

# OFFICE OF THE CORRECTIONS OMBUDS

## Monthly Outcome Report: March 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
<b>Assistance Provided</b>	OCO, through outreach to DOC staff, was able to achieve full or partial resolution of the person's complaint.
<b>DOC Resolved</b>	Case resolved by action of DOC staff prior to OCO action.
<b>Lack Jurisdiction</b>	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)
<b>No Violation of Policy</b>	After reviewing all relevant documents and DOC policy, OCO staff determine that DOC policy was not violated.
<b>Unable to Substantiate</b>	Insufficient evidence exists to support the complainant's allegation.
<b>Information Provided</b>	OCO provides self-advocacy information.
<b>Substantiated</b>	OCO substantiates the concern/allegation and it is neither resolved by DOC nor can OCO assist with impacting change.
<b>Decline/Other</b>	Some other reason exists for the closure of the case, generally release.

# Monthly Outcome Report

## March 2021

Institution of Incident	Complaint/Concern	Outcome Summary	Case Closure Reason
<b>Unspecified</b>			
1.	<p>Person says he was revoked on his DOSA full hearing for violating terms and conditions of judgment and sentence. Feels it is unlawful for current confinement in a prison facility for the other half of his stipulation which is community-based supervision. He has served his full term of his prison sentence. Law provides alternative avenues to be offered as a last resort to help individuals achieve and fulfill their obligations to the courts in the state of Washington.</p>	<p>Closed case for lack of jurisdiction as it occurred on community custody.</p>	<p>Lack Jurisdiction</p>
<b>Airway Heights Corrections Center</b>			
2.	<p>This person wants to be transferred back to CRCC from AHCC</p>	<p>Provided information for self-advocacy. DOC is not in violation of policy by making this placement decision.</p>	<p>No Violation of Policy</p>
3.	<p>Submitted on behalf of incarcerated person: He had a classification hearing at his facility, during which he asked to be transferred from AHCC to MCC for medical reasons. He suffers from a very serious autoimmune disorder (he has regular chemotherapy sessions every 60 days at the Spokane hospital), and since AHCC does not have 'wet cells' in the minimum security unit, if there was a Covid outbreak, he would have been forced to mingle with others in order to use the restroom and all. Superintendent and colleagues refused to acknowledge the request and consequently, the transfer request was never even transmitted to headquarters. The facility's administration justified this decision by declaring that they would still be able to protect him anyway in case of an outbreak, by putting him in a separate 'wet' cell by himself, and that they would take special measures to safeguard him. When the outbreak at AHCC happened, this person was not separated from others and not offered special protections. He</p>	<p>Covid complaints documented. Complainant provided update that the facility has now approved the transfer request and is awaiting HQ decision. Provided info and next steps if follow up is needed. No current medical complaint to address.</p>	<p>DOC Resolved</p>

	contracted Covid-19. Now recovered, he would like to transfer to MCC to be near family in case of an emergency.		
4.	Person stated that his regalia (eight eagle feathers) went missing and DOC lost it. It is very important that he have this because if he dies, it must be buried with him. Otherwise it is a disrespect to his culture and spiritual practices.	DOC was not able to locate the regalia. The feathers were lost when he was moved to the gym.	Substantiated
5.	Complainant has been asking for further evaluation and treatment for a back injury. He recently received a physical exam while in the hole and was given medication at that time. Since then, he continues to have pain, and says medical wouldn't see him at all. He has put in kites to be seen because he considers it a medical emergency. When released from the hole he was wheeled to medical to get his cane. He asked for Health Status Reports (HSRs) for lower bunk and lower tier and had not been evaluated for those. Officers provided him with a lower bunk, lower tier, but threatened that he would be moved. Has not been seen or reviewed for an HSR. Since medication ran out, he has no medication at all. He was told to do over-the-counter regimen but that does not work effectively on the pain he's experiencing. Requested CT scan, x-ray and/or MRI – further diagnostics testing, pain management, medical equipment and HSRs, and treatment plan.	Confirmed x-ray and updated treatment plan. DOC expressed plans to discuss additional options for chronic back pain. Confirmed HSR for cane and lower bunk provided. DOC found "no medical indication" for MRI or surgical consult and did not approve that request. DOC also said he is not a candidate for long term pain medication at this time. He is receiving treatment and testing in compliance with the DOC "Offender Health Plan"	DOC Resolved
6.	Loved one filed complaint on behalf of incarcerated individual. Reports that they've requested records in the past but DOC did not include any information regarding his foot/feet. This individual needs surgery to stop his chronic foot pain so that he can walk again. Reports fearing that, if this issue continues, it will further impair his mobility.	Previously reviewed by CRC and surgery deemed not medically necessary. X-rays from 11/2020 unchanged from prior studies. Facility Medical Director (FMD) states that complainant does not meet medical criteria for custom insoles or boots, and that an outside referral is not medically necessary.	Unable to Substantiate
7.	Complainant says that incarcerated loved one was infracted after an assault on another incarcerated individual and a keep separate was placed between them. Despite the keep separate, he was then told to accept a cell assignment on mainline, which he refused, and for which he is receiving another infraction. However, he should not have received the latter infraction as he already was going to have keep separate. According to loved one, he should never have been	OCO staff spoke with external family member and complainant at cell-front. Reviewed infraction record and custody facility plan. Mediated concern by speaking with multiple people at DOC headquarters (HQ) and facility regarding the infractions, keep separates, and custody demotion. According to HQ, WAC 724 (refusing housing) played no role in decision to demote. Rather, demotion to close custody based	No Violation of Policy

