## OFFICE OF THE CORRECTIONS OMBUDS

Monthly Outcome Report: July 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.

Starting 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). Although an individual case report with recommendations for systemic reform is not being produced for the cases herein, the cases will still inform and may be included in a future systemic issue report.

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/appellate 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 July 2021

Institution of Incident	Complaint/Concern	Outcome Summary	Case Closure Reason
<b>Airway Heights Correcti</b>	ions Center		
1	Person received a 509 and 652 related to the disturbance that happened at AHCC. Person says he had no involvement with the incident.	Reviewed video and lifted concerns to AHCC administration; infraction overturned.	Assistance Provided
2	Person received 509 and 652 infractions for an incident when he was locked outside of his cell; found guilty.	Reviewed video and lifted concerns to AHCC administration; infraction overturned.	Assistance Provided
3	Person received 509 and 652 infractions concerning a incident caught on video. Person was found guilty in the initial investigation and appeal was denied.	Reviewed video and raised concerns to AHCC administration; infraction overturned.	Assistance Provided
4	Complainant says that he received a notice threatening to dispose of his property if he does not pay before May. He says that he cannot pay due to his current placement. He is currently in Monroe and wants his property shipped from AHCC.	Some missing property has been sent out to this person. OCO let him know to follow up if there are any specific items missing.	Assistance Provided
5	Complainant received a negative BOE. The information wasn't accurate in the BOE so he appealed. DOC staff changed BOE to neutral, but the language wasn't changed and still reflects an inaccurate description of the situation.	BOE has been deleted from this person's record. The BOE did not meet criteria to be marked as a behavior.	Assistance Provided
6	Individual received two copies of grievance with different comments: one said to file PDR to get the grievance response and his medical records and the other said he was in a positive unit because of a positive COVID test. He never received a record and DOC was telling him it doesn't exist. He did a records review but did not receive a response. Individual also requested test results and received no response to multiple kites. When he grieved it, he was told there is no documentation of those kites. Grievance response changed from	Health Service Manager met with patient directly to discuss grievance and next steps.	DOC Resolved

rewrite to not acceptable when appealed because it was past 5 working days.

7	Patient's right hand was seriously injured. He went to see a hand specialist, who recommended that he follow up with a neurology specialist within two weeks, but it has been over a month and he has not been seen. Requested appt with neurology specialist.	Confirmed DOC has ordered additional testing, nerve conduction study, and follow up appointment for updated assessment with DOC medical. DOC mentioned a 6-8 week waiting list for neurology specialist appointments. Re-review: Prior case closure was handled	DOC Resolved
	Updated concern: He was seen by a specialist in	appropriately. Letter expresses desire for new	
	January and hasn't been seen since. His	pain medications; informed complainant that he	
	symptoms are worsening. OCO was told that "his	should seek an evaluation with his provider so that	
	symptoms are consistent with nerve compression		
	and would likely resolve in 1-2 months." It	treatment plan including medication options.	
	appears the symptoms have not resolved and		
	have worsened. Last OCO heard from DOC, they said if not resolved, they would consider further		
	studies, including nerve conduction studies. OCO		
	was informed he was scheduled for continued		
	monitoring and referral if indicated.		
8	Patient has to file an emergency grievance to	Resolution does not include current medical access	Information
	receive adequate care. This is problematic. He	or treatment request. Complaint documented in	Provided
	has asked for care before and didn't get this	OCO database. Provided information for following	
	response. He saw a nurse who was going to do hi	-	
	care and then she disappeared, never came back,	and more details to provide.	
	resulting in him having to file a second		
	emergency grievance for proper care. Requested		
	OCO review grievance situation and use example as needed for systemic review.		
9	Reporter states that he never received a mail	Explained that DOC had directive from the IRS to	Information
5	rejection for his IRS debit card. He states that this	•	Provided
	is a violation of DOC 450.100 Mail for Individuals	The debit cards were not processed by the	- Torraca
	in Prison.	mailroom in any way. They were directly returned.	
10	Individual has been asking for further evaluation	Confirmed x-ray and updated treatment plan. DOC	No Violation of
	and treatment for a back injury. He recently	expressed plans to discuss additional options for	Policy
	received a physical exam while in segregation and	chronic back pain. Confirmed HSR for cane and	
	was given medication at that time. Since then, he		
	continues to have pain, and says medical	indication" for MRI or surgical consult and did not	
	wouldn't see him at all. He has put in kites to be	approve that request. DOC also said he is not a	

	seen because he considers it a medical emergency. When released from segregation he was wheeled to medical to get his cane. He asked for lower bunk, lower tier HSR and had not been evaluated for an HSR. Officers provided him with a lower bunk, lower tier, but threatened that he would be moved. Individual has not been seen or reviewed for an HSR. Since medication ran out, he has no medication at all. Requested cat scan, x-ray and/or MRI – further diagnostics testing, pain management, medical equipment and HSRs, and treatment plan.	candidate for long term pain medication at this time. He is receiving treatment and testing in compliance with the DOC "Offender Health Plan." Appeal/Re-review: Facility Medical Director states that patient has been improving over the past 3-4 months. Request for MRI was submitted by provider in March 2021 but denied by FMD as being not medically necessary based on a consult by DOC orthopedic specialist, and was also denied by CRC. Although MRI appears to be a reasonable request given the patient's prior surgical history, DOC continued to state that study was not medically necessary. OCO is unable to override clinical / CRC decision, but DOC followed its internal process for care decisions and therefore there has been no violation of policy.	
11	Complainant's loved one is being charged with an assault based on confidential information after another individual hurt themselves in the shower. Individual is being transferred to WSP.	Reviewed the disciplinary packet and confidential information. Appears to meet the "some evidence" standard. The complainant's loved one has not raised additional evidence that would contradict the infraction report.	No Violation of Policy
12	External stakeholders concerned that in January multiple people were extracted from their segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of use of force. This group complaint will likely be documented in the forthcoming systemic review of Uses of Force.	No Violation of Policy
13	Patient has been trying to receive treatment for a decade at the same facility, with marked effort over the last two years. The individual's diagnosis was confirmed via fiber scan 4 months ago but was told they were not the top of the priority list; they have still not received treatment. Patient also requested shingles shot over a year ago with no response. Requested to begin treatment as soon as possible and the receive a shingles shot.	Confirmed patient scheduled for shingles shot. Test results showed minimal liver damage and patients with more damage have been prioritized. Infection control is working on a treatment plan for him. DOC says patient also had to be cancer free for a period of time before testing/treatment could begin.	No Violation of Policy
14	Received an infraction for refusing a barber job. Individual said he had not received any training for being a barber and many individuals are very	Requested and reviewed DOC staff narrative regarding complainant's concerns regarding skill level and scheduling of video visits. There	No Violation of Policy

	particular about their haircuts; he was concerned that he would have problems if he cut people's hair wrong. Says that he tried to talk to staff and did not receive a response before he quit.	appeared to be sufficient evidence to support the 557 infraction. Attempts were reportedly made to accommodate visit conflicts, and the consequences for quitting were made clear to the individual before he resigned.	
15	This person was infracted for possessing a weapon for having what he reports as bite marks on his ID card.	Requested review from facility administration and compared the individual's ID with the relevant WAC elements and safety bulletin. It appears there is sufficient evidence to support the infraction, and administration upheld the hearing determination.	No Violation of Policy
16	External stakeholders concerned that in January multiple people were extracted from their segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	AO reviewed DOC policy 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of use of force. This group complaint will likely be documented in the forthcoming systemic review of Uses of Force.	No Violation of Policy
17	Complainant says that he waited outside the clinic area where a CO told him that no more shots were being given out. He told the CO that he understood and that he needed to ask a question not pertaining to the shots. The CO began chastising him, so he returned to his place in the dayroom. The CO followed the complainant and continued the verbal abuse. Later complainant was called to the officers' station and was going to apologize for the misunderstanding but was given a negative BOE and was told that he could not appeal it.	BOE was written in accordance with DOC 300.010 Behavior Observations.	No Violation of Policy
18	Complainant reports that DOC is not allowing him access to a civil hearing. Reports that his counselor told him that DOC said not to facilitate any hearings for prisoners.	DOC is in compliance with DOC 590.500. There was no outreach from the court regarding this hearing and appearances for hearing need to be set up by the legal liaison.	No Violation of Policy
19	DOC will not place him in the unit that has positive pro-social people living in it. The living unit this person is currently in is isolating and they feel like they were placed here because of discrimination.	Provided resources for self-advocacy for getting a unit change. DOC is not in violation of policy with this housing decision and there is no evidence of staff discrimination or misconduct within the process of deciding placement.	No Violation of Policy
20	External stakeholders concerned that in January multiple people were extracted from their	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated	No Violation of Policy

	segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	grievances; disciplinary hearing records; photography and video of use of force. This group complaint will likely be documented in the forthcoming systemic review of Uses of Force.	
21	External stakeholders concerned that in January multiple people were extracted from their segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of use of force. This group complaint will likely be documented in the forthcoming systemic review of Uses of Force.	No Violation of Policy
22	External stakeholders concerned that in January multiple people were extracted from their segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of use of force. This group complaint will likely be documented in the forthcoming systemic review of Uses of Force.	No Violation of Policy
23	There was a demonstration in the unit in January; half the people present were infracted. Individual requested witnesses and they were denied. Says he was talking to DOC staff at his door. He was downstairs in the dayroom very shortly but he returned.	DOC reviewed the video and identified the complainant and cellmate exiting their cell when the demonstration began. DOC is upholding the infraction.	No Violation of Policy
24	External stakeholders concerned that in January multiple people were extracted from their segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of use of force. This group complaint will likely be documented in the forthcoming systemic review of Uses of Force.	No Violation of Policy
25	External stakeholders concerned that in January multiple people were extracted from their segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of use of force. This group complaint will likely be documented in the forthcoming systemic review of Uses of Force.	No Violation of Policy
26	External stakeholders concerned that in January multiple people were extracted from their segregation cells after participating in a group disturbance during COVID-19 pandemic. Requested review of Use of Force.	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of use of force. This group	No Violation of Policy

