-48-020, including altered images, strategically placed graphics/items, or airbrushing. Publications, letters, or eMessages that contain significant or repeated instances of content defined per WAC 137-48-020(13)(a)-(b) may be rejected. Publications, letters, or eMessages that contain any content defined per WAC 137-48-020(13)(c)-(d) may be rejected. Complainant was describing and depicting sexually explicit content in the outgoing letter. The other mailroom rejection contains sexually explicit material per WAC 137-48-020, including altered images, strategically placed graphics/items, or	No Violation of Policy

		airbrushing. Publications, letters, or eMessages that contain significant or repeated instances of content defined per WAC 137-48-020(13)(a)-(b) may be rejected. Publications, letters, or eMessages that contain any content defined per WAC 137-48-020(13)(c)-(d) may be rejected. Mailing contained three photos. One of which was rejected for sexually explicit material depicting buttocks. There was no retaliatory language contained within said rejections.	
41.	Complainant suggests that a named sergeant is harassing him and that a named hearings officer has a conflict of interest. The complaint is retaliation.	AO discussed hearings procedure with facility executive leadership and met with the requester on site. Information he provided to OCO does not match with the independently verified facts. Additionally, no conflict of interest by hearings officer and sergeant - no violation of policy 460.000	No Violation of Policy
42.	Complainant says that excessive use of OC spray was used on him during a use of force in April 2021. Requests use of force review.	AO reviewed confidential DOC records: facility surveillance video; handheld video; serious infraction report; infraction hearing audio recording; use of force report; fight/assault activity review; and supervisor use of force report. DOC Policy #410.200 Use of Force (Restricted) requires that the amount of force used be reasonable and necessary for the level of resistance. According to DOC policy, the amount of force used was reasonable and necessary to maintain safety and security of the facility. This UOF incident also reviewed as part of OCO's ongoing UOF Systemic Report.	No Violation of Policy
Monroe Correctional Complex			
43.	CLOSED CASE REVIEW. He was put in segregation for something he didn't do. DOC staff told him they were aware he didn't do it. They recruited him to catch another person suspected of bringing in	Reviewed case via appeal process. All work from ERO was done correctly. We provided the next steps he needs to take. We cannot impact the change of the infraction.	Assistance Provided

	contraband through visits, and promised to let him out if he did so. He now doesn't have the chance to do so because they have canceled visits because of COVID-19.		
44.	Family submitted complaint on behalf of patient. Concerned about DOC response to medical emergencies and ongoing issues with medication refills. Incident details in case notes. Requested responsiveness to emergencies, continued monitoring, medication refills, and medical care.	New med reorder placed and patient to scheduled to receive refill. Confirmed patient received medications. Uplifted incidents of concern regarding DOC response to patient's medical emergencies and timely medication refills to Health Service Manager and Director of Pharmacy for ongoing monitoring.	Assistance Provided
45.	Complainant states, per the Offender Accountability Act and the Capello Stewart decision he is legislatively exempt from being required to allow DOC to pre-approve an address prior to his release unless ordered on his J&S which does not require an approved address prior to his release.	Outreach to DOC has determined that, through conversations with his counselor, complainant is now amenable to providing a release address.	DOC Resolved
46.	Systemic Issue. Complainant states DOC's existing policies and practices to prevent the spread of COVID-19 have proven wholly ineffective at WSR. Grievance Coordinator is using frivolous, vexatious rewrite requests to delay any effort to resolve COVID-19 issues. Called to express that the priority concern is regarding the handling of the grievances. Use of rewrite requests to roadblock resolution process.	OCO is actively monitoring DOC's response to Coronavirus, including suggestions for preventive actions and actively collecting all recommendations from incarcerated people. We do review all material received, compile trends we observe, and examine trending issues at strategic planning meetings. These reviews will bring ideas for systemic improvements into OCO conversations. Currently OCO does not have the resources to conduct a full investigation of the Resolution Program at MCC. But this issue will be considered as part of the aforementioned reviews of emerging trends.	Information Provided
47.	Concern about a CCP revoke.	OCO does not have jurisdiction over community custody issues or sentencing.	Lack Jurisdiction
48.	Family member was the victim of incarcerated individual's current crime. Obtained a modified No Contact Order to allow visitation while he's incarcerated. DOC is overriding the courts in refusing to allow visitation.	Made outreach to DOC visitation. DOC has the latitude to make such decisions from a risk mitigation perspective to support their current position of denying visitation.	No Violation of Policy