	placed at AHCC in the first place as many emails have been sent to tell DOC that he was going to have problems there and that he did not want to be at a "safe harbor" facility. Now he's being increased from minimum to close custody, and loved one feels that this is retaliation.	on severity of assault in the camp (MSU) and DOC believes that behavior does not match unit expectations of a medium assignment. No violation of DOC 300.380, Classification and Custody Facility Plan Review, and no evidence of retaliation.	
8.	Complainant says that his graduated reentry is being denied by HQ and the ISRB. Complainant says that his ERD has been approved to reenter the community but now the ISRB is telling him something different.	OCO does not have the ability to impact sentencing decisions. Reviewed the ISRB decision and did not see any violation of policy. Explained how to appeal the ISRB decision.	Information Provided
9.	Complainant states that she is in a four-person cell and does not feel safe since a fight has already occurred. This is also affecting her mental health. She filed an emergency grievance and a PREA with no resolve.	She has been moved out of the four-person cell. Invited her to follow up with OCO if she feels unsafe.	DOC Resolved
10.	During the Covid-19 outbreak, he and his cellmate were moved to education when they were negative. If they hadn't been moved, they would have avoided getting Covid-19. Wants the name of the person that's "to blame" so he can give that to his lawyer.	Explained OCO's actions for monitoring DOC's response to the Covid-19 outbreaks.	Information Provided
11.	Complainant says that he is being targeted by staff and he is not receiving his proper medications. Complainant stated that the nurse who distributes pills has been switching out his pills with identical looking ones. He also mentioned that a CO had targeted and accused him of hiding a pill in his mouth. The guard then grabbed complainant by the back of his shirt collar. Complainant asserted that he'd just survived Hodgkin's Lymphoma and now he is being assaulted by prison staff after catching the pill line nurse switching his medications.	Uplifted staff conduct concerns to appropriate Assistant Ombuds. Records show patient is receiving appropriate medications. Patient has refused to see medical, even with mental health staff presence, since February 2021. He did not clarify desired resolution/remedy in complaint form. Provided information for following up with OCO.	No Violation of Policy
12.	Complainant says that he was forced to work during the Covid-19 outbreak at AHCC. He was told that he would lose his custody level or be infractioned if he refused. The grievance coordinator and job coordinator roles are held by the same person. He withdrew his complaints because there were too many issues.	Explained that while these reports don't have evidence to be substantiated, we did raise them in our monitoring report.	Unable to Substantiate
13.	Complainant says that there was an outbreak of Covid-19 within his facility and it was not being controlled. He also says that his health and safety are at risk, and he is not supplied	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19	Information Provided

	with cleaning materials. As result of this lack of control, he tested positive for Covid and lost his sense of smell. He was unable to shower or make phone calls for three weeks.	guidelines and uplifted concern to the Assistant Ombuds for that facility.	
14.	DOC recalculated sentence. Records did it in September/October and they decided that he didn't get jail credits and they took them off of his sentence and took them off his release date. He filed a grievance. No satisfaction. Filed motion with sentencing court and they issued order to DOC ordering that they give him those days credit and apply them to sentence and recalculate. Reports that DOC owes him 116 days jail credit and 58 days good time on those days.	Spoke with complainant. DOC gave 70 days of sentence back. Wants case closed.	DOC Resolved
15.	Complaint states that complainant went to acting CUS in October to address being harassed by another incarcerated individual for being transgender. Complainant states that the acting CUS was hostile and accusatory when she tried to advocate for her own safety because she is a transwoman. Complainant states that DOC is responsible for all prisoners' safety and that the current investigation process is not effective. Requested to be interviewed by OCO to participate in systemic review to fix investigations so that an allegation from a transwoman doesn't automatically get sent to PREA , determined not to be PREA, and then fail to be appropriately investigated at the facility level.	AO met in-person with complainant to learn from her about concerns, experiences, and recommendations. AO provided her with a copy of the new Washington Trans Prisoner Resource Guide. AO anonymously elevated her concerns to HQ staff and asked that they reflect on and review the concerns. AO elevated concerns to OCO's LGBTQIA+ Specialist, who anonymously incorporated concerns into their work with HQ staff. Finally, OCO anonymously elevated the summary of concerns to external groups working to protect the rights and amplify the voices of incarcerated people. All anonymous elevations of concerns were done with complainant's prior approval.	Information Provided
16.	Complainant needs to resume mental health medications and also would like to change his mental health provider.	Could not find any related grievance on file. Suggested he discuss concerns with provider and consider using resolution/grievance program if issues remain unresolved. Contact our office again if he still needs assistance once he receives reply.	Lack Jurisdiction
17.	Chronic anemia and low white blood cell count. History of multiple ear infections and stomach pain. Mother concerned that nothing is being done for him.	Requested specialist evaluation; this was subsequently provided by DOC along with additional diagnostics.	DOC Resolved
18.	This person saw on the news that the city of Airway Heights has contaminated water and he's worried that the facility isn't	Confirmed that AHCC is not on the City of Airway Heights water; they are on the City of Spokane's water.	Information Provided

	taking action to address it. He grieved it and was told he cannot grieve third party information.		
19.	Complainant says he filed two grievances about the misuse of medical kites. There are three copies: white, yellow, and pink. He had asked for a rescheduling of a hearing test he missed because of a CO. His complaint is of staff misconduct by the nurse. Complainant had scheduled a hearing test and was denied going to it by the unit officer. He sent a kite to medical, but it must not have reached them. Instead it went to the unit officer who had prevented him from going in the first place. He says it feels like he is being retaliated against. DOC staff called him to the office and, in a threatening manner, told him that the unit officer can do whatever he wants in this unit, even refusing medical. Complainant felt humiliated and hopeless when he heard this. He is in K unit.	Reviewed case via the appeal process: New information was provided but there is still not enough evidence to substantiate. Reviewed evidence. There is not enough to give clues as to what happened. Incarcerated person says the CO knew about the kite; the CO states that he did not see the kite.	Unable to Substantiate
20.	Complainant says that COs refused to follow social distancing guidelines and told complainant that it is a guideline from CDC but not a facility rule. He says that WSP and AHCC are not taking the pandemic seriously and are not protecting incarcerated individuals from contracting Covid.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines.	Information Provided
21.	Complainant says that he is a library clerk at the facility and is supposed to be compensated \$35 a month per OM policy. However, he has not been compensated since September. Complainant also says that per a different policy those who are unable to work due to Covid-19 are supposed to receive a \$30 stipend, but he did not receive this either.	DOC has provided him with the correct Covid-19 pay. Recommended that he work with his counselor to be placed in a position that's active so that he can be paid.	No Violation of Policy
<b>Cedar Creek Corrections Center</b>			
22.	Complainant's brother sent in a food package from Union Supply and it's been held at a warehouse for the past two weeks. Wants it to be either passed out or the brother wants his money back.	CCCC staff confirmed that the package had been cancelled due to an issue with payment. The charge was refunded to the brother's account. OCO does not have jurisdiction over Union Supply; any further questions should be directed by the brother to Union Supply's customer service.	Assistance Provided
<b>Clallam Bay Corrections Center</b>			
23.	Complainant should have been found not guilty of two major infractions for tattoo paraphernalia and pruno. Wants this	One infraction was overturned by DOC. The other infraction (for pruno) was from October and the	No Violation of Policy