		complaint will likely be documented in the forthcoming systemic review of Uses of Force.	
27	A serious infraction appeal process policy was not followed per DOC 460.140 Section VII (B1) "The appeals panel will: Respond to all appeals within 15 business days of receipt."	DOC did not follow the timeframes in their policy; however, according to WAC 137-28-400, failure by DOC staff to adhere to timelines set out in their policy "shall not be grounds for reversal or dismissal of a disciplinary proceeding." Recommended that he write to the DOC Disciplinary Program Manager as a self-advocacy option.	Substantiated
28	Individual experienced a use of force while being housed in the gym (because of COVID-19) in January 2021. The allegation is that after he filed an emergency medical grievance, which was denied by staff as an emergency, he was told to "cell in" by staff. An emergent use of force ensued, and the individual alleged that he was violently forced to the ground, handcuffed, and then moved by wheelchair to the segregation unit with his feet dragging on the ground. After the incident, he received three disciplinary infractions.	AO reviewed DOC 410.200 Use of Force (Restricted); Use of Force packet; associated grievances; disciplinary hearing records; photography and video of the Use of Force. AO interviewed staff involved in Use of Force, the person who experienced the Use of Force, and his witnesses. Per policy, emergent Use of Force does not require a handheld video camera record incident, and security surveillance video of the gym was not retained based on "operator error". DOC states that no video of Use of Force exists. Staff state that he was escorted to the ground and strongly disagree that he was violently placed on the ground. Video of escort to AdSeg documents person stating that he preferred his feet be dragged on the ground instead of held up by staff, as that position increased his existing back pain. As to disciplinary decision, refusing a direct order was upheld; other infractions dropped. This complaint will likely be documented in the forthcoming systemic review of Uses of Force.	Unable to Substantiate
Cedar Creek Corre	ections Center		
29	Individual is requesting assistance for fiancé and mother of his son to receive approval for video visits.	OCO could not find a violation of DOC 450.300. Due to the history of domestic violence concerns, although resolved, DOC still reserves the right to deny that visitation. It does look like complainant may have visits with his son under the supervision of a third party. DOC will not reverse decision at this time. OCO is currently working with DOC to	No Violation of Policy

## encourage creating a pathway for everyone to have visits.

		Have visits.	
lallam Bay Correcti	ons Center		
30	Individual was put in quarantine for 10 days prior to transfer; caller claimed it was due to facility not updating individual's information. Individual had just left segregation after almost 100 days. Caller is concerned about individual's health after prolonged isolation and did not believe individual was at fault for current segregation. Caller relayed concerns related to food quality and access, as well as access to radio and TV.	DOC confirmed that, due to documented protection concern and undocumented concerns, this person's placement in administrative segregation was necessary for safety and security. Concerns were substantiated and DOC has placed this person in a desired facility.	DOC Resolved
31	Complainant wrote on behalf of everyone housed in one unit. Unit staff are not following the policy put in place regarding access to radios and TVs while on Ad-Seg. Complainant says he was moved, due to construction, from a pod that has power to a pod that does not have power and DOC took away the radios and TVs.	Informed complainant that concern was uplifted to ERO for that facility and provided information on how to reach them directly to follow up. Complainant has also since been transferred to another facility.	Information Provided
32	Individual had his cell searched last year in March and had a razor taken because it had been made unauthorized paraphernalia. This year in March his friend ordered him a new razor. When he went to property to pick up the item, he had the original search report that stated he lost the original razor. The property officer took the report from him stating that he was not supposed to have it, and that he needed a disposition form. The unit won't do a disposition form without the search report and property. Property wouldn't do a disposition. They sent the first replacement item back. He has still been working on trying to get a disposition form so he can receive his replacement item because now another friend has ordered a replacement for him.	For the disposition to take place the old item has to be turned in first. Notified the family member and complainant.	Information Provided
33	Individual's property was taken and stored in June 2020 after a fight at WSP. He was sent to CBCC and the officer told him that his property was on its way, then they didn't know where it	Needs to file a tort claim to locate his belongings and or get compensation. Sent information on the next steps to take.	Information Provided

	was. He left CBCC in November and transferred to MCC. CBCC wrote him and said they disposed of it.		
34	Individual has an older television that he would like to have repaired. DOC is not allowing him to send it out for repair. He attempted to grieve it and it was not accepted.	We were able to help this individual and DOC has agreed to let them send their TV out for repairs. They have to pay for shipping cost.	Assistance Provided
35	Complainant says that he was a victim of sexual assault/misconduct while incarcerated. He says that he was unable to report this assault due to staff. He also says that he did not receive an adequate, timely investigation on this matter, where evidence could be collected. This lack of support caused additional psychological trauma and distress.	Despite the claim that the complainant was unable to file a PREA because of staff interference, DOC records indicate that he did file a complaint and it was investigated. There is no violation of policy regarding how long the investigation took, as there is no time limit on PREA investigations in DOC policy. The PREA investigation includes handwritten statements from the complainant stating that he will not participate in the DOC investigation. The complainant wishes to be compensated for the distress the incident caused him. OCO has no authority over this and we have provided him with information on how to file a tort claim with the state if he should choose to do so.	Unable to Substantiate
36	Patient was in quarantine but not able to shower, call his lawyers, or family. Complainant believes that this is in retaliation for filing grievance against a CO who was in the quarantine unit. Also reports that he had medical crises but did not receive proper medication.	Can find no grievances outside of level one that say there are issues with the CO. Those need to be grieved before we can look into them. We cannot provide compensation; informed complainant that he can file a tort claim if he would like to pursue compensation.	Lack Jurisdiction
37	Complainant says that in the summer of 2019 he was assaulted and the COs working lied in their reports that they were in a fight with another incarcerated person. He says that he was subject to cruel and unusual punishment because the COs lied in the infraction report. Also says that when he was transferred into protective custody, they lost his shoes.	As this incident took place so long ago, there is no video footage to review. All of the documentation states that the complainant was in a fight with another person; we are unable to substantiate that the staff lied in their reports. Complainant wishes to take action against DOC and be reimbursed for his lost shoes. As OCO cannot assist with legal action and cannot make decisions regarding reimbursement for lost property, OCO is providing information on filing tort claims for the shoes and informing the complainant that we cannot assist with litigation.	Unable to Substantiate

<b>Coyote Ridge Correcti</b>	ions Center		
38	Patient still has not received shot to relieve pain for previous diagnosis. Called him down to see a new provider, who looked at patient for 10 minutes, minor range of motion exercise. Does not feel confident that the provider understood him correctly. He was put on callout for pain relief over a month ago and still hasn't received it.	Patient received shot, appointment with provider, and updated assessment. Patient said new provider also mentioned disagreement with previous diagnosis. Additional testing (MRI and cat scan) was ordered for updated diagnosis/second opinion. Patient gave OCO permission to close case as resolved via hotline, no closing letter.	Assistance Provided
	DOC has refused to give him an MRI. Requested CRC review over a month ago but hasn't received a response. Patient also feels he is having continuity of care issues after having 5 providers since 2014, as symptoms continue. Disagrees with diagnosis from 2015 and he would like a second opinion. Concerned he has a condition that isn't being treated.		
	Requested short-term pain relief, long-term pain management plan, MRI & proper diagnosis/second opinion.		
39	Patient has dealt with pain and blood in urine for about a year. He was able to go to the kidney specialist, but that doctor said he had to go to the urologist and DOC still has not made it. Requested urology appointment.	Urology originally recommended nephrology. DOC agreed to follow-up appointment to discuss urology versus nephrology care and assess for need to return to the urologist. Patient was seen for follow up and referred to urologist. Confirmed patient scheduled for urology appointment.	Assistance Provided
40	Patient has gender dysphoria and wanted to take a pause on their transition due to familial concerns. They kited the PA who they have been working with that they want to pause, but the PA said they are stopping the HRT altogether. Individual says they have been incurring more mental and emotional distress from being off HRT but the PA is not allowing to get back on it. Requested to change providers and be back on HRT.	Confirmed HRT prescription on file and picked up. Confirmed scheduled labs and follow up appointment with patient to discuss any ongoing concerns. Patients are assigned providers and OCO cannot impact change related to this request.	DOC Resolved

41	Complainant has been waiting since 2019 to receive his dentures. DOC began the process for him to get dentures in 2019 and he still has not received his dentures.	Complainant has been seen by dental this month. This is still a very long time to wait for dental care and should be more in line with care available in the community.	DOC Resolved
42	Disagrees with Risk Level Classification (RLC) as High Violent.	Outreach to DOC confirmed his Criminal Convictions Records (CCR) was already reset to trigger a reassessment of the Washington ONE following feedback from the Case Management Services (CMS) team. As a result of the reassessment resulted in his RLC being modified to Low.	DOC Resolved
43	Family member complaint regarding individual in the Secured Housing Unit (SHU) at Larch Corrections Center for the past 5 days and is Pro Se. Individual has not grieved or appealed as he has ongoing issues of discrimination and violation of his civil rights. Individual filed suit against the State of Washington, making communication between him and the state difficult. Requesting intervention by OCO to gain access to a parenting seminar offered to him by a Family Council, which is only available at four of the state's correctional facilities, one being WCC where he is presently housed.	Individual no longer at LCC or WCC. Family member relayed multiple concerns including access to a parenting seminar offered by the Family Council, issues while being housed in the Secured Housing Unit (SHU) at Larch Corrections Center (LCC), violations of civil rights, issues regarding grievances, and limited access to the law library. Previously OCO spoke with this individual regarding alleged misapplication of jail time certification credits for which all outreach efforts by OCO on his behalf, and subsequent reviews by both DOC headquarters and facility records department found no policy violation. Provided Ombuds Review Request Form to file a complaint regarding the most pressing issue as we do not have the capacity to simultaneously tackle multiple complaints for one individual.	Information Provided
44	Concerns regarding the mishandling of confidential and personal mail by mailroom and staff. The suggested resolution is a full investigation into the mailroom to hold staff involved accountable, and full financial compensation.	Made outreach to DOC and determined a complaint with the Resolution Program, with a Level 2 response notifying complainant that "staff received training to prevent future occurrences of this type." OCO does not have statutory authority to demand staff receive training; we currently do not have the resources to conduct a full audit of the mailroom and staff at CRCC. Appears the complainant may be seeking financial compensation per their suggested resolution. Provided tort claim self-advocacy option, not to be construed as legal advice.	Information Provided