49.	Complainant states that he has received numerous BOE's without being notified per DOC policy. Complainant states that these need to be omitted from his OMNI.	Complainant appealed BOE after Resolution Request was administratively withdrawn. BOE was upheld on appeal as he could only challenge content which was beyond timeframes. Author of the BOE verified a copy was provided to the complainant. Per DOC policies (460.000, 460.135, 460.130) no further appeal is available. Such decisions are final.	No Violation of Policy
50.	I/I has been waiting on 2 pieces of mail containing legal documents pertaining to his case. Both pieces have a tracking number and it shows they have arrived at the facility on May 3rd at 8:13am. He has not received either piece of mail and has not received rejection notices.	DOC 590.500 Section C states that an incarcerated individual assisting in another in legal matters may only possess the other's legal documents/papers while both are in the Law Library, or other area designated by the Superintendent. Section C also states that all personal legal documents/papers must be retained by the individual(s) directly involved in the legal matter. This mail was rejected due to it being sent in from another incarcerated individual.	No Violation of Policy
51.	Closed Case Review. I/I says that he is being punished for exercising his rights and is being discriminated against due to name, race, religion, family. Afraid he will be moved to WSP and needs to be at MCC to be close to Harborview medical. Needs override facility placement. Claims custody staff manipulated medical staff into override of hold so they could transfer him to WSP. Also needs to remain at MCC TRU for access to ADA system for hearing impairment.	Confirmed patient approved for MCC-TRU placement in order to access medical care. Uplifted staff conduct concerns to appropriate OCO staff. Case Appeal - Case was previously closed appropriately and complainant remains at MCC TRU.	No Violation of Policy
52.	Complainant relayed concerns regarding the failure of the Resolution Program to process grievances against staff, and the mailroom. Further claims his mail is rejected on the personal opinions of mailroom staff and that policy is not applied equally to everyone.	Made outreach and determined that one of the Resolution Requests mentioned was processed but not accepted as mail issues have an appeals process. The Request did not proceed beyond Level 0. Also determined a second Resolution Request was processed, and a rewrite requested. Resolution Specialist did not receive a rewrite and the Resolution Request was withdrawn at level 0. Complainants opinion as to photos being rejected	No Violation of Policy

		while others receive similar images is hearsay and we are unable to substantiate such claims.	
53.	CRC Case. He appealed CRC decision to provider, but he doesn't know if DOC staff sent it in. His provider was able to get the Methocarbonol prescribed but only for 2 weeks.	Confirmed with facility MD that the methocarbamol has been approved by CRC.	No Violation of Policy
54.	I/I relayed concerns regarding the timing of her showers and disparities between officers. She feels the Preference form should be available to all officers to allow consistency.	Headquarters' response is the Preference form has nothing to do with showering; the housing review/protocol is what's being referring to. The housing review indicates she has the option to shower, without others present, at the 10:50 count. If this is not occurring, she needs to notify her CUS who will ensure staff are aware of the requirement. The facility's response was that she is allowed out every day at 10:50 to shower during count. There was however one issue about a month ago, on a weekend, involving relief staff in the booth where she was not let out to shower until after count. This resulted in an approximately 10-minute delay.	No Violation of Policy
55.	Complainant alleges a kite was submitted in their friend's name against them and the friend denies authoring the kite, however, won't speak out because of prison code. Complainant says they were moved to another unit and was assured by DOC staff they were not in trouble, the move was temporary, and their job and cell would be held for them. Complainants says they have still not been moved back.	DOC outreach informed us the individual was moved because of information received and forwarded on regarding a potential PREA. DOC was in the process of returning this individual to their original unit when they were notified that C/D units are to be consolidated with A/B units. Therefore, a move back to his previous unit is no longer an option.	No Violation of Policy
56.	I/I relayed concerns regarding inadequate privacy when changing clothes in her cell requesting a courtesy move to another unit, additionally requesting a copy of her DOC Preference Form.	Reviewed again in appeal. Room change was put in but since then an infraction has occurred will have to wait 90 days. Reached out to DOC regarding privacy concerns and possible cell move. Headquarter's response is that policy provides for a courtesy cell move to be requested through the CUS and/or Sergeant. And DOC supplied our office with a copy of the Preference form, which was enclosed with the closing letter.	No Violation of Policy