	investigated for due process violations. He was never given notification of the extensions. He has an ADA accommodation because he cannot read or write. He was found guilty at the hearing but he couldn't appeal it. Staff advisor came to write out his appeal but didn't write everything he said (in December).	hearing was held in November. An appeal is noted in OMNI. The area under the bunk is considered a common area for both occupants and therefore both occupants can be held responsible for it.	
24.	Complainant says that the kitchen has been giving them the wrong meals and the portions are smaller than what they are supposed to receive. Says that this results in a lack of protein and calories that they are supposed to be provided with.	Reviewed grievances, alerted DOC staff, reviewed other documentation, dietary guidelines, and relevant policy. At this time we can find no violation of policy. Notified staff of this concern, but DOC has provided all pertinent measurements and alterations demonstrating levels of nutrition and portion sizes.	No Violation of Policy
25.	Complainant grieved that a particular DOC staff member made a derogatory statement about him. The grievance was removed from the grievance program and separately investigated, but the complainant never heard back the result.	Discussed with DOC Grievance Program Manager. The response that was provided to the complainant that his concern had merit and would be separately investigated is all the information that is communicated regarding staff conduct investigations. [Note: Similar concern also raised in grievance procedure workgroup; response was that DOC could not relay more than this information to anyone, staff or incarcerated individuals, due to union agreement.]	No Violation of Policy
26.	Fiancé contacted OCO and she stated that loved one was in safe harbor and was then taken him to IMU due to a report from another individual that he was going to be harmed. They investigated but loved one still remains in IMU currently with no resolve anytime soon.	Could not reach the original complainant and have not heard back from incarcerated person regarding his desire to have the matter reviewed. Without further information, we are unable to provide additional review.	Declined, Other
27.	Complainant says the mailroom rejected his incoming mail along with the mail of dozens of other incarcerated individuals. The basis for rejection was that it "contains information about another incarcerated individual," but it is a monthly newsletter distributed by Prison Legal News.	Explained that this issue of Prison Legal News contains information about others that are incarcerated in Washington State. Policy 450.100 Attachment 1. Will address this when reviewing mail policy systemically.	No Violation of Policy
28.	Complainant says he went to IMU at WSP in 2017 and his property arrived at CBCC from WSP in early 2018. He was sent back to WSP for court after property arrivals. The property sat at WSP for approximately 18 months and was eventually returned to CBCC in November. Property staff refused to	Reviewed grievances, other documentation, OMNI/OnBase/Chronos. Also reviewed DOC 120.500 (torts), 420.155 (movement) 440.000 (property) and 440.020. DOC resolved this concern. Complainant's overcharge was sent back. Informed him if he has	DOC Resolved

	return the TV without payment (\$15 hold fee). But complainant provided the transfer of funds shortly thereafter with \$30 postage funds in account. Staff claimed that, due to furloughs, staff could not put TV hold in the system and they would not release the TV until end of November. Complainant is grieving lack of backup and plan and lack of staff. He also found the receipt that says he paid it in June 2018.	further complications to please reach out and to contact inmate banking.	
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29.	Complainant says the mailroom has been denying/rejecting his mail sent to him using ameelio.org since December 2020. CBCC has been wrongfully denying his mail for it being a third party, which per ameelio.org policy it is not.	They are a third-party vendor as DOC contracts with pay/GTL for those services. No violation of policy. Actions Taken: Review of Policy Policy Reviewed: Mail 450.100 and Unauthorized mail attachment.	No Violation of Policy
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**Coyote Ridge Corrections Center**