45	From December 2020 to May 2021, complainant observed staff were not following CDC guidelines such as masking and social distancing to control transmission of COVID-19. Complainant was worried that an outbreak would occur, and their pod was currently quarantined. Some people in their pod have tested positive for COVID-19, and all visits have been cancelled. Complainant filed an emergency grievance in February/March of 2021, but was given confusing instructions about not following procedure.	Explained our process for alerting DOC of issues with staff not following CDC guidelines, will continue to monitor DOC's response to the COVID- 19 pandemic.	Information Provided
46	Complainant relayed concerns related to mailroom processes/procedures including access to financial and business offices in a confidential and secure manner for multiple individuals including the complainant. Also provided recommendations to include in a review of systemic issues surrounding the handling of incarcerated individuals' confidential/sensitive mail and suggestions for policy review.	Thanked complainant for relaying concerns, suggestions, and recommendations. OCO is actively collecting recommendations for possible systemic work from incarcerated people. These will be filed for annual review. At this time, we will not be opening an individual case regarding this issue as current DOC policy allows for the review of mail not designated as legal mail.	Information Provided
47	Caller reports that religious items were never sent to new parent facility.	An initial complaint was filed with the Resolution Program. However, it was sent back for a rewrite to which the complainant did not respond. Therefore, the complaint was administratively withdrawn. As the complaint was closed out at Level 0, we lack jurisdiction. Per RCW 43.06C.040, all persons requesting OCO assistance must first have "reasonably pursued resolution of the complaint through internal grievance, administrative, or appellate procedures."	Lack Jurisdiction
48	Caller was hospitalized for six days and his emergency contact was never called. This person wanted to know why a six day hospital stay doesn't qualify as "seriously ill." He wants OCO to investigate so that others don't have this experience.	Following outreach to DOC there was no violation of DOC 610.600 Infirmary/Special Needs Unit Care as clinical staff did not deem it necessary to place the complainant on "Seriously III Notification." Complaint was further investigated during the resolution process where the medical chart was reviewed and determined the illness did not meet said criteria; therefore the emergency contact was	No Violation of Policy

		not notified in order to guard patient's protected health information.	
49	This person wants to be transferred back to CRCC from AHCC.	Provided information for self-advocacy. DOC is not in violation of policy by making this placement decision. Ensured that his property was received at his new facility of AHCC.	No Violation of Policy
50	The Third District Court of Appeals ordered an infraction be stricken from individual's record. Ruling took almost two years. Now DOC is telling the individual that they cannot remove it from his electronic file as the attorney general is going to file an appeal. Wonders whether the infraction be stricken pending the appeal ruling, or if he potentially must wait another two years until the final ruling (which could affect his release planning).	To obtain more information about this concern we reached out to DOC who determined the Records Department must wait until the court rules on the appeal to remove the infraction. They further stated that the appeals process usually does not take as long as the original court ruling. DOC is not violating any policy/law/procedure in making determination.	No Violation of Policy
51	Complainant says that he and several others are victims of incorrect calculations of their sentenced time. Says time is being deducted from the max term instead of the minimum term.	Reviewed policy and time calculation. OCO was not able to find any issues with the time calculation. Also, not able to find in policy where it clearly states that DOC is required to use the minimum term to calculate earned time.	No Violation of Policy
52	Individual's email rejected as third party when individual was asking a family member to look up a law.	Rejection log ID number provided by the complainant does not match any rejection notices issued by CRCC mailroom. We are unable to pursue this issue without the correct information. Also, in correspondence from DOC headquarters— in response to the complainant's mailroom issues—DOC further reviewed the complaints and found them to be unsubstantiated. Enclosed an Ombuds Review Request form should the complainant wish to pursue this further.	No Violation of Policy
53	Unauthorized paraphernalia were found in individual's cell. These items belonged to his cell mate, and the individual did not know they were in his cell. DOC staff dropped one infraction but not the other. This person was set to go to work release but, because of this infraction, will not be able to go.	OCO reviewed hearing documents and statement from other involved people in custody. WAC 137- 25-030(2) states if contraband is discovered in an individual's assigned area of responsibility, such as within the confines or contents of a cell, the contraband shall be constructively attributed to all individuals assigned responsibility for that area. Because contraband was found in the cell,	No Violation of Policy

54	Person was found guilty twice of a 752 (contraband in cell) when he states that he was not in the room at the time of the incident, nor did he have an idea what was in the room. There were also other people in the room at the time,	regardless of anyone's statement, the infraction meets DOC standards. OCO was only able to locate one 752 infraction. Because the items that were confiscated were located in the common area of his cell, the cell tag rule does apply and he can be infracted for it.	No Violation of Policy
55	<ul> <li>making the cell tag not accurate or viable.</li> <li>Complainant reports that he was not afforded his right to attend his disciplinary hearing. He also reports that DOC failed to take a picture of the evidence; he states that there was no proper evidence to uphold the infraction.</li> </ul>	Reviewed infraction narrative and requested review by DOC administration. Complainant was reportedly given information on the date, time, and location of the hearing before it occurred. DOC accepts staff and witness statements as sufficient evidence for a 752 infraction, despite lack of photo evidence. Informed complainant that OCO plans to do a systemic review of disciplinary policies and procedures.	No Violation of Policy
56	Complainant says that theft of his mail/passwords, use of his Jpay funds, and purchasing of music on his account has occurred. Says that he was hacked and no resolution to this issue has addressed.	Was not able to find evidence to prove that anyone else used the individual's stamps.	Unable to Substantiate
57	Person filed a PREA allegation stating that he was sexually assaulted by two named officers. Person was forced to undress and complete a UA without being offered a swab. Person communicated to OCO that he is refusing UAs because he objects to doing a strip search based on personal reasons, and wants to be able to take a swab UA or another process that does not require a strip search. He believes that he is experiencing retaliation because of a relationship with a former DOC employee.	AO reviewed DOC PREA investigation, including surveillance video of complainant refusing to submit to a UA. DOC closed PREA case as unfounded and AO discussed the findings with the facility PREA team; investigation appears thorough. AO reviewed allegation of retaliation using OCO's three-pronged approach: (1) protected action (e.g., filing a grievance or PREA allegation), (2) intentional adverse action (such as a disciplinary infraction, housing/program changes, etc.), and (3) a nexus between the two. AO unable to substantiate evidence of retaliation.	Unable to Substantiate
58	Complainant says that he has been challenging DOC's double standard policies for sexually explicit material. Says that a staff member told him that if he continues to challenge these policies, he will continue to receive infractions	OCO's three-pronged approach to retaliation is: (1) protected action (e.g., filing a grievance or PREA allegation), (2) intentional adverse action (such as a disciplinary infraction, housing/program changes, etc.), and (3) a nexus between the two. OCO	Unable to Substantiate

	and it could cost him his clemency. He feels threatened by DOC staff and feels uncomfortable. He attempted to mail out an excerpt from a book on the library cart and was infracted for sexually explicit communication; the book got removed from the cart, and an officer told the population that it was complainant's fault.	reviewed and was unable to substantiate a clear, unambiguous nexus between the complainant's protected actions and reported adverse reactions.	
Larch Corrections Center			
59	Complainant says that a staff member falsified documents by claiming complainant had a positive test of a substance that was found in the trash can of his cubical. Complainant says that, due to the falsified information, his due process rights were violated and his good conduct time is being revoked. He says that there was no substance in his trash can and there is no evidence to support it.	At this time, OCO cannot substantiate concern. The infraction for drug paraphernalia had no mention of leafy green substance. The items were tested and came back positive. Sanctions were not a violation of policy. This person did release back into the community.	Unable to Substantiate
<b>Mission Creek Correction</b>	s Center for Women		
60	Caller reported some individuals have symptoms of diarrhea and headache, and DOC put the facility on a norovirus protocol while DOC knew the facility had e-coli in the water, causing individuals to get sick. Caller had no symptoms, and DOC put them in quarantine. Caller reported no one has tested positive for the virus.	OCO made an onsite visit to speak to DOC staff at Mission Creek and the population in July 2021. The water system has been treated and flushed, and maintenance installed new equipment. Medical staff provided testing for multiple individuals who did not feel well, and fortunately, there was no virus or bacteria found in their system. The quarantine was for a short period to ensure everyone's safety. Bottled water has been provided, and the facility will be testing the water monthly for quality assurance.	Information Provided
61	Individual has been banned from Clark County due to victim concerns. This caused her to not be able to live with her family. She is currently on GRE in a different county at a recovery house.	Travel bans have been lifted to leave the county. She will be able to get a travel pass soon to visit her family. Protocol is to allow someone to have time in the community and then they can earn travel passes.	Information Provided
62	Complainant says a staff member keeps sitting on the tables in the great room. These are the same tables breakfast is served on and it is unsanitary. Other staff members have asked this staff	OCO lacks jurisdiction until complainant has reasonably pursued resolution through the internal grievance or appellate procedure.	Lack Jurisdiction