57.	Complainant states there's an error on his Criminal Conviction Record and is having a great deal of trouble getting DOC to correct it.	Conviction has now been vacated in his Judgement and Sentence (J&S). DOC cannot update a person's Central File without the County of Origin notifying DOC regarding a change. Additionally Washington State Patrol (WSP) must also update their records prior to DOC making modification to the J&S.	No Violation of Policy
58.	Complainant says he went through classification staff in an attempt to get transferred to AHCC. His transfer was rejected without any type of reasoning although others were allowed to transfer but not him. Sgt told him to put in another request at next FRMT.	Made outreach to DOC and noted facility placement decisions cannot be appealed. Classification appeals must be submitted on DOC Form 07-037 within 72-hours of being notified about the decision. Complainant filed a grievance which was not accepted as classification has an established review process through FRMT. Complainant has the opportunity to pursue this matter at his next scheduled FRMT in 3 months.	No Violation of Policy
59.	Lost book returned by the mailroom to the vendor, vendor never received it. Complainant was not served a rejection notice by the mailroom, found out by reaching out via Kite that it was returned due to wrong name/DOC#. Wants to know how the mailroom knew it was his book when he asked about it if it had the wrong name/DOC#?	To obtain more information about this concern we reached out to DOC who provided us with a copy of the Kite, the mailroom's response, and procedures regarding "return to sender" items. DOC Policy 450.100 states that return to sender items do not require a rejection notice. The response from the mailroom to your Kite did not reference your book specifically rather it outlined mailroom procedures generally. "If received @ MCC mailroom it is processed. If rejected, you get notice of reason. If name/DOC# are missing or incorrect it is an auto return to sender."	No Violation of Policy
60.	I/I denied work release and his counselor isn't helping him. He has appealed the issue to HQ.	The referral to work release was decided by HCSC. DOC followed the policy by referring the decision to HCSC, which made a final decision, and gave specific reasons for the denial. Unfortunately, we are not aware of any additional recourse options, the decision is final. He will release from custody in September.	No Violation of Policy

61.	I/I says that the TRU mailroom is actively demonstrating noncompliance with DOC 450.100. I/I says that several items have been held by the mailroom for 43 days without distributing them or providing a notice of rejection.	The complainant did not respond to the recent appeal of 3/23/21. The item in question is beyond the timeframe for consideration for an appeal and the item will not be forwarded to HQ for an appeal consideration per policy 450.100.	No Violation of Policy
62.	I/I received an infraction for a 661 sexual harassment of a staff member. I/I says that the staff member is lying and that video/camera footage will prove this.	No evidence exists that would prove that he was not doing what the officer said he was doing when she looked in his cell.	Unable to Substantiate
63.	Complainant states he was sexually assaulted by another incarcerated individual and attempted to report a PREA to a male staff member. Complainant claims that staff member told him he would have to bring him and the other person into the office to speak with them both. Complainant claims the PREA report was removed from OMNI. Additionally requested assistance filing charges against said individual and request the staff member be removed from the Unit.	Made outreach to DOC and determined the PREA case is currently in review and not removed from the Central File. OCO is unable to assist in matters regarding incarcerated individuals filing suit against another and have no jurisdiction over staff discipline. "Unable to Substantiate" claims that DOC staff required a joint meeting between complainant and the accused. The PREA review is underway with the ultimate decision-maker being the facility Superintendent.	Unable to Substantiate
64.	Complainant states he was having a medical emergency. Responding staff cussed at him and threatened to infract him. States medical determined his issue was an emergency. Felt disrespected and demeaned. Claims staff misconduct.	Made outreach to DOC and determined the Resolution Request reached level 3 requiring an investigation by headquarters. It was determined through the process of interviewing responding custody/medical staff that the brace was broken while doing burpee full body exercises. The failure of the knee brace was determined not to constitute a medical emergency and the complainant was informed the brace would be fixed the following day. Additionally, OCO does not have statutory authority over DOC to enforce the complainant's suggested remedy of 3-day suspensions for two sergeants, to demand write-ups be placed in staff personnel files, or require additional training for staff to conduct their duties in a more professional manner.	Unable to Substantiate