30.	Reporter says he sent out letters that contained excerpts from a book in the library and was censored and rejected. Subsequently he received his first infraction in several years for possessing sexually explicit materials.	Reviewed via the appeal process: there is now another open case extending upon this case. Closing this case as we are still not able to impact change. Upon examining the infraction and appeal, the correspondence was sent by complainant to see if policy and law can be challenged as policy seems contradictory. Headquarters' response was that DOC has no plans to suggest or request changes to the current WAC relied upon to make determinations on what is, and is not, sexually explicit. DOC is acting within the guidelines for rejecting such communications and issuing the resulting infraction and corresponding sanctions,	No Violation of Policy
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31.	Complainant says that he tried to mail 16 Christmas cards that were pre-franked, but the mailroom rejected his cards. He then sent a kite to the mailroom asking to return his cards to his possession, but the mailroom rejected this.	The 16 Christmas cards were not from an approved vendor. Per DOC 450.100 (attachment 1), items from an unapproved vendor are not allowed to be sent from or to DOC facilities.	No Violation of Policy
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32.	Upon arrival at CRCC, complainant received a mattress, which he stated was already in poor condition. He was then infraacted for allegedly stuffing his mattress cover with a second mattress, within 24 hours of being at the facility. He appealed but was still found guilty and he's being charged for the mattress.	Reviewed disciplinary packet and audio of the hearing, as well as followed up with CRCC administration. Staff did not view the video for the full 24 hours that the complainant was at the facility; however, the small amount that they did review contained some small contradictions to the	Unable to Substantiate
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		complainant's statement. Combined with the officer's statement via the infraction report that he personally delivered the mattress to the complainant and that it was normal at that time, DOC has declined to overturn the infraction.	
33.	Complainant has not received appointment with PCP or follow up x-rays. He sent a kite about worsening symptoms over a month ago and hasn't heard back. DOC originally told OCO he would be seen soon. OCO reopened the case because several months had passed and he had not received an appointment or x-rays yet.	Confirmed both x-ray and appointment with provider scheduled.	DOC Resolved
34.	Has been sitting in IMU since July due to being assaulted and would like to transfer to AHCC camp, then WR/GRE.	This is substantiated. The person was in IMU since July after being assaulted. The response from the facility was that transfers have been slow due to Covid-19. We are currently looking at a report about extended stays in IMU and will consider this for inclusion as this length of time in IMU due to no fault of his own seems outrageous.	Substantiated
35.	Complainant says that he is experiencing difficulties with mail correspondence (ingoing and outgoing). He says that he is experiencing discrimination/retaliation and wants to know what to do about it.	Provided information about DOC's mail procedures as described in DOC 450.100 "Mail for Individuals in Prison." Section (X) "Rejecting Mail" outlines actions incarcerated individuals may take to appeal mail rejections including electronic eMessages. Included the relevant pages from the policy. Informed him that he must first appeal the denial, and then OCO can review if the matter remains unresolved.	Information Provided
36.	Complainant says that he told staff that he does not feel safe because he has people within the facility that want him dead. Staff told him that he could move to the hole, but he does not want to because he did nothing wrong. Says that he is being targeted by political incarcerated individuals because of his charges and his disabilities.	DOC spoke with complainant who assured facility mental health staff that the concerns that were raised have been remedied; his Counselor reminded him he is willing to meet with him at any time to discuss concerns. Mental health issues and safety issues resolved as two separate concerns.	DOC Resolved
37.	Patient says he was charged a second medical copay. He received foot soaks for seven days (15 minutes each), but states that this should take place after his ingrown toenail is removed. He complained about his toe originally in August	OCO cannot impact change related to his request to transfer. Provided information and next steps as there is no grievance on copay issues and we did not receive enough information from his original	Information Provided

	2020 and wasn't seen until a month later. He has filed grievances against medical and has been treated differently since. Requested institutional separation from CRCC and to be transferred to a different facility.	complaint form to follow up on the staff conduct concern. Also asked patient if he has additional medical resolutions he is seeking and if so how to follow up with OCO.	
38.	Complainant says that he tried to send out legal mail and it was delivered two months late because it was delayed at the legal mail procedure part. He also says that he received legal mail and it was opened without him being present. Wants information on how to file a tort claim.	Provided information regarding self-advocacy options, including filing a tort claim.	Information Provided
39.	Caller states that DOC is violating RCW 9.94A.6551 by denying him access to the Community Parenting Alternative (CPA) program. DOC denied his request because he's in on a violent crime. However, the RCW does not suggest that that would make him ineligible. Wants to be accepted into the CPA program.	After reaching out to DOC, we were informed that the children currently reside in another state. Individuals who are transferred out of prison to parent their children must be in the same state. Incarcerated individuals cannot cross state boundaries per the RCW contained in DOC 390.585 Community Parenting Alternative policy.	No Violation of Policy
40.	Complainant says that he is being held way past his ERD. He says that he wants to change his County Of Origin to improve chances of releasing. He was told that he must be released to Pierce County because of more availability for housing with his type of crime, but this doesn't seem to be the case. No availability.	Relayed information obtained from DOC: complainant had been denied two County of Origin exceptions through the Offender Release Plan (ORP) process. ORP is reviewed by a Community Corrections Officer, Community Corrections Supervisor, and the Field Administrator. If denied at the Field Administrator's level, DOC must continue to look for housing in the County of Origin. At the time of closing, no suitable housing had been found. It is for this reason that DOC continues to hold him past his ERD.	No Violation of Policy
41.	Complainant filed grievance on medical not treating him for his back pain. He's been on pain management for nine years due to a sciatic nerve problem. Has had five medical emergencies this month. DOC is just switching him back and forth on meds that don't work.	Provider states no abnormal physical findings and normal back x-rays. Complainant received new prescriptions upon arrival to CRCC; provider recommends trial of meds for a few months to see if there is a benefit. Complainant reportedly not compliant with one medication nor with other interventions. Encouraged him to consistently follow provider's treatment recommendations, and seek a re-evaluation if symptoms continue.	Unable to Substantiate

42.	Complainant is past his ERD. He was told that he must stay within a five-mile radius away from where crime happened, which includes the residence that he grew up in. He submitted an address that was 7.3 miles away and it was still turned down for "community concerns." There are only a few places he can go. Now has a current address that is 18 miles away. Wants to be approved for this latest address. Also filed appeal to be able to go to the prior addresses that are closer to his home.	This person's release plan has been approved and he has a planned release date.	DOC Resolved
43.	Complainant says the dayrooms do not have enough seating for everyone stuffed into that room. 128 incarcerated individuals and only 20 tables with stools for only 76 people has led to many fights throughout the years. Because of Covid-19 there are new dayroom rules such as an upper and lower tier split access to the day room. Because of the configuration 56 prisoners live on the top tier and there are 72 on the bottom tier. Now only 2 people can sit at each of the 20 tables. Complainant is wondering where the remaining 32 people are supposed to sit.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided
<b>Mission Creek Corrections Center for Women</b>			
44.	Complainant's ERD is coming up. She is worried she'll relapse upon release so she wants to get started on the Suboxone program. The only way to do this would be to go back the WCCW which has been denied.	She will transfer to WCCW for MOUD (medication for opioid use disorder) induction.	Assistance Provided
<b>Monroe Correctional Complex</b>			
45.	Complainant's fiancé is currently housed in IMU at Monroe on ad seg status while DOC conducts an investigation on an assault that he claims never occurred. He was informed that he has now lost five days good time due to being in IMU for longer than twenty days. He's been in there since Christmas.	Complainant's fiancé was ultimately served a 505 (fighting) and 752 (intoxication), which he did not appeal. He is currently in ad seg pending security demotion and transfer, which is currently in line with DOC Policy 320.200.	No Violation of Policy
46.	Complainant's son was indirectly involved in an incident on or around Super Bowl Sunday. He was not drinking and when given a breathalyzer he blew zero. Yet he was sanctioned and was refused phone privileges, store, and had TV taken away. They added 30 days to his sentence. He was due to be	Communicated with DOC Disciplinary Program Manager. Complainant's son blew 0.012 positive on the breathalyzer. DOC staff did an accuracy test prior to administering the test. All alcohol consumption is prohibited for persons incarcerated. We cannot	No Violation of Policy