63	member to refrain from sitting on the tables and this concern has not been resolved. Complainant says she failed the TC program and did not receive a fair and impartial hearing, which resulted in excessive sanctions. Sanctions have reduced her ability access the gym for physical activity to manage stress and anxiety. She chose to go in the program and gave it five months but was blocked and bullied so she wanted out. She gave up work release to do TC and now they are punishing her for quitting. They are also accusing her of having a relationship and that is why they are giving her harsh sanctions - so she can't go to yard or the gym and see her alleged girlfriend.	DOC 560.000 Substance Use Disorder Treatment Services states individuals who refuse treatment are subject to disciplinary action. A 557 failure to program infraction can be issued upon leaving Therapeutic Community. DOC policy 460.050 Disciplinary Sanctions lists mandatory sanctions for a 557 infraction. The infraction and sanctions were aligned with policy.	No Violation of Policy
Monroe Correct	ional Complex		
64	Complainant has an injury and disagrees with treatment plan. Three shots and bed rest have not relieved pain; individual requests MRI to diagnose injury.	As a result of our outreach, the patient was evaluated by the FMD and received a new medication to help with pain; new x-rays were taken, and they were sent to the DOC orthopedic consultant for any recommendations. Although we were not able to secure the MRI at this time, the orthopedic consultant may ultimately make this recommendation depending on the x-ray results. Patient was given other options if he continues to disagree with the recommendations of the orthopedic consultant: 1/ Ask for case to be presented to CRC; 2/ Write to CMO; 3/ File tort claim against DOC for failure to provide medical care; 4/ Self-pay for treatment.	Assistance Provided
65	DOC had not had individual's bloodwork taken, despite upcoming trip to hospital for chemo treatment. Individual had an appointment, but it was canceled when he arrived. Individual was scheduled to have his last chemo treatment but was afraid the labs hadn't been done in time. Individual also relayed updated concerns about the port in his head not being removed yet. Requested timely bloodwork, confirm chemo appt, and have port removed.	Confirmed labs ordered and patient rescheduled. Patient received final chemo treatment and the port was removed. Also spoke with the patient and family and confirmed he received additional requested treatment once he completed final chemo treatment.	Assistance Provided

66	Individual had an infraction with sanctions of 30- day cell confinement and 15 days loss of good time. Accused of discrimination and abusive language based on gender. Individual says DOC is sexualizing his comments when they weren't intended to be sexual. Asked for sanction to be changed, because infraction had been remanded.	Complainant's previous infraction had been remanded for a new trial, so sanction increases for subsequent infractions were suspended. OCO contacted DOC administration, who agreed to drop one suspended sanction. Remaining sanctions were within guidelines for the infraction.	Assistance Provided
67	During an incident in November 2020, patient was injured when he was on a restraint bed. His hand restraint was loose, so officer removed his hand to tighten it, resulting in injury. Patient subsequently went to hospital for soft tissue damage and was given an x-ray. Requested more than an x-ray to determine soft tissue damage.	DOC medical agreed to meet with patient and created updated treatment plan. Ordered additional x-rays. Consults were reviewed and DOC does not find an MRI medically indicated. Alternative treatment planning outlined if pain continues and current treatment plan doesn't resolve issue.	Assistance Provided
		Re-review/appeal: Prior investigation was appropriately handled. If patient is continuing to have pain he should sign up to see his provider to be referred to hand specialist, as noted in the prior closing letter.	
68	Patient wants better pain management. Currently only being given OTC pain meds, which do not work.	Medical staff stated that they tried multiple different medications to help with pain, but he refused them after learning about the potential side effects. The medical staff was willing to try other medications and asked for patient's thoughts on what he would consider "safe" since all medications have side effects. Patient informed that he should sign up to see his provider to discuss options and explained that benefits of any treatment must always be weighed against risks since all meds do have side effects. Since the original complaint, patient wrote additional letter reporting difficulty accessing appointment with a doctor as well as his desire for a medical mattress. OCO reached out to medical staff to obtain optometry appointment ASAP; also explained that DOC has very strict criteria for issuing a medical mattress, but encouraged him to make appointment with FMD to discuss his needs as she may be able to issue one after evaluating him.	Assistance Provided

69	Patient disagrees with treatment/diagnosis and has been asking via kite for help. He has been seen, received different treatments, multiple times. He got a biopsy, but he thinks the area of concern was not tested, because the area they tested was not infected. He asked to see a dermatologist and was approved for appointment at WCC, but at MCC the provider will not submit a request. He is even interested in paying for the procedure himself. He is told over and over that he will be put on the callout, weeks delayed and only seen once after declaring a medical emergency. Symptoms flare up, then die down. Treatments aren't working. Facility provider keeps telling him they do the same thing at the dermatologist that they do at the facility, but patient questions whether that is true. Every treatment helps temporarily, then the issue returns.	After OCO outreach, dermatology consult was submitted. Provided patient with information he requested regarding "Offender-Paid Health Care." Informed him that he will need to discuss his desire for refund for medical appointments with the HSM at his facility; he would need to specify dates of appointment and rationale for requesting the refund. If, after speaking with the HSM, he still does not receive the refunds he believes are owed to him, he can contact us again.	Assistance Provided
70	Patient claims that he is not receiving proper care for an injury.	Complaint withdrawn.	Declined, Other
71	Complainant reported many examples of incidents with staff after utilizing the grievance program. Reports this is a systemic issue.	Provided complainant information about the role of OCO and our process for considering systemic recommendations.	Information Provided
72	Complainant makes statements regarding different things; possible systemic concerns, but ultimate concern was unclear.	Sent complainant a letter with a new OCO review request form to clarify the concern and desired resolution.	Information Provided
73	Complainant's main complaint is about the grievance program not following timeframe guideline per policy. Initially, he was denied access to the weight deck and staff was rude, so he tried to file a grievance. His grievance was sent back for a rewrite multiple times because he added complaints about the rewrites requested. He believes his initial complaint was blocked to protect staff and the agency from being held accountable for requiring the rewrites.	Uplifted complainant's concern to the OCO AO and ERO for the Western facilities. If problems with the resolution program persist, complainant may contact our office again.	Information Provided
74	Complainant says he was ordered locked up by the Indeterminate Sentencing Review Board	Sent letter with information. OCO cannot change ISRB decisions. ISRB decisions can be appealed by	Information Provided

	(ISRB). Many issues listed in letter including being quarantined, not receiving due process, and that ISRB ordered a full hearing without prior written reason.	filing a Personal Restraint Petition (PRP) to the Court of Appeals.	
75	Complainant would like to be able to speak with investigators about knowledge they have regarding crimes committed by others; has told mental health staff.	Provided complainant information about the role of OCO and our process for considering systemic recommendations.	Information Provided
76	Complainant was brought in on a violation and is trying to appeal within the seven-day timeframe. Individual was supposed to be provided two stamped envelopes so he can send in his appeal, but was never given those. Relayed concerns regarding his mental health status during admission to prison, which he claims created difficulties for him to appeal his sanction.	After making outreach to DOC it appears the complainant has now been given the appropriate documentation to appeal his hearing sanction. 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." An Ombuds Review Request Form was attached to the closed case letter following outreach efforts via the appeals process, to include additional details if the concern remains unresolved on appeal.	Lack Jurisdiction
77	Complainant says that the mailroom lost a costly book that was ordered and sent by the company he ordered from. It has been over 60 days and the book was never processed, rejected, nor returned to sender. Complainant had another book sent in to replace the lost one and that arrived fine.	OCO lacks jurisdiction to review complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Complainant must appeal grievance up to a level two and contact our office once they have received the response. Sent letter to encourage complainant to either appeal initial grievance or write and submit a new grievance in an effort to resolve concern.	Lack Jurisdiction
78	Complainant says his religious rights are being violated. Staff is using the "clean your cell" method to strip his walls even though other people post trivial things on their walls. He was issued an infraction although other staff can attest that his cell was clean in the morning.	OCO lacks jurisdiction to review complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Complainant must appeal grievance up to a level two and contact our office once they have received the response. Complainant did not receive infraction.	Lack Jurisdiction
79	Individual's communication lists Articles, WACs and RCWs, but is unclear on specific concerns.	Sent complainant letter to ask for clarification/more info about complaint and desired resolution. OCO lacks jurisdiction to review	Lack Jurisdiction

		complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Complainant must appeal grievance up to a level two and contact our office once they have received the response.	
80	Complainant feels unable to express their religious beliefs via beading activities and claims the chaplain wishes to place a six month restriction on their ability to order beads; Complainant grieved this action and was told that the chaplain could not do this, so ordered more beads. The grievance investigation led to a claim that the complainant agreed to the bead restriction, which they say is untrue. Complainant's primary expression of their religion is through beading, and the restriction and delays in its investigation is causing them mental stress.	OCO lacks jurisdiction to review complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Complainant must appeal grievance up to a level two and contact our office once they have received the response.	Lack Jurisdiction
81	Complainant says a staff member violated his HIPAA rights by breaching confidentiality after an appointment with them. His cell was searched and 76 pages of medical records were confiscated.	OCO lacks jurisdiction to review complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Sent letter encouraging complainant to appeal grievance up to a level two and contact our office once they have received the response or appeal the disciplinary infraction that resulted from this situation.	Lack Jurisdiction
82	Complainant says that his former cellmate was aggressive toward him in their cell. His cellmate was cuffed and taken to a holding cell; however, after the incident DOC staff was rude to the individual so he filed a grievance. The individual says that this staff member constantly makes bad comments to them. He feels threatened and fears he may be retaliated against.	OCO lacks jurisdiction to review complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Complainant must appeal grievance up to a level two and contact our office once they have received the response.	Lack Jurisdiction
83	Caller's loved one filed a grievance concerning internal tremors and headaches that are progressively worsening. His CRC case came back as not medically necessary, which he doesn't agree with. Individual wants to be seen at a doctor or hospital that can check him out	OCO does not have the authority to overturn CRC decisions. However, the same issue can be presented to the CRC multiple times. Contacted the complainant to inform them of this and sent a letter to the incarcerated person involved with a	No Violation of Policy