65.	I/I says that he was treated inhumanely and with cruel and unusual punishment by a guard. I/I says that the guard has a history of disrespecting, intimidating, threatening, harassing, and assaulting I/I.	We reviewed all documentation and video available. One video was not held as requested as it shows a strip search, which is a PREA violation. He did request medical assistance and was seen but no mobility assistance was given when transferred. We can not substantiate the treatment by staff as the cell video was not available.	Unable to Substantiate
Stafford Creek Corrections Center			
66.	Patient diagnosed with a particular allergy. He has had 2 medical emergencies/grievance about this issue, one was yesterday. Requested UV protective clothing (pants, shirt, gloves, hat, sunglasses), HSR for window covering, different timing of picking up lunches outside (earlier or boat with breakfast or similar option) to stay out of sun during noon in meantime.	Confirmed provider met with patient, HSRs for items issued and updated in OMNI. Confirmed patient has received all items, except sunglasses which OCO has followed up about with facility health services. Patient shared via phone that issues are now resolved and will follow up with OCO as needed.	Assistance Provided
67.	Patient has not received a follow up. He has requested via kite and has not received appt yet. Received testing (MRI and DEXA scan) and received. Currently has no chronic pain management plan. The naproxen ran out and no pain management plan moving forward. DOC drew blood (6 vials around March or April) and he hasn't received results. He keeps being told he will see a neurosurgeon in July but doesn't have pain management to last him until that appointment. Requested follow up appointment with provider to discuss test results & new treatment plan and a pain management plan while he awaits his specialist appointment.	DOC agreed to meet with patient for follow up. Concerns about impact of delayed care documented.	Assistance Provided
68.	Person is legally blind. DOC refused to renew his HSR for an ADA cell when he transferred to SCCC. He has tried contacting the ADA Coordinator via kiosk with no response. He has tried but has difficulty kiting and filing grievances due to his blindness. He is supposed to have an access aide to help write grievances, etc... but one has not been provided at	Confirmed complainant received ADA cell and assistant. Alerted director of Resolution Program to problems complainant described accessing program to grieve medical scheduling. Subsequent concerns addressed through medical. Individual released prior to discussing case closure.	Assistance Provided

	the new facility. He is not receiving ADA accommodations.		
69.	Appealing infraction based on inconsistencies within the infraction report, such as different times and dates.	I/I has since been released	Declined, Other
70.	I/I was denied multiple houses to get out of prison. He was denied multiple counties for release.	This persons next steps are to appeal the denials to the Assistant Secretary of Reentry for a final decision. They also should mention any concerns of support in that appeal. Family member who input the case was reached out to.	Information Provided
71.	He is being denied and not put on the callout for legal library access has a deadline to the courts by the end of this week.	Contacted facility about ensuring the ADA computers were working. They reported they were. Also directed him to policy 590.500 about priority access and how to receive it.	Information Provided
72.	Complainant says that a mental health professional broke HIPAA and shared confidential information about other incarcerated patients and vice versa. Says that this makes it difficult to engage in treatment now.	Alerted resolution program director of very delayed level III response to complainant's grievance and requested prompt attention. Provided information to complainant regarding OCO's recent systemic work that addresses, in part, this concern. Cannot reach requested resolution of imposing staff discipline, but confirmed that DOC has been informed of concern.	Information Provided
73.	He has been falsely accused of PREA and does not believe it was investigated properly	This person has not been at Stafford for over a year and is out on Community Custody.	Lack Jurisdiction
74.	Says that has heart condition, and was seen last week and a heart monitor attached. As of this am his heart monitor is not working, and he is experiencing skipped heart beats that vary from a 3 second delay to the next beat, to an 11 second delay between beats. Has feeling that his heart is "fluttering" and is short of breath. Was told not a concern until I/I said he had heart surgery in 2018.	Confirmed patient has been seen by medical multiple times since contacting OCO. They are aware of his dietary needs and heart concerns and continue to work on managing his diabetes. A cardiology consult has been scheduled but has not yet taken place. Encouraging patient to continue to contact medical as often as needed to get the treatment he feels he needs. Also encouraging him to comply with medical recommendations as he has not always done so.	No Violation of Policy

75.	Mental health medication was taken when this person was transferred to a new facility. The previous medication was approved by the CRC and worked very well. He reports that the new provider is saying that his history isn't credible and slowly tapered him off the medication. Now his symptoms are back and he really would like to be put back on the meds to feel better again.	Patient's dose was decreased, not discontinued. OCO does not have authority over specific doses prescribed. Confirmed patient receiving appointments and care outlined in DOC Health Plan.	No Violation of Policy
76.	2 Concerns: 1) photo rejections for wearing a DOC button up shirt that showed the v of his neck and chest. 2) He received a BOE for using the facilities during count.	Photos were rejected due to shirt not being fully buttoned. We disclosed all BOE's for bathroom use during count and could not find race discrepancies however, this was data pulled over a few months so more data could yield different results. Using the bathroom during count is a violation in the handbook. No violation of policy found in either part of the concern.	No Violation of Policy
77.	Reported harassment by counselor. Counselor retaliated against him for grieving his behavior and actions-He lied to the ISRB Board saying that he didn't do programming, didn't have a job.	OCO agrees that having a staff member whom the I/I has grieved participate in their ISRB hearing is problematic. Reached out to DOC to share concern history. Actions Taken: Reviewed grievance history for past year. Reached out to upper DOC personnel. Had internal office meeting with Western AO regarding this concern. Reviewed OMNI, Chronos, OnBase and other documentation. Policies Reviewed: ISRB/ programming 350.500 & 570.000, and grievance 550.100 ** This case was re-opened as he needed a response to his HQ grievance to follow through on our recommendation for filing a PRP to appeal ISRB decision.***	Substantiated