	released March 17th. Complainant is getting married April 15 out of state and has been waiting almost three years to have her wedding so that her son can walk her down the aisle. She cannot change the date as a lot of guests have already made travel and hotel arrangements.	impact change on this case. Recommended that the mother reach out to Superintendent Jackson as she is really concerned about just a few days so that her son can catch a flight for her wedding. Gave her the email for him.	
47.	Complainant's brother is currently in restrictive housing pending two disciplinary hearings. He has bipolar disorder, a mental illness classified as a disability. He manages the symptoms of his condition through medication, rigorous exercise, and religious programming. During his time in "the hole" he is unable to access daily exercise and religious programming and complainant is extremely concerned about his well-being after a prolonged period in segregated housing. He has an extremely limited disciplinary history at TRU and was preparing to be on work release soon. Considering his long history of good behavior, there is no clear reason to be keeping him in segregated housing pending his hearing. It is also not clear that the facility is taking steps to mitigate the potential harm of segregated housing given his disability.	DOC can hold someone in ad seg pending transfer and for security reasons. In this case, the individual had two ropes (one over 50 feet long), which are considered escape tools. His security was increased and he was in IMU pending transfer. OCO recognizes the concern about persons with mental health concerns sitting long-term in IMU and hopes to address this systemically in the future.	No Violation of Policy
48.	Complainant's husband has a disability and uses a walker. He is routinely assigned to the downstairs kiosk for video visits, even though there is an accessible kiosk on his floor. For each video visit, he is using his walker to go down the stairs to the assigned kiosk. He grieved this issue but grievance reply only told him to speak with people he'd already spoken with and also provided irrelevant information about in-person visits. Complainant would like husband to be assigned to nearby accessible kiosk.	Substantiated complaint. Alerted numerous DOC staff at headquarters and facility, including HQ ADA Compliance Manager and HQ JPay Liaison. DOC modified this person's route to kiosk to avoid stairs, but he must now be escorted around the building using his walker which is very taxing. Preferred resolution of reassigning kiosk was not possible. DOC states that they do not control the specific kiosk assignments; the assignments are automatically generated by JPay based on the individual's housing, and there is no way for DOC to override which nearby kiosk is assigned. Provided information for family member to contact JPay to request assistance.	Substantiated
49.	Complainant's loved one was put in IMU, where he had difficulty sleeping, was served cold food, and had to take cold showers. Complainant wishes DOC could just put him on the bus so he could get back to Clallam Bay.	Individual was transferred to Clallam Bay after complaint filed. Mailed him an OCO review request form in the event he would like further assistance.	DOC Resolved

50.	Complainant states he was kicked out of substance use disorder treatment one week before graduation. He doesn't know why he was removed other than being told he upset the chemical dependency staff. Staff had a conversation with him the following day and told him he received paperwork to appeal the decision; however, he never received any paperwork.	Contacted DOC once we obtained a signed release of information, allowing us to investigate. Since then we were informed that complainant was moved to a unit where a seat will be forthcoming for his return to the Chemical Dependency treatment program.	Assistance Provided
51.	Complainant reports that he tore a ligament in right shoulder and has received only minimal care since 2017. Received an MRI recently and shoulder is still torn. Would like to have surgery.	Seen by outside orthopedic surgeon. Surgery not recommended; rather, steroid injection and physical therapy were prescribed. He received the steroid injection in January. PT was scheduled for March, but he did not attend appointment; appointment rescheduled. Encouraged to follow-through on all treatment recommendations and seek an appointment if he continues to have symptoms despite being compliant with care plan.	DOC Resolved
52.	Complainant reported having issues accessing a legal phone call.	Contacted DOC and were able to confirm the following information: incarcerated individuals can notify a member of staff regarding a specific day/time needed to place a call to their lawyer, to help ensure that they are out of their cell at that time. As such, legal calls can then be placed on a unit phone and will neither be recorded or monitored.	No Violation of Policy
53.	Complainant says that there are two incorrect charges in his legal file. He says that he has never been charged with these crimes and wants them removed from OMNI.	OCO cannot assist with amending charges in a person's electronic file as these actions fall outside the scope of our office. OCO does not have authority over modifying sentencing and crimes.	Lack Jurisdiction
54.	Found guilty of a 709 out-of-bounds that the complainant contests.	Reviewed infraction evidence and hearing. As this incident happened so long ago, no video evidence exists to disprove the out-of-bounds allegation. The evidence in the infraction meets the "some evidence" standard.	Unable to Substantiate
55.	Infractions resulting in loss of personal property including religious items and state library books. Disputing items not on his personal property matrix provided as items to be boxed up and removed.	Complainant did not yet appeal the referenced disciplinary infraction and the issue regarding the removal of property requires a grievance to be filed. (Noted that one grievance was filed but then	Information Provided