	thoroughly. DOC has the obligation to care properly for incarcerated individuals.	CRC appeal form and advice on how to get the issue to be heard again if it is persistent.	
84	DOC staff filed a PREA claim regarding sexual statements made by another incarcerated person to the complainant. The claim was substantiated, but complainant is only separated from this individual by one tier.	Conducted review of PREA cases and had discussions with MCC Administration and headquarters. There is currently no keep-separate in place for the two individuals involved. DOC PREA policy allows DOC to determine the level of separation that is appropriate for two people involved in a substantiated PREA. Both headquarters and the facility are aware that these individuals do not get along and the need to keep them apart.	No Violation of Policy
85	Complainant reports that a CO wrote a Behavior Observation Entry (BOE) on him containing false information.	Reviewed concern, available documentation, and DOC policies related to the matter, including contacting facility executive team and DOC headquarters for further information. Unfortunately, there is no video to verify the complainant's claims of observing social distancing protocols as the camera at that location was not functioning. Additionally, the facility interviewed the officer who authored the BOE and reported his content was an accurate recounting of the occurrence; this was subsequently upheld at the headquarters level.	No Violation of Policy
86	Patient has had an infection in his tooth since March. He has been treated for the infection, and the infected tooth was set to be pulled, but the dentist pulled the wrong tooth. Now they are not willing to pull the correct tooth. Requested correct tooth be pulled.	Confirmed proper tooth extractions. Patient also diagnosed with dry socket and other complications to healing. Confirmed patient receiving follow up appointments and treatment including pain management plan.	No Violation of Policy
87	Complainant worked for CI in the Commissary. He has a medical condition and was concerned about the high heat. He said he did not want to work on the day of the highest heat and he was subsequently fired.	To obtain more information about this concern we reached out to DOC and determined the individual was expected to come to work but did not arrive as scheduled. An officer responded to the unit and the individual stated he was refusing work because of the heat. Despite making a claim to OCO that he had a medical condition, he did not go to medical or relay a message to commissary staff that a medical reason prevented him from working. Individual was removed from the callout list.	No Violation of Policy

		Under DOC 710.400 the individual was still on probationary status and can be removed from callout for any reason. There was no infraction or disciplinary action taken against this individual. The individual is encouraged (and remains eligible) to apply to any open position including the Commissary if a position is open.	
88	Caller was one of the individuals infracted for allegedly participating in the MCC disturbance, now in IMU.	OCO reviewed concern. There is not enough evidence to convince Disciplinary Hearing Officer to overturn the finding of guilt. It would appear there's sufficient evidence (including video) to substantiate the 553 "Setting Fire" and 650 "Rioting" as illustrated in WAC 137-25-030 Serious Violations in Prison and Work Release. It's also important to note under this WAC that even "[a]ttempting or conspiring to commit one of the violations or aiding and abetting another to commit one of the violations, shall be considered the same as committing the violation." Also, per WAC 137-28-400, if an individual is disputing timeframes, failure to adhere to timeframes does not result in a reversal of the infraction. And access to statements given by confidential informants is not permitted for their personal safety. Even a redacted statement could lead to the discovery of the reporter's identity.	No Violation of Policy
89	Case reopened based on updated info: Patient says that they went to see staff about an injury and the staff asked more about how they incurred the injury, rather than examining the injury itself. Patient began complaints about his injury last year and has not received the treatment requested. Individual states that he requested a second opinion as outlined by DOC and has gone unresolved. Medical has alluded to treating him for other conditions. Patient requested DOC provide second opinion, follow up xrays and operation. He also requested pain management and quality care pre- and post- operation.	DOC ordered three additional consultations after chart review. DOC provided care through a thoracic surgeon. Confirmed pain management plan and physical therapy referral – thoracic surgeon recommended non-surgical options for nonhealing pain. Confirmed DOC already provided Rubicon second opinion. DOC providing care in line with DOC Health Plan and standards of care for injury. Provided patient with information regarding "Offender Paid Health" option if he would still like to see an additional specialist.	No Violation of Policy

90	Individual relayed concerns regarding mail rejection following a K9 alerting for potential drugs. Requested resolution is for OCO to obtain a "valid reason" for the CPM upholding the rejection, for OCO to issue a directive for DOC to test the mail to prove no drugs were present, and for DOC to provide photocopies of individual's mail.	OCO reached out to DOC and determined the mail rejection appeal was upheld by the CPM. OCO cannot mandate that DOC test the mail for the absence or presence of a controlled substance, nor can we demand they make photocopies of mail. The disposition of mail allegedly containing controlled substances means it is not retained but placed in a "hot trash" bin for disposal.	No Violation of Policy
91	Complainant was given a 505 infraction; they have appealed it multiple times on the basis that it was self-defense, but to no avail. Complainant received muscle damage from the altercation and has had to undergo surgery to correct the damage. Of greatest concern to complainant is the two-year sanction given in conjunction with the infraction against their use of weights for exercise; they state that this is one of the only ways they can reduce their stress in prison.	OCO reviewed statements. Officer found complainant on top of another incarcerated person, and officer says that was not self-defense. The two-year weightlifting privilege ban is mandatory under RCW 72.09.500.	No Violation of Policy
92	Individual was terminated from SOTAP program with only two assignments left for making a few comments to a female video via a video visit. He is concerned that his ERD is going to be extended for two years by ISRB for a few comments. He feels that this is discrimination, as two other white incarcerated individuals were allowed to successfully complete the program although they had not completed all assignments.	Conducted interviews of DOC SOTAP staff and also of the complainant. Also reviewed relevant SOTAP records. It appears that DOC did have justification to temporarily discharge him from the program and he can reapply after three months to be able to successfully complete the program. Regarding discrimination, OCO cannot substantiate that due to a lack of evidence. (SOTAP records are protected by federal law and to review any other individual's records. OCO would need a signed release, and even then, each case is going to be specific to the individual. Further, staff stated that completion of SOTAP is not based on number of assignments but on the individual demonstrating that they successfully addressed risk factors.)	No Violation of Policy
93	Caller stated a PREA case was opened in August 2020, is not being investigated in a timely manner, and they have a conflict of interest with assigned lead investigator.	Made outreach to DOC staff at both the facility and headquarters level. Final response was the PREA case is now closed and is being forwarded to headquarters. DOC made the determination that caller refused to be interviewed despite OCO's outreach arguing to the contrary. Can confirm the previous investigating officer was involved in a	No Violation of Policy

		prior use of force. Also noted that prior to the closing of the PREA case, the caller reached out to OCO to provide a condition for participating in being interviewed due to a conflict with said officer. However, we do not have the power or authority to independently make any changes to the situation, and DOC has not violated any policy in handling the case despite the delays. The facility executive team also felt that the use of force was long enough ago that the assigned investigating officer was appropriate for the task.	
94	Caller is worried that there is some kind of parasite outbreak going on, but no one at medical is looking into it. They have been working on the water tower. Many individuals having problems have also been eating vegetables out of the garden, so could be something contaminating the soil, water or a combination. Caller reports many complaints have been made but no one seems to be listening. The affected individuals have been told they have impetigo or MRSA and are sent back to their unit with a cream. Even if these diagnoses are correct, they are both highly contagious issues and DOC simply sent them back to the unit. No precautions or isolation.	Superintendent reports there is no parasitic outbreak, no outbreak of impetigo, and no outbreak of MRSA at the facility. He investigated this with medical, maintenance, and unit staff. The water tower is a City of Monroe project and is not related to water quality or the prison. MCC reports anyone that has needed to be isolated for a medical reason has been isolated.	Unable to Substantiate
95	Patient reports multiple accommodation requests with no response. Grieved and submitted appeals, also with no response, in part due to provider. Patient has written letters to HQ. Patient had to file six grievances in order to get this addressed because he was told he couldn't grieve CRC decisions (although he wasn't grieving the decision, but the lack of response). The person investigating his situation found the appeal on healthcare worker's desk months later. Patient met with ADA Coordinator and was told there is no record of him meeting with the ADA Coordinator. The whole point in the HSR was to have it during his mental health treatment but his treatment is now almost over. He said his	DOC mental health providers did not believe that removal from work would be beneficial; OCO is unable to override this clinical decision. In addition, Appeals Committee reviewed multiple sources of information including medical records, OMNI, and grievances/appeals when making their decision to deny the no-work HSR. Provided patient with options to write to CMO or file tort claim.	Unable to Substantiate

	situation documents many failures in DOC staff responses to medical/CRC, delayed decisions and documentation.		
96	Caller has experienced uses of force three times in the last month. This is after OCO staff requested that mental health reach out to him. Believes that this is retaliation for contacting our office.	Cannot confirm the uses of force are related to OCO outreach. To substantiate retaliation, we must prove there was a protected action, an adverse event or consequence, and the nexus between the two. After reviewing all reports and the handheld video of the incidents, a nexus between the protected action and adverse event cannot be established.	Unable to Substantiate
97	Patient had a medical emergency and was given his normal blood pressure medications as prescribed. He said that he feels DOC is not taking his medical emergencies seriously (due to complaints he filed against them), as he still has high BP and they are calling him a hypochondriac. Patient filed an emergency grievance as he was not able to go to sick call. Patient claims DOC told him there is "no medical treatment for hypochondriac." The mental health provider declared a medical emergency for him, and they just took his BP at the appointment. Patient says DOC did no other test except BP since the onset of symptoms during most recent emergency. Patient sent kites but a nurse responded regarding his crime, and an officer said she can't discriminate based on crime.	Medical records indicate that patient has been refusing meds since at least October 2020; records also reflect several visits with DOC providers, who have explained the risks of not taking the prescribed meds and have consistently encouraged him to be compliant. No documentation indicating that DOC was not taking medical emergencies seriously; also no emergency grievance response referring to him as a "hypochondriac" and no kite response referencing his crime.	Unable to Substantiate
98	Patient reported he is being forced to take mental health medications he doesn't want to take. Additionally, patient requested a medical or second mattress, which was denied by provider (not sure if it was reviewed by the CRC). He filed a grievance.	DOC HQ states that antipsychotic medications are not being prescribed as a punitive measure. Patient is under an involuntary medication order following the Harper process, and he has the right to appeal. DOC HQ stated that they would relay his concerns to the treatment team at his facility.	Unable to Substantiate
ympic Correction	ons Center		
99	Patient had surgery many years ago and has HSRs for food. Once he got to Olympic the HSR was taken away after three days. He filed a grievance and waited more than three weeks for a	No record of patient requesting appointment with providers. HSR criteria not met for Orange Snack HSR. Provided patient with next steps.	No Violation c Policy