78.	I/I can't have contact with kids. The courts made an amendment for him to see his son. However DOC is not allowing this visitation.	We have reviewed J&S documents, received further clarifying documents from his lawyer, and had two separate meetings with HQ about this denial. We are able to substantiate in two separate cause numbers the Judge has specifically named this persons son, as someone they could have visitation with, but DOC has denied that visitation. Unfortunately, we cannot impact further change here.	Substantiated
79.	I/I says that DOC is violating court orders and denying them the right to have visits with their biological child; they find this very detrimental to their relationship growth with their child.	After further review we cannot locate a letter specifically stating the complainants biological child's name. This could possibly assist in DOC allowing visitation. In most successful cases-DOC is ordered to allow visitation. Gave the complainant actions of recourse that are not handled by our office.	Substantiated
80.	staff misconduct & retaliation by a food service employee. In addition to the grievances filed against her, she was also heard telling other incarcerated people that the I/I is a "snitch" and "you guys need to get rid of him" pitting inmates against each other. Manipulating inmates and using BOE as a way to get him fired from his job.	Reviewed via appeal process. Could not substantiate claim and change the BOE nor get his job back.	Unable to Substantiate
Washington Corrections Center			
81.	Complainant states that special "safety equipment" used to block other people and satellites from observing him while in prison has gone missing and wants his equipment returned to him. Equipment will only function when he's in possession of it and thinks he's observed other staff wearing it.	Reached out to DOC and determined the Resolution Request LOGID# provided by the complainant neither exists in his electronic file nor DOC's system. Additionally, the complainant is referencing "safety equipment" which blocks satellites from tracking his movements and observing him in his cell and while showering. Included a new Ombuds Review Request form for additional information on how such equipment	Declined, Other

		functions and why DOC would allow him to be in possession of equipment with such capabilities.	
82.	Patient has been using a CPAP machine for over a year in King County Jail. Has not been able to obtain machine and is struggling as a result of the lack of oxygen.	Confirmed patient issued CPAP and related HSR.	DOC Resolved
83.	Family member is the complainant regarding conditions of housing at WCC Reception Center.	OCO did not receive a Confidentiality Waiver from the Incarcerated Individual who is no longer at WCC. Closing case without further investigation.	Information Provided
84.	Complainant states that per policy he was supposed to be placed in the least-restrictive housing not most restrictive housing during his transfer between facilities.	We made outreach to DOC on complainant's behalf and determined his Resolution Requests were not accepted because classification/transfer decisions have an appeals process. Regarding the complainant's claims of violations of policies. Policy 320.200 was subject to an exception per Rob Herzog's memo of February 3, 2021. However, the exceptions (TV, radio, commissary, and personal photographs) were subject to continual monitoring, with items considered privileges and subject to revocation at any time.	No Violation of Policy
85.	Patient says he had some very emergent medical needs and needs to be transported to Harborview. He says he somehow acquired nano spy gear implanted and a mic/camera device in his right ear that was found on xrays at Shelton medical. They are refusing him treatment, that mentally impaired him and took him off mental health medications. Individual says he is being refused medical attention. See letter for additional information. Requested full pardon, furlough to get proper medical treatment, to be sent to Harborview or Pacific Cataract Institute, lawsuit.	Follow up with specialists not medically indicated, no record of Harborview referral. Records indicate patient is receiving medications and care. No violation of DOC Health Plan. OCO could not impact requested resolutions.	No Violation of Policy
86.	Patient is diabetic and was told by a doctor at Snohomish County Jail that he has been given the wrong medications by DOC. He has filed multiple	OCO cannot impact change in this situation as the office does not have authority to request medical care outside of facility medical staff. No indication	No Violation of Policy