		withdrawn at his request shortly thereafter.) Should any of those items not be returned following the suspension of your privileges, you will need to file a tort claim with the Department of Enterprise Services (DES), claim packets are available through the facility law library.	
56.	Second review of case. Patient has multiple teeth that are deteriorating and causing pain, mostly when he eats. This affects his daily living as he is also missing molars on both sides and must chew with his front teeth. He has 20 minutes to eat but often he is not able to finish his meal in time. He has been seen for urgent/emergent care but no routine care since he started sending kites in January 2019. He has dental care plans and has received multiple x-rays but he feels this isn't helping without the follow up appointments or treatment. When responding to grievances, DOC staff have focused on his right front tooth issue, but his biggest concern is his other teeth. He keeps being told to work with his dental provider but says one of the providers told him not to send her kites anymore.	Confirmed patient was seen for dental services in November. He has been placed on a list to be seen for additional restoration work on front teeth, but there have been delays in routine dental care due to Covid-19 physical distancing restrictions. DOC reports that there should be no time limit on eating food. DOC also encouraged patient to send kite or declare dental emergency if problem becomes urgent.	DOC Resolved
57.	Complaint is regarding approval for trans housing. Complainant reports that DOC is refusing to reply to their appeal form. Reports that they sent their appeal in November and has heard nothing since.	After making outreach to DOC they were unable to find any record of having received form DOC-02-385 from this individual. DOC headquarters further stated that during their January 2021 housing review, they made no mention of an appeal resulting from the prior May 2020 housing review.	Unable to Substantiate
58.	Complainant says that he was placed in TRU because he was not going to be able to go to a facility with a close custody unit. He says that HQ changed their recommendation to MAX without justification or criteria. Wants to be housed in SOU.	After making outreach to DOC, complainant was assigned to SOU.	No Violation of Policy
59.	DOC neglected to conduct pre-surgery ultrasound even though L&I procedures dictate that one is required for diagnosis. He was initially misdiagnosed with only a right-side inguinal hernia. The right side was repaired last year and after the repair, he noticed pain in his lower left abdomen. He requested an ultrasound of left side, which was not conducted. L&I granted the ultrasound and it was completed	OCO does not have oversight over Labor & Industries, and thus cannot impact L&I decisions.	Lack Jurisdiction

	<p>in June, detecting a left inguinal hernia. DOC denied the surgery saying it wasn't medically "indicated at this point" and encouraged him to work with L&amp;I in order to receive authorization for the surgery. His wife was told that the provider sent his L&amp;I claim manager a statement that her personal opinion is that his left side inguinal hernia was not related to the L&amp;I claim. He was not informed of this by the provider. His L&amp;I claim was only half fixed through no part of his own and he is in severe pain. Requested that L&amp;I pay for the additional surgery.</p>		
60.	<p>Person received a major infraction over something that he believes he was wrongfully infractioned for. He states that the doors at WSRU closed too quickly for him to exit the other person's cell. Primary concern are the points that he lost.</p>	<p>Reached out to MCC to raise concerns. MCC staff stated that the point loss is mandatory based on the infraction and cannot be changed. Regarding the infraction, they stated that the doors at WSR do not close so fast that an individual cannot get out of the way; they were unwilling to consider overturning the infraction. Provided self-advocacy information regarding contacting DOC Disciplinary Program Manager.</p>	<p>Unable to Substantiate</p>
61.	<p>Complainant is sitting in long-term ad seg pending transfer to CBCC. Primary request is that he wants to be able to use the phone every day to call his family. He also wants some minimal property, such as photos and coffee. He was recently on COA/suicide watch due to anxiety/panic attack due to not being able to talk to his family.</p>	<p>Raised concern with Superintendent and HQ. Superintendent met with him personally to discuss issues, stated that while in IMU he has an opportunity to utilize the phone 5 days a week. CUS is going to meet with him about possible property. Mental health also was asked to meet with him. DOC hopes to implement transition pod soon, which would provide more privileges.</p>	<p>Assistance Provided</p>
62.	<p>Complainant says that he was moved from WSR to TRU which has caused a lag in timing and misunderstanding of his grievances that he filed. Complainant says that he is being told to rewrite his complaint and refile. States this is cruel and unusual and wants DOC to be fined and pay restitution when this happens.</p>	<p>The two grievances referenced were deemed duplicates. The Grievance Department closed one and the remaining grievance now sits at Level 1 with a due date of May 2021. All issues in grievance were non-grievable except the issue of phone access. Provided information that DOC is following policies and procedures in asking for rewrites per Page 16 of the Grievance Program Manual (enclosed with letter), we cannot investigate a Level 1 non-medical grievance regarding phone access, and OCO also</p>	<p>Information Provided</p>

		cannot dictate staff discipline or demand monetary restitution be made.	
63.	DOC staff was seen twice taking photographs of her while she was shirtless.	DOC did not consider this incident to fit the definition of PREA and did not conduct an investigation into this incident. OCO requested and was provided with video surveillance footage of the yard at the times indicated by the complainant; however, the video would not play. OCO worked with the facility, WaTech, DOC IT, and DOC public records and no one could fix the problem or provide a playable copy of the video. As a result, this complaint cannot be substantiated. OCO will continue to attempt to find ways to play the video and will re-open the case if this becomes possible. Issues and concerns with video evidence within DOC is a systemic problem of which OCO is aware; we are addressing this with DOC at the HQ and local levels.	Unable to Substantiate
64.	Complainant says that he is not being allowed to contact this family or legal counsel on a daily basis because he is being held on maximum custody pending transfer. Reports that this lack of communication causes him to have anxiety attacks and psychological breakdowns. He says that he has been in segregation for 66 days and is eligible for level 3 promotion but it still does not address the deprivation of contact with his family and legal counsel.	Complainant was given the opportunity to meet in person with Superintendent, at OCO's request, to address his issues. It's reported the meeting covered a lot of ground, and they'll attempt to accommodate him given the constraints of an IMU setting and the need to rotate others through the phone schedule.	Assistance Provided
65.	Complainant says that he has filed multiple grievances against COs and when the grievance system does not work, he feels vulnerable. Wants COs to be held accountable for their actions.	OCO cannot assist with disciplining individual DOC staff as these actions fall outside the scope of our office. Mailed an Ombuds Review Request form and asked complainant to narrow complaint to an actionable item as outlined in the "Additional Information" section of the form.	Information Provided
66.	Complainant was found guilty of 658 (failure to comply) related to an out-of-bounds incident. Claims it did not happen.	Review of infraction information and hearing. This incident occurred one year ago. As DOC's video retention policy is only 30 days, there is no video evidence available to substantiate that the complainant did not go out of bounds. Evidence presented adheres to the "some evidence" standard.	Unable to Substantiate