	response. He can't eat all the food at one time and the staff is saying he can't store his food. Also reported not being seen by a provider since getting to Olympic.		
100	Person was infracted for supposedly being in possession of an illegal substance. Person states that he had his hearing and the only witness was a staff member saying he saw him smoking in his room. Person appealed and was denied and still found guilty. Person states that he had some muscle tremors but that should not lead to an automatic assumption that he was using.	DOC meet the bar of some evidence based on the officer observing and smelling smoke from the area that complainant was in and when the officer entered the area complainant poured water on the table in what appeared to be an attempt to hide evidence. Person also expressed concern about loss of yard privilege; DOC staff clarified that the sanction should only apply to fee-based recreation and changed this sanction the day he raised the concern with them.	No Violation of Policy
101	Reporter received an infraction while giving a positive "pushup" while programming. Reporter stated officer pulled him and the other incarcerated person into the office and made disparaging remarks regarding sexuality. Reporter filed a PREA and it came back as not PREA, and that he can filed a grievance. Grievance came back as rewrite, and infraction was dropped.	The reporter's complaint regarding the PREA was deemed by DOC HQ to not meet the standards for a PREA violation and as such it was not investigated. Therefore, there is no PREA investigation for OCO to review. The infraction was dropped so there is nothing for OCO to do further.	Unable to Substantiate
102	Individual was found smoking in unit and served infractions for smoking and for 556 (refusing to submit or cooperate in a search when ordered to do so by a staff member). He says he did not refuse to stand (556) but admits smoking.	Complainant does not have access to any witness testimony to support his claims, and there is no video footage of the incident for review. The officer's testimony therefore qualifies as "some evidence" sufficient for DOC to uphold the infraction.	Unable to Substantiate
stafford Creek Co	orrections Center		
103	Patient had lower bunk at previous facility but provider at SCCC has told him the HSR will not renew because patient doesn't meet criteria following their investigation. Patient says he's in excruciating pain in both knees, so he tried to appeal and was told it wasn't going to go any further. The provider told him to lose weight, but patient says issue is not weight. Requested HSR be renewed.	Could not impact change at facility level, uplifted to HQ for consideration. Confirmed HSR for no upper bunk now updated in OMNI.	Assistance Provided

104	Complainant is concerned about staff due to denial of grievances, refusal to perform duties, misconduct, and retaliating against him for his good faith participation in the grievance/resolution program.	OCO staff uplifted concerns about the grievance program to SCCC administration and will continue to work with facility staff to resolve concerns.	Assistance Provided
105	Complainant reported feeling helpless, feelings of paranoia, feeling suicidal and depressed. Said other incarcerated individuals bully him as well as DOC staff. He says he has a mental health diagnosis that leads to the bullying. He further says he got off his medications about seven months ago and has been trying to get back on them. He is at wit's end and is reaching out for help.	Uplifted this concern to Assistant Ombuds immediately on day of receiving the complaint. AO reached out to facility to address complainant's suicidality and safety concerns. Sent letter for complainant if he wants to follow up with our office.	Assistance Provided
106	Patient has had an HSR for shy bladder for a few years due to childhood trauma. Medical at SCCC is now unwilling to renew the HSR. Patient is worried that he will be infracted for failure to provide a urine sample.	Confirmed HSR now in OMNI, provided via MH.	Assistance Provided
107	Complainant says that two JPAY messages were rejected and he appealed the rejection. DOC reviewed the messages and overturned the rejection, releasing the messages to complainant. However, only one message came through. He kiosked the mailroom and submitted a ticket to JPAY as directed by mailroom. Then he got a second rejection for the same message that was overturned and released, but it has disappeared from his account so there is no rejection number to appeal again.	Discussed via hotline; complainant does not wish to pursue this issue any further and requested to have the case closed out.	Declined, Other
108	Patient says that his medical needs are not being met. He has been dealing with pain for months. He says that he had surgery and it did not help with his pain. This pain severely affects his everyday life. Requested diagnosis and treatment.	Confirmed follow up appointment with facility medical and surgery specialist scheduled.	DOC Resolved
109	Individual wrote regarding video evidence. Claimed that DOC has destroyed video evidence that individual requested in grievances,	Our office has performed several visits during the Covid-19 pandemic to provide oversight of DOC actions. We have published several reports	Information Provided

	addressing DOC's failure to enforce CDC/WDOH Covid-19 protocols, which resulted in the death of five incarcerated people at his facility. Individual believes that video could be used to hold DOC accountable.	including a full review with recommendations. Our RCW does not allow us to enforce, but to review and give recommendations for improvement. This office supports proper record keeping and properly maintained and clear video. OCO spoke with the caller today and she sent us this as an FYI, not a case.	
110	Complainant says his property was taken by staff during a cell search. The search report says to show proof of purchase which he has and attempted to show; however, the property could not then be located. Item is no longer available for purchase on commissary so he cannot replace it.	OCO cannot locate lost property or provide reimbursement. Providing complainant with self- advocacy options.	Information Provided
111	Complainant says that there are inaccuracies in his WA One assessment and classification. He says he does not have any violent charges or convictions. Believes this is an error.	Provided complainant information for next steps to resolve concern. He must first appeal the current WA One assessment and if that does not prompt DOC to resolve concern or provide answers, OCO may then be able to look into concern.	Information Provided
112	Previously worked case: Complainant says she does not feel safe being housed in a men's facility as a transwoman and DOC is not following housing and PREA policy based on where she is housed. She does not agree with the resolution of the previously worked case.	Sent complainant an OCO Closed Case Review form.	Information Provided
113	Complainant says that his ERD is in July, but needs a DOC-approved release address if he is to be released early on probation. He says that if he fails to report to DOC that he is in violation and will go to jail. He says that there is no policy on this and that many others are released without an approved address.	No level two grievance filed on this concern at this time.	Lack Jurisdiction
114	Complainant requested that OCO review staff misconduct concern. Around August 2020, complainant was moved from his unit. He wanted to quit his job and move back to previous unit due to unfriendly staff. He was told no, he was approved for work release in January 2021 which	No level two grievance regarding retaliation at this time.	Lack Jurisdiction

	was confirmed by his boss. He wrote an unrelated grievance on a staff member who was not happy about the grievance. The date came to go to work release and complainant never went.		
115	Complainant requested review of prior grievances and how they were not addressed properly.	None of the grievances are at level two to warrant a review per OCO's guidelines. OCO did reach out about his time calculation grievance so that could be reviewed by DOC sooner rather than later but found no issue with it.	Lack Jurisdiction
116	Complainant says he received a negative BOE report for loitering in the dayroom. However, it was during his scheduled time out. He says the next day he was on the way to the restroom and was confronted by the CO again. He says he noticed other incarcerated individuals present at that time from the wrong tier, so he confronted the CO for only reprimanding him and not the other people. Ongoing problem with CO using foul language.	OCO lacks jurisdiction to review complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Sent letter explaining OCO's process and encouraged complainant to appeal grievance up to a level two and contact our office once they have received the response.	Lack Jurisdiction
117	Complainant says DOC staff are making false allegations on him and another person about their relationship. He feels targeted by staff. This is a mental health unit and staff is worsening their mental health conditions.	OCO lacks jurisdiction to review complaint until complainant has reasonably pursued resolution through the internal grievance or appellate procedure. Complainant must appeal grievance up to a level two and contact our office once they have received the response.	Lack Jurisdiction
118	Complainant states staff calls her "Mr." instead of "Mrs." despite the fact that she identifies as transgender. Individual wants to be addressed as Mrs.	Complainant does not have a level two grievance so we cannot review this case. OCO did however provide policy information in the closing letter to help guide some next steps.	Lack Jurisdiction
119	Complainant states that he was assaulted on his way to work. He defended himself, although he complied with all directives to stop once staff arrived at the scene of the incident. He was then infracted for the incident. He lost HUB access and his job position because of this. He was also dropped from education classes because of this infraction.	Video evidence shows complainant using force beyond self-defense, supporting the infraction.	No Violation of Policy
120	Patient says that he has a medical issue that has not been adequately addressed. He says that DOC	Patient has recently had an MRI to address his issues and has been seen by SCCC's neurologist.	No Violation of Policy

	gave him ibuprofen, along with several other medications that have been given on and off. He says he has not been able to access the care recommended by the Mayo Clinic.	The facility assures OCO they will be providing follow up care. The medications that the patient is requesting are all restricted per the DOC formulary and his PCP is not comfortable using them for his specific conditions. Informed patient of his option to take the medication issue to the Care Review Committee. The DOC Health Plan does not mandate that their providers must follow recommendations from external entities including the Mayo clinic.	
121	Complainant received a neutral BOE written by DOC staff. The BOE violates DOC policies and uses the term "offender," a term staff have been told not to use. The appeal response did not address his concerns and subsequent letter to the CPM has been ignored. He wrote the letter to make staff aware that when they requested work boots twice from the clerk, they were denied. They need their request in writing with explanation of failed attempts through established process. Upon giving notice of BOE he was told to stop talking about the clerk. But no BOE was written against the clerk.	After review we cannot find policy that states he can or cannot use the internal mailing system to send a message to staff. There is, however, a preferred method stated in policy. This BOE was in lieu of an infraction.	No Violation of Policy
122	Caller has had heart issues since he entered prison last year. He's been told that he has about a year to live. Patient wants to get to UW to be seen. He's been having a lot of medical issues and is not getting the correct treatment. Requested access to treatment prescribed by UW and appointment with UW specialist.	Facility Medical Director recommended IPU stay and monitoring for assessing treatment needs. Patient refused IPU stay and alternative medications recommended by DOC. Confirmed monitoring by facility medical and local specialist, documented stable angina. Referred for UW cardiologist.	No Violation of Policy
123	Patient has been sent to a podiatrist but when he goes, he is asked to fill out a form he didn't feel comfortable signing. He said they wouldn't see him without signing the form, so he offered to sign an alternative agreement form that he had been provided by DOC before. The nurse said she would look into it, but he hasn't heard back. He has been waiting for eight months for a consult. Patient also reports untreated lingering COVID symptoms. Requested consult, education,	OCO cannot impact change related to offsite provider consent form. DOC is scheduling and providing specialist consults. Offsite provider will not provide care without patient signature, which is standard practice. Confirmed patient scheduled for follow up with DOC medical and did not show to appointment.	No Violation of Policy