	medical grievances. Patient said he has blood sugar levels over 300 and has been refused medical help at WCC - RC and wants to be taken to Harborview. Requested proper medical care, but not by DOC staff at WCC.	of referral to Harborview. Provided information regarding options for accessing additional care - Offender Paid Health Care or requesting transfer to another facility to access a different medical team.	
87.	States that he was overridden to closed custody based on only on 3 negative BOE's and they will not tell him why else he's being closed out. Policy states that BOE's are not allowed to be the sole reason for custody demotion.	Reviewed case. Was unable to substantiate demotion was caused by his 3 BOE's.	Unable to Substantiate
Washington Corrections Center for Women			
88.	Patient was taken to the ER and they found gall stones. She was told she was supposed to receive medications for nausea and pain when she returned to the facility but she did not receive those medications. Her HSRs are expired/expiring	DOC agreed to meet with patient. Confirmed consult, surgery & post-op scheduled. Facility did not address HSR or interim pain management options, uplifted to HQ health services as partial resolution met/partial unresolved example.	Assistance Provided
89.	She feels targeted by TC staff. She is phase 5 and a specific staff member continues to give her verbals even though she has explanations and proof of why she is having to change her schedule. This staff person made inappropriate statements such as " I am not invested enough to look" when the I/I asks for her to verify her schedule	The verbal warnings received were reversed.	DOC Resolved
90.	My daughter was approached by the officer on duty handcuffed and taken to a scanner the officer told her to give up the evidence she told him she had nothing but a tampon. The officer told her to pull out the evidence so she pulled out the tampon. Then they forced her to make 3 bowel movements. She was taken again to the scanner and again read negative. The officer told her last chance to give up the evidence or she will have to remain in a dry cell. Immediately my daughter had to think of something to prove her innocence so she made up evidence, grabbed a piece of paper, wrote on it F-U and put it up her vagina and told the officer she was ready to give up evidence they took her to the scanner and it	We need more information to pursue concern from the person in custody. I reached out for more information.	Information Provided

	again read negative only this time she pulled out the paper to show them this is all she had to prove that the person who is scanning is giving the wrong information.		
91.	He is here on an interstate compact. He says he does not have legal access.	DOC relayed that if he is working on a case with the other state, he would need to draft a letter of requesting certain things he believes only the other state's DOC has in its possession. Per the interstate compact agreement he should have legal access to information from the other state.	Information Provided
92.	I/I says that she got sent back from work release because of her bad health. I/I says that she did nothing wrong to get terminated. She says she was also terminated from her GRE because of her health. I/I says that her custody level got lowered 3 levels from mil to medium.	Work/Training Release Screen policy 300.500 states, "Individuals will not be denied placement based solely on disability or medical/mental health needs unless determined ineligible by the sending facility health services staff." Health services at WCCW has declined to move her back to work release due to medical needs.	No Violation of Policy
93.	Complainant reports that she was unjustly infractioned for a WAC 892 (giving/selling/trading any prescribed medication, or possessing another incarcerated persons prescribed medication). She was housed in a cell with another person that had their previous cellmates medication. She had just been moved into this cell and writes that she reported that she would not go back into the cell until it was searched. She was "cell tagged" and DOC gave her the 892 as well as her cellmate.	The contraband found was in a common area of the cell. WAC 137-28-220 states: "If contraband or another violation is discovered in an offender's assigned area of responsibility, such as within the confines or contents of a cell, the contraband or other violation shall be constructively attributed (i.e., cell tagged) to all offenders assigned responsibility for that area." DOC will not overturn the infraction.	No Violation of Policy
94.	Patient is working a job that causes pain in her hands with which she has ongoing medical issues. Patient says she has arthritis in her hands, tendons drawing her hands closed. She has an HSR for hand braces and also has heart issues, COPD and skin cancer and is not physically capable of performing her job duties as a laundry worker. She requested HSR for light duty work or change in job.	Job placement staff agreed to find new placement, awaited medial approval. Facility health services refused to resolve concern or issue HSR after OCO outreach. Patient requested transfer to MCCCW, was approved, and transferred. Uplifted to HQ & OCO Healthcare Team as example of unresolved case, noted that patient had to transfer to get resolution.	Substantiated