67.	Complainant says that he is being held past his ERD and has served his whole sentence. He says that his original sentence was 161 months and he is well past that now. And that "people" that are not judges or jurors are adding time to his original minimum term.	Complainant is referring to the Indeterminate Sentencing Review Board (ISRB) that has jurisdiction and decision-making authority over this category of conviction. Following his most recent Board hearing, complainant's ERD was changed to reflect 24 months added to his sentence. Encouraged him to continue to engage with counselor who provided copy of the Decisions and Reasons paperwork explaining the time added to his minimum sentence.	No Violation of Policy
68.	Complainant thinks it is cruel and unusual punishment to endure Covid in the facility. He believes that he should be released because he is serving a short term and is at great risk of contracting Covid.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided
69.	Complainant has a cane and knee brace and lives on fourth tier and can't get to mainline. He wants to get to lower tier. Says that he's in a lot of pain and it's not safe for him to walk with a cane and maneuver the stairs. Had a meeting with CUS and told the only way they'll do anything is if Health Services changes his code to a L-2 but can't he get a response from Health Services.	Reached out to MCC. MCC states that they did have a recent conversation with the complainant, but that the request expressed was not a lower tier placement, but a move to TRU. Complainant reportedly asked if his L code was changed whether he would have to be moved. At this time, unclear whether the underlying issue is actually his disability or whether he wants a transfer. Encouraging him to use the grievance procedure and continue working with DOC staff.	Unable to Substantiate
70.	Requests a review of an infraction given in 1999 when he was in off his medication.	Explained that DOC infractions are based on if they were committed, not the circumstances that lead to the action. I gave him some resources to regarding good time restoration.	No Violation of Policy
71.	Negative Behavior Observation Entry (BOE) for "good faith effort to avoid a PREA situation" in which he covered the lower portion of the door window to prevent groups from peering into the window while he used the bathroom.	DOC is reviewing his BOE appeal and will respond.	Assistance Provided
72.	Complainant says that he is being denied religious items allowed under current DOC policy, but the policy is being changed. He says that he filed grievances to obtain these items but has not yet gotten the items.	Contacted DOC and learned that complainant's grievance was responded to and headquarters is actively working to resolve the issue. Informed complainant that DOC has acknowledged the concerns and is working to identify a Pagan	Information Provided

		contractor that can provide the items identified within allowable DOC guidelines.	
73.	Complainant was found guilty of a PREA violation by grabbing another incarcerated individual inappropriately. Complainant claims it did not happen.	Reviewed PREA investigation, video evidence, and spoke with the complainant. The video evidence clearly shows the accused reaching over toward the alleged victim's mid-section as they pass each other in a common area.	Unable to Substantiate
74.	Complainant says that DOC is not following Covid-19 protocols. He says that COs are spreading Covid all over the facility. Believes that his health and safety are at risk.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided

### Olympic Corrections Center

75.	Complainant believes he is being retaliated against for filing a PREA on a woman staff member after she was flirting with him. Since filing, he has been being harassed by facility staff. Last year an officer opened the shower door while he was showering, looked in and then left without saying anything. He has filed a PREA on that incident and it is being investigated. He was also harassed by the sergeant.	There is no evidence available to support the claim of retaliation either by a sergeant or by the male staff member who is alleged to have looked into the shower. The PREA incident regarding the shower is being addressed in a separate case.	Unable to Substantiate
76.	Complainant says that he is classified as high violent risk but has not had any violence on his record since 2010. Says that he has not been afforded the opportunity to reduce his risk level through classes or programming. Reports that this risk level is preventing him from being approved for the graduated reentry program.	Reviewed policy, J&S, relevant decisions, OMNI, as well as DOC 300.500, 300.550 and 390.590. Learned that there are community concerns that prevent his entry into work release/graduated reentry.	No Violation of Policy
77.	Complainant filed a PREA because a staff member opened the shower and stared at him while he was naked in the shower. Placed him in IMU for major infraction #549 "giving false information." The Superintendent did his own investigation.	After reviewing the PREA packet and all video evidence, the allegation of the PREA cannot be substantiated and the PREA packet appears to be done correctly. The video evidence does not show any actions inside the shower area, only what happens in the hallway. Also, cannot substantiate that the 549 was retaliation or that the interviewer altered statements. Complainant has been transferred to a different facility and is no longer in contact with the DOC staff involved in the allegations.	Unable to Substantiate