	treatment, and healthcare to recover fully from the lingering COVID symptoms.		
124	Complainant says incoming mail was rejected. Reason listed rejection is #40, "contains correspondence/property for or from a third party" The mail in question is a postcard with a photograph from a loved one who used a communication app. The photo was of the sender, complainant's loved one.	Policy 450.100 Unauthorized Mail Attachment does state third party mail is not authorized. The person in question is a third party and makes the rejection not a violation of policy. OCO cannot impact further change on this matter.	No Violation of Policy
125	Person injured their back in the yard doing a workout. They called a medical emergency; they were then taken to medical, took x-rays, and was told nothing was wrong and that he would have to walk. Patient replied he was in a lot of pain. The nurse then took him down the corridor in the wheelchair pushing him fast and aggressively and when he got to the unit, patient claims the nurse tipped the chair forward and he fell onto the ground.	Incident reports and video surveillance evidence does not support the claim that staff purposefully threw the complainant from a wheelchair.	Unable to Substantiate
ashington Corre	-		
126	Complainant says a very recent mental health report was rejected at classification and a new evaluation was done. He tried to submit new evaluation at classification to get into the Skill Builders Unit and again the evaluation was denied. Individual has been voicing his concerns and asking for mental health treatment. He hopes to get into the Skill Builders program to make a successful transition into the community.	Complainant has been classified and is assigned to the Skill Builders Unit. Provided complainant additional information to file a grievance and appeal up to a level one regarding further access to mental health.	DOC Resolved
127	Complainant had an accident that required surgery. Since then, he has run out of pain medications, was placed on medication that he says does not work and is experiencing increasing pain. The area in which the injury occurred has not been repaired. It has been two months since the incident.	Sent letter to encourage complainant to appeal the separate grievances for the two concerns to a level one for the medical case and level two for the facility safety case.	Lack Jurisdictio
			No Violation of

	healthcare that is effective for vulnerable populations. He says that DOC has a lack of	following WA DOC Health Plan.	
	concern or care for incarcerated patients. He is being denied a change in medication as well. Requested quality medical and mental healthcare.	Re-review/appeal: Case investigation was handled appropriately. Patient was informed that he must sign up for an appointment if he wants to be evaluated by his providers. Complaints regarding the DOC Formulary have been recorded and may be used for a future review of DOC pharmacy practices.	
129	Caller reports that an incarcerated person was assaulted by three corrections officers. He and the main officer involved had exchanged some words a little while earlier. The officer yelled for him to "cuff up." The incarcerated person was confused and asked why he was being asked to cuff up. The officer grabbed him and tackled him to the ground. The officer was yelling to stop resisting, but caller claims incarcerated person was not resisting other than to try to move his body in a way to alleviate the pain he was in.	Reviewed use of force packet and available video evidence. The reports indicate that the incarcerated person assaulted a staff member. This is verified by this man's statements, but he says it did not happen the way it is reported. We were unable to substantiate the claim of being attacked by three officers for no reason through the video evidence and documentation.	Unable to Substantiate
130	Complainant says that he was not given a fair trial and did not commit the crime.	Concern is not within OCO's jurisdiction. Provided complainant with self-advocacy options and information about what is within OCO's jurisdiction.	Information Provided
131	Person says he needs a meal to take his medication or he will have an allergic reaction. He did have a reaction and called a medical	Our office reviewed the grievance investigation. Video was reviewed and could not substantiate the excessive use of force. He was taken to	Unable to Substantiate
	emergency. During the transport, he collapsed, and person says staff stood on him when he was not resisting. He says he was handcuffed and could not breathe.	medical. This individual is no longer in custody.	
Washington Correction	and person says staff stood on him when he was not resisting. He says he was handcuffed and could not breathe.	medical. This individual is no longer in custody.	
Washington Correction 134	and person says staff stood on him when he was not resisting. He says he was handcuffed and could not breathe.	The officer should not have performed a cell search alone or thrown out property without a contraband hearing. OCO sent a copy of the cell search to the superintendent who is now aware of this issue.	Assistance Provided

		coordinator will make sure he meets with individuals moving forward in MSC.	
136	Complainant says she found two concerning medical issues, but medical only responded to one. An ultrasound was scheduled but the follow up ceased at that point. As one issue grew more concerning, she reached out to medical who insisted that the issue is a normal part of aging. An MRI was not scheduled until later and is still months out. No blood work has been done. She is concerned this is serious and is spreading.	She had a mammogram and MRI done. An appointment with a podiatrist is currently scheduled.	Assistance Provided
137	Person had a roommate placed with her who tested positive for COVID; then officers said that she threatened her roommate. Staff then came into her cell and extracted her with force. This caused injury and she was taken to the hospital. She has since received medical bills from the incident.	OCO reviewed use of force with DOC at the facility level and headquarters level and received a Corrective Action Plan from DOC. Due to COVID, training for DOC employees has been compromised. OCO will use this incident in a larger systemic report regarding use of force and the need for more de-escalation efforts. Her medical bill will be paid by DOC.	Assistance Provided
138	Patient has cancer and needs a surgery. She has been promised a medical appointment to perform the surgery and as of today is still waiting. This delay in treatment is unnecessary.	Her surgery was rescheduled from June to July. Her appointment is now set.	DOC Resolved
139	Complainant says that was told that she could combine her two medical grievances, regarding medication and need for surgery.	DOC resolved her medication issue and she is able to create her own work schedule based on how many hours she can work.	DOC Resolved
140	Patient has a medical issue that is painful. She says medical will not help her.	She has not grieved medical. OCO sent her a letter to ask her to grieve to see if medical can try to resolve her issue.	Information Provided
141	Patient has needed a new partial dental plate for years. DOC has not provided and now says they will get her a new one if she lets them pull a tooth.	DOC Health Plan requires a person to have less than four teeth in the area of the needed plate to qualify for a DOC paid plate. The complainant does not meet this requirement. Unable to substantiate that DOC offered to pull a tooth so she could qualify for the plate.	No Violation o Policy
142	Patient says that prior to incarceration she was scheduled for foot surgery. She now needs a different surgery because, during transport, she passed out and was not belted in properly. She	Medical determined she did not need to see a specialist for her foot.	No Violation o Policy

	says that she is being denied medical treatment for her pain.		
143	Complainant has a lump on her head and experiences constant headaches. Does not feel DOC is treating it properly.	Reviewed all pertinent medical records. Complainant appears to have a long history and ongoing issue with headaches. DOC is treating with medication and appears to see the complainant regularly on this issue. Regarding the lump, an ultrasound was conducted in March 2021 and no irregularities were found. DOC appears to be acting within policy.	No Violation of Policy
144	Individual is in involuntary protective custody. She was told she would only be in there for a few days, but she is still there. She is hoping she can get out of isolation. She was assaulted by an incarcerated person. Person who assaulted her has done her time in segregation and is back out in population already, while she is still in COA. Staff met with her saying it didn't feel safe for her to return to population. She has been in segregation since May, and doesn't know what privileges she's supposed to have, or how long she's supposed to be there. She is missing work while in segregation and has difficulty contacting advocates. She feels staff have released anonymous confidential information again, exacerbating issues with incarcerated people and encouraging harassment.	She was placed in involuntary protective custody after the assault for her safety. DOC was within DOC 320.200 Administrative Segregation and she was released in less than 30 days.	No Violation of Policy
145	Complainant says she is in on a DOSA revoke and they placed her in Therapeutic Community (TC). She thinks this is a mistake since she doesn't have a drug-related crime. Other people who are DOSA revoke went to general population who have drug and alcohol related crimes and she doesn't understand why she didn't. She is eligible for work release soon and she will not have the chance to get to fifth phase by then so she will not be able to go to work release.	DOC is within policy to require substance use treatment as an assessment outcome indicated need for treatment.	No Violation of Policy
146	Complainant received an infraction for introduction of contraband. Says she doesn't	We reviewed the Washington Administrative Code Chapter 137-28 Discipline Prisons and DOC	No Violation of Policy

	know who the contraband is from and isn't responsible. She says that I&I pieced together parts of an unrelated phone call that was made days after the contraband entered the institution to try to make it look like she was guilty.	460.000 Disciplinary Processes for Prisons. We could not find a policy violation in the infraction or hearing process. DOC can issue an infraction and establish guilt based on a "some evidence" standard. DOC found the mail written with contraband, and the phone calls recorded met the "some evidence" standard to find her guilty of the 603 infraction.	
147	She reported she was retaliated against by DOC staff. When she returned from another facility, all of her property was taken and sent out. She says all the other women who were returned were able to keep their property.	We could not substantiate a claim of retaliation. DOC is within policy to send out the property she had from the other facility if it was not on the WCCW matrix; she was not found guilty of the infraction in 2019 that terminated her programming and DOC resolved the mail issue from 2019. We could not find a violation of DOC policy.	Unable to Substantiate
Washington Sta	ate Penitentiary		
148	Complainant says that when he was transferred he did not receive his property. He kited the property officer and said that two of his bags were not in the property room. He says that he went straight to IMU custody so he never received anything and the property officer says that the property never arrived at WSP.	All property has been sent to his most current facility. I could not confirm if the specific item requested is in the property. Requested he follow up with us if the item is still missing.	Assistance Provided
149	Person requests assistance getting his sentence vacated and has additional questions about previous sentence recalculation that added time to his sentence.	Inquired with facility legal liaison about the status of pending court case and followed up with appropriate county. Spoke with DOC Records Dept. to better understand previous sentence recalculation. Closed case after verified that person had two convictions vacated and his PRD was correctly updated.	Assistance Provided
150	Complainant reports that staff in IMU are not loudly calling people for yard. This results in people missing their one hour of yard time.	Uplifted this concern to facility management in hopes that this can be used to train other staff members to properly call for yard.	Assistance Provided
151	Patient has been told by DOC staff that he is only allowed a wheelchair for long distances. December 2020 DOC staff refused to allow him a wheelchair to go to a call out. When he went to the PA, she changed the health status report	Substantiated changes to HSRs impacting patient's access to ADA items (crutches, knee brace, wheelchair, and additional items) for chronic conditions. Confirmed PUHLES code corrected again, HSRs updated in OMNI, ADA items renewed	Assistance Provided