Washington State Penitentiary

95.	Father requires an ADA cell in the BAR units at WSP. Family member concerned that OCO closed her father's previous complaint about accessing the law library in the HSB (where he is currently housed because of lack of a suitable and available ADA cell in the BAR units).	AO inquired with WSP & HQ Resolution Staff and DOC's ADA Compliance Manager about the status of the past-due Level III Grievance response (due late April 2021), HQ staff worked with WSP leadership to have a computer with LexisNexis content placed in the HSB for long-term ADA boarders like this person. AO discussed protected custody needs with unit staff at WSP & facility leadership at future facility and requested HQ review. All DOC staff state that it is appropriate to house this person at the future facility and the facility is aware of his need for an ADA cell and will be prepared to provide that to him once transferred.	Assistance Provided
96.	Requester says that her friend was removed from a medium custody unit by an officer as a form of retaliation because he did not provide information to DOC staff about a riot. Further, it is suggested that DOC has started an override for him to stay in close custody which will cause him to not complete his HVAC course.	AO spoke with DOC staff at WSP and HQ. Requested additional information about infractions and SIS investigation and reviewed internal documents. After conversations, infractions were removed and person was returned to a medium custody unit.	Assistance Provided
97.	(CLOSED CASE REVIEW) I/I says that the wait for programs has been much longer since the start of the COVID-19 pandemic; this is particularly concerning for those in IMU that wish to level-up for better living conditions. I/I reports that they know someone in their unit who waited over 13 months to be able to enter a program (DOCART); prior to COVID-19, the wait was 3 months at most. I/I is currently waiting to enter a program, and would like certificate courses from outside vendors to be considered for the purpose of leveling up/out of IMU while DOC works through the backlog of program requests.	Updated Case Closure: AO elevated concern to HQ Exec Team and decision made to permit this individual to substitute Cage Your Rage for DOC Aggression Replacement Training (DOCART). Original Case Closure: No violation of policy: Uplifted systemic concern to HQ DOC staff and OCO explained to the person making the complaint that DOC is not in violation of policy; however, we see the cause for concern.	Assistance Provided

98.	Follow up regarding previous OCO case: patient has not received ENT appointment. He has a tumor in right sinus. He received labs but no results and was told he would have to go through a disclosure process to access that info. He is also concerned about high Prolactin levels and no follow up.	Individual released from DOC custody.	Declined, Other
99.	Concern: Prohibited placement was taken off to early now he is back at the unit where he was prohibited from.	Reviewed case. DOC has resolved and removed the prohibited placement and person was transferred.	DOC Resolved
100.	Complainant's loved one is in IMU pending enrollment into the ART program. Due to COVID-19, this maybe quite some time causing this person to remain in IMU much longer than necessary and that will have a negative effect on his mental health. Wants us to review the process, and see if there is another placement option for his loved one.	Reviewed case via appeal process. at this time no further impact can be made. he is programming and will get DOCART once he regains custody points.	Information Provided
101.	Requester states that he is being denied access to work release and graduated re-entry(GRE) because he does not respond to being called by his last name. He states that this denial is not in compliance with policy and he states that this is a discriminatory decision made by DOC staff. He has not been able to review the GRE policy because it is not available in the law library.	AO included DOC Policy # 390.590 Graduated Reentry with closing letter. Similar complaint previously worked by OCO in 2020 and no new information about preference of not being called by last name. OCO not able to make change on this complaint as no violation of policy.	Information Provided
102.	Caller states that in 2019 his TV was lost in transit. DOC recently found the TV, after he has already bought another. He is now being told that he'll have to dispose of one of them. He filed a tort claim and was offered 0.05 cents.	TV was sent for donation, DOC does not allow incarcerated folks to decide where items are donated to. Explained that OCO cannot provide reimbursement but that he does have the option to file a tort claim.	Information Provided

103.	<p>Person was involved in a 2 x1 attack and he was in a coma for over 3 weeks and he has very severe symptoms of a brain injury not able to walk on his own and has speech issues. Has been in a medical holding cell with no speech therapist ever seeing him he has only had a couple therapist see him and not been consistent what so ever he has been complaining of his care for weeks and no one has ever come and helped him with his therapy yet he hasn't been given showers on his scheduled days he has been placed in the hold and they took away his cane and walker he is a huge fall risk and isn't in a place physically emotionally mentally to be on a holding medical cell alone all day he has had many falls and sustained injuries from each one has been taken for X-rays due to the pain from injuries sustained from his falls and yet is still left alone all day and he is in need a long term rehabilitation schedule and the hospital gave his case plan and he hasn't been updated on any of his care or given any of the Care.</p>	<p>Confirmed that patient has been housed in medical at WSP receiving care and has been recently released by medical to transfer to medium custody at another facility. As this complaint came from the community and not the patient involved, sending letter to ask if the patient has anything they would like OCO to look into. No grievances regarding anything on file in OMNI.</p>	<p>No Violation of Policy</p>
104.	<p>Caller reports that he was showering and the nurse didn't want to give him his meds when he was leaving the shower. Reportedly, he began yelling and reported to staff that he was going to harm himself. Staff then moved him to his cell and left, not responding to his reports. He then self harmed and when staff re-entered the MOD and found him self harming, he was then taken to medical. He states that DOC staff are not appropriately investigating his claims.</p>	<p>After person received a Level I response, AO reviewed DOC's Level I and II investigatory work. DOC investigation appears thorough: the DOC documents show that he was interviewed and that the investigation was appropriately conducted per DOC policy 550.100 Resolution Program.</p>	<p>No Violation of Policy</p>