### Reynolds Work Release

78.	Complainant states that he is missing some money from his savings account that was supposed to follow him from Work Release when he was transferred back to the prison. He is confused about where other funds from his paychecks went and why they took money for room and board when he wasn't there after testing positive for Covid-19. He was told they would send him a check, but he has been at the prison for over a month and the money is still not in his account. He doesn't have anything when he releases in a few weeks and needs the little bit of savings he has.	Contacted DOC headquarters and they stated they would transfer his money from work release to the facility for his release. They verified he was not charged room and board after mid-December, when he left for medical needs.	Assistance Provided
<b>Stafford Creek Corrections Center</b>			
79.	Husband has been in IMU from July to present (March) due to confidential information being leaked. He was assigned max custody because DOC does not feel it has a safe place to put him.	Withdrawn at complainant's request.	Declined, Other
80.	Complainant filing on behalf of loved one. He has not received his mental health medications for three months and does not know why. He has been infected with Covid-19 while in prison and recovered. He has been placed in the hole for his own safety due to a roommate's threat to stab him. For this he lost 45 days good time. Complainant believes loved one should not be punished for demanding his own safety. He has only five months left. Complainant would like to see him in the early release program. Reports that when he goes without medication, he is confused, unable to cope, unable to sleep, and unable to communicate to unknown people. He becomes paranoid that everyone is trying to kill him. People frighten him to the point that he is in fear for his life, which is often misunderstood by staff.	Reviewed mental health services and classification policies. Contacted DOC and was told that this person hasn't gone to pill line for weeks, and that the decrease in points is due to infraction behavior. Was not able to reach complainant.	No Violation of Policy
81.	Complainant received several infractions for refusal to work. He says that he was under pressure of legal deadlines and observing the Sabbath.	Reviewed infraction history and could not find that any of the dates were on a Sabbath.	Unable to Substantiate
82.	Complainant was sanctioned with a year of no contact with a former volunteer at the facility. Doesn't believe the sanctions are appropriate.	The evidence in this case indicates that the volunteer began an inappropriate relationship with the complainant while still a volunteer at the facility	No Violation of Policy

		which is not allowed. DOC appears to be acting within policy.	
83.	Complainant is being harassed by his counselor. Counselor retaliated against him for grieving his behavior and actions. Counselor lied to the ISRB Board saying that he didn't do programming, didn't have a job.	Reviewed past grievances and relevant policies including DO 350.500 ,570.000, and 550.100. Able to substantiate that it is problematic for a staff member to participate in an ISRB hearing after they were the subject of several of the complainant's grievances. Reached out to DOC to share concern.	Substantiated
84.	Complainant says that they identify as a transgender woman, and that, according to new DOC policy, she should be housed as WCCW. Complainant is currently in protective custody and has been for 135 days because they have been assaulted twice. Says that since being at SCCC they have been subjected to nonstop sexual harassment.	Provided information to move forward in requesting transfer per DOC 490.700(VI)(F).	Information Provided
85.	Complainant reports that boss made inappropriate comments regarding Covid-19 deaths, which was very upsetting as complainant's father had died from Covid. Complainant told boss that the comment was insensitive. Boss then called meeting at which he lectured the population that they should be grateful that he and DOC are here to correct their mistakes. Complainant spoke up against that; boss replied "you wanna go home?" Complainant said he would take some personal time due to loss in family. When he returned to work, boss told him to come back next week. Boss's supervisor told complainant he could come back in two days.	Provided self-advocacy options. Informed him of what steps to take (filing grievance, etc.) so that OCO can assist if his concern is not resolved.	Information Provided
86.	Complainant does not feel safe with new cellmate. Alerted DOC staff, including PREA Coordinator, facility administration, and both unit counselors. She was told to find a new roommate. She did this and turned in the move slip but nothing has happened.	This individual was moved by the facility personnel. OCO followed up with complainant and she is pleased with this placement.	DOC Resolved
87.	Complainant says the DOC is not complying with the recently enacted immigration/sanctuary law. Made a public records request with DOC requesting a copy of its policies which it adopted or provided to the attorney general. DOC responded that it had "no responsive records." The complainant has an immigration detainer placed on him by the DOC.	We reached out to HQ and reviewed the following: E3SSB 5497, specifically RCW 43.10.315 (Laws of 2019 ch. 440). We were not able to find a violation of policy. The state legislature specifically exempted the Department of Corrections from some of the legislation referred to by complainant. DOC does	No Violation of Policy

		notify immigration authorities of pending releases approximately 30 days out from release, as it does with other agencies holding detainees. The detainee is placed by Immigration and Customs Enforcement, not DOC. Therefore, it can only be removed by ICE.	
88.	Patient is legally blind. DOC refused to renew his HSR for an ADA cell upon transferring to a new facility. He is supposed to have a follow up appointment with the outside eye specialist, but DOC never got the medical paperwork from Harborview and he doesn't think the appointment has been scheduled. He is supposed to have pain medication every six hours for the eye pain. Requested HSR for ADA cell renewed, follow up eye appointment with Harborview specialist, and prescriptions for Tylenol and ibuprofen.	DOC scheduled patient with eye specialist. Confirmed prescriptions for pain management. ADA concern assigned to separate case.	Assistance Provided
89.	Caller reports that DOC is tampering with his mail. He reports that family have not received any of his letters and DOC will not allow him access to a court video which is related to an active court case. He needs to review it for his case, but the facility is denying him access.	Reviewed DOC 450.110 and 590.500. OCO cannot verify that the mail is not being received or sent if it is not certified. DOC checked and saw no recent rejections for average mail and can verify that messages via JPay have been sent and received. According to DOC, the CD was rejected because it was from an WA Appellate Project, not a court. The complainant requested it be sent out and it was. CDs are not allowed per policy.	No Violation of Policy
90.	Complainant beat an infraction at Stafford Creek for introduction of contraband, and yet his wife is still unable to be added to his approved visitors list due to safety and security concerns due to previous introduction of contraband while at Stafford Creek.	Although the infraction was dismissed due to a technicality, DOC did have proof and evidence of this transaction. OCO cannot impact further change here.	Unable to Substantiate
91.	Complainant says he needs staff permission to shower and clean his cell. He asked his neighbor and people nearby if they had seen staff and they said they had not. He went back to his cell after asking people and was gone for two minutes, but a sergeant came to his cell while he was gone and accused him of breaking sanction and gave him an infraction.	Does not seem to be an evidentiary issue. He admits to leaving his cell. Even though the purpose was reportedly to find the officer, it does not appear to have been an emergency situation that would necessitate leaving his cell at that moment.	No Violation of Policy
92.	Complainant says that the facility is turning a certain unit into a Covid unit that consists of individuals with compromised	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19	Information Provided

	immune systems. Says that staff who worked in