	<ul> <li>(HSR) to make sure it said only long distances. He said that medical staff are discriminating against him and placing this HSR as long distance only so that he doesn't have to be housed in an ADA cell. Denied single cell housing, placed in administrative segregation, non-ADA compliant cell. Staff started denying him access to his wheelchair. He is afraid they are going to take away the original HSR altogether. People on one shift give him his wheelchair, but the other shifts don't. So during the week, he doesn't go out of his cell. Unit staff went to medical and asked for an updated HSR.</li> <li>CLOSED CASE REVIEW: OCO worked a previous case and DOC agreed to update his PUHLES codes for accessible transport, however, OMNI now shows that this has since been reversed back. Patient requested PUHLES code be corrected again and original chronic care HSRs or ADA ASR be renewed.</li> </ul>	and noted as ADA accommodations (ASRs) for annual renewal moving forward.	
152	DOC ordered shoes through their vendor for patient's issue with his feet. Then, six months later when the shoes were worn and he needed new ones, DOC said that the policy changed and that they couldn't order him shoes anymore. He wants to know the policy and wants medical	DOC has scheduled him to been seen and re- assessed for proper medical footwear. DOC staff have also identified issues within the current process for accessing medical footwear and are making positive changes to this process.	Assistance Provided
153	shoes. He also wants to be seen by a podiatrist. Complainant states that he and his previous therapist had an agreement that if he did six months in the RTU program at WSP, the therapist would advocate for him to be moved back to the west side of the state. Now, he has a new therapist who is telling him that she thinks he needs to stay for two months longer in the RTU program before moving. He feels like DOC is not keeping their word and he really would like to get back to the west side to be closer to family.	Uplifted the concern to appropriate DOC staff to take into consideration at his next classification review in August.	Assistance Provided
154	OCO worked previous case, DOC agreed to resolution: neurologist consultation submitted	DOC submitted appointment request, offsite providers (SMMC and Kadlec Medical Center	Assistance Provided

	and approved. Patient says that DOC has not complied with the request to see a neurologist and evaluate his medical symptoms. Individual says that he does not care about drugs, he just wants to get diagnosed and treated. Requested neurology appointment and treatment.	Neurology) declined appointment. Confirmed DOC updated and resubmitted packets, additional appointment requests sent.	
155	Patient says that his cancer has progressed and that DOC is not performing proper tests. He says that his charge was removed and made it retroactive, which means that he will get released. He says that he will likely die before this happens. Also claiming retaliation regarding cancer care since contacting OCO and cancer report. Also wants medications changed.	Patient did have a test. Results were sent to a UW surgical oncologist for next steps; therefore, the request for other treatments will be addressed by the specialist. With regards to desire for change in pain medications, patient should discuss this with his providers and explain the reason for wanting this change; if providers are not willing to provide this medication or an alternative, encouraged him to contact our office again.	DOC Resolved
156	Complainant says that facility received mail addressed to himself from the Dept. of Treasury with a check, however the check was never deposited to his account. He then received a kiosk message from Inmate Banking stating that due to the unusual amount DOC needs to verify with the IRS. 30 days later the funds have not been deposited.	Money was confirmed as correctly sent and issued to this person's appropriate account.	DOC Resolved
157	Person received an infraction in 2019 for filing a new grievance when he had five active grievances (a violation of the Grievance/Resolution Program). He asserts that there was irregular record-keeping by DOC staff, which he relied upon to keep count of his active grievances. He has not used the Resolution Program since that time because he is concerned about receiving another infraction.	While AO reviewed evidence of irregular record- keeping, DOC staff hold that the ultimate responsibility for tracking the number of active grievances was his and the infraction stands. Today, he currently has zero active grievances and ERO & AO received assurances from Resolution staff that he is permitted to use the Program. Should he decide to re-activate using the program, OCO will monitor with the expectation that he will receive fair and equitable treatment.	Information Provided
158	Reporting that his current mental health medications are not working. He reports that his mental health provider is not taking the claim seriously, he wants a new mental health provider.	Provided information to reach out to mental health staff and file a resolution request to the facility. Asked that he follow up with us if he is still having issues accessing care. Appears he was seen by mental health multiple times after this concern was received.	Information Provided

159	Complainant was infracted with a WAC 752 (possession/ positive U/A test). He reports that one day prior to the U/A, he was in the HSB on medication. The U/A came back positive for an unauthorized substance but did not come back positive for the medications he states that he was taking in the HSB. He requested that the test be sent out and was denied that request by the facility. He also reports that the dates on the infraction were entered incorrectly.	DOC policy at the time of the incident only requires UA results to be sent to the lab at the Superintendent's discretion, which was not the case here. Since this incident, a new UA policy has been implemented to allow for any positive test to be sent to the lab at an incarcerated person's request.	No Violation of Policy
160	Related to OCO Use of Force investigation. Several serious health impacts following a use of force. Prescribed heart monitoring for several weeks. Received EKG and may have been diagnosed with heart damage. Patient thinks he needs follow up. Patient reports difficulty breathing, laying down, sleeping. Needs EKG follow up; DOC did not describe results. Received breathing test – would like OCO to request document.	Complainant has been seen by his DOC provider as well as a cardiologist. Pulmonary tests are reported to be normal; echocardiogram was performed by the cardiologist and no follow-up was needed. He is encouraged to see his provider if he believes another EKG is warranted. Complainant will also need to follow the facility's process for requesting copies of prior studies.	No Violation of Policy
	Additional: Since use of force and EKG results, they used OC on him again. WSP told him they didn't need authorization for use of force. Claims DOC is falsifying reports to deny further treatment.		
161	Eyeglasses have been backordered since March 2021. Patient requested to receive his glasses.	Could not impact change regarding backlog of glasses.	No Violation of Policy
162	Complainant says he was infracted for refusing a breathalyzer test. He says the machine was not working correctly and the officer changed his statement first saying that he refused then said he blew but that it was insufficient. Complainant says that there is no evidence proving he refused and DOC policies were not followed.	We reached out to DOC staff located at WSP and they stated that the breathalyzer machines are checked for accuracy every month and calibrated to ensure they are properly working. The officer who infracted the complainant stated that the particular intoximeter they had used was fully functional. The officer reported that the intoximeter registered "Lo Flo," indicating that complainant was providing insufficient air flow, not a malfunction, before testing positive.	No Violation of Policy
163	Complainant says his electronic correspondence is being processed as regular mail, in no	DOC is currently following DOC 450.100 Mail for Individuals in Prison which states, "Legal mail only	No Violation of Policy

	envelope, with no date stamp, without being logged and at times is delivered to him a week late. He has federal court cases in the Western District of Washington which produce an average of six filings/correspondence from the court per month. Processed by staff as regular and late.	contain paper documents that are legal in nature, and must comply with DOC 590.500 Legal Access for Incarcerated Individuals. Legal mail does not include eMessages or their attachments and will not be processed as legal mail."	
164	Individual's mom was terminated from visiting about three years ago for introduction, but she was not guilty. He wants to help get on a pathway to have his mom's visitation reinstated.	Visitation is rejected per policy. Complainant's mother can re-apply after some outstanding legal matters are addressed.	No Violation of Policy
165	Person alleges a PREA violation. Specifically, person alleges that DOC staff forced them to leave their cell wearing only alternative undergarments. The allegation is that this harassment subjected them to ridicule and hostility.	AO reviewed DOC Policies: 490.800 PREA Prevention and Reporting; 490.860 PREA Investigation. AO reviewed DOC's internal investigation into PREA allegation, which DOC staff determined to be unfounded. Investigation appears thorough with no violation of DOC policies.	No Violation of Policy
166	Complainant infracted for a staff assault but says that the video will clearly show that he did not assault the staff person.	Contacted DOC administration for additional review. DOC found no new information/evidence to overturn the infraction. The hearing officer decision was based on more than video evidence and the staff member's statement about the incident was sufficient.	No Violation of Policy
167	Closed Case Review: Complaint is that publicly disclosed video of Use of Force was rejected per DOC 450.100 by mailroom. Person alleges that the "mailroom staff exposed video to WSP staff and I was assaulted because of the view of this video." He has grieved staff misconduct and abuse of authority.	Closed Case Review: There is still not enough evidence to substantiate retaliation. AO worked with HQ staff to reevaluate classification and facility placement; DOC offered complainant enrollment in different program and he declined. Original Case Work: After thorough investigation, no clear evidence of staff retaliation and mail rejected per DOC 450.100.	Unable to Substantiate
168	Complainant reports that he is not getting medical care for his injury and other medical issues.	WSP medical verified the complainant has been seen recently and has an upcoming appointment with a neurosurgeon. Cannot substantiate claim of being denied care.	Unable to Substantiate