105.	I/I says that he has been housed in the IMU for over ten years and was on death row for most of that time, even though the death penalty was removed two years ago. I/I says that everyone else got out of the IMU except for him. He says that DOC told him that he needs to be sent out of state due to the notoriety of his crimes. I/I says that he suffers from mental illness and am on antidepressants and antipsychotics due to his time in the IMU.	DOC is currently doing what they can to place this person out of state. There are currently many safety factors that creates difficulty finding out of state placement for this person.	No Violation of Policy
106.	Person states that because of known STG affiliation and a reported prohibited placement he should not have been housed in a specific close custody unit. Person alleges that because he was placed in this unit he was forced to act violently, given a MAX program, demoted, and placed in isolation.	AO learned about this complaint while performing cell-front OCO wellness checks in segregation. At that time, AO provided self-advocacy information related to appealing classification decision. After HQ declined his classification appeal, AO reviewed multiple internal documents related to this individual, conferenced with HQ staff about his complaint, and reviewed DOC's working matrix used to determine appropriate placement for all active STG members in close custody at WSP. After thorough review, AO found no violation of policy, no active prohibited placement, and no relevant active separations. Individual received a 502 aggravated assault for participating on a two on one assault and MAX placement is within policy.	No Violation of Policy
107.	Person is a Black man with braids in his hair, housed in the IMU. He refused to remove his braids to complete a strip search and missed two visits with his family members. Concerned that this is racial discrimination.	AO discussed this concern with Facility Executive Leadership and stated that the requirement to remove braids seems to be disproportionately impacting certain racial groups more than others and asked for a creative solution that maintains safety and security that does not require removing braids. DOC policy #420.310 requires a full strip search to leave the MOD while in IMU. A full strip search includes bending at the waist and running hands through hair vigorously. DOC maintains that a strip search requires the removal of braids. This person has the right to wear his hair in a style of his choice and he is choosing to maintain the braids.	No Violation of Policy

		OCO accepted the no answer for this complaint and referred this topic for a potential, systemic race equity review.	
108.	Complainant reports that he is not getting access to hepatitis treatment. He was told that now because he's so close to the gate, DOC won't start the treatment, even though he has been trying to get treatment since 2020. he was told at WCC when he was diagnosed that this would be treated at his main facility.	DOC Hepatitis C treatment screening asks if the patient has enough time to complete treatment. If the answer is "No" (<6 months until release), DOC instead provides community resources, documentation, and provider referral in some cases. Individual experienced delays in Hep C treatment due to DOC-wide halt on Hep protocol. Uplifted case example to OCO Director of Patient regarding Hep C protocol. Individual now in work release.	No Violation of Policy
109.	Closed Case Review _ Original Complaint: Mom was terminated from visiting about three years ago for introduction but he states that she was not a part of the introduction. He wants to help get on a pathway to have his mom's visitation reinstated.	Closed Case Review: Original casework correct. Provided additional information in closing letter. Original Case Closure: Visitation is rejected per policy; his mother can submit a new application after some outstanding legal matters are addressed.	No Violation of Policy
110.	The infraction indicator does not match up with the violation codes on the OMNI Infraction Summary	The infraction appears to be accurate. DOC's software is programmed to not change the type of infraction when they are changed within a hearing. However all of the information is accurate once someone opens and reviews the infraction. I could not disseminate how this issue could impact a persons health, safety, welfare or, rights. I requested he follow up if he had more details about the negative impacts of this on people who are incarcerated and that I'd review further at that point.	No Violation of Policy
111.	Closed Case Review. I/I says that he believes DOC is intentionally holding I/I past their ERD and is using erroneous policies to do so. He says that in the past he was held past his ERD and does not want this to happen again. I/I says that DOC does not have a	Per RCW 9.94A.729(5)(c) DOC does have the authority to hold people past their ERD if they do not have an approved release plan.	No Violation of Policy

policy that aligns with the directives and provisions of RCW 9.94a.729.

112.	Overall concern is retaliation and inconsistency among the DOC staff.	Was not able to find evidence to support retaliation. Instances occurred with different DOC staff in different areas. I do not have a way to substantiate their relation.	Unable to Substantiate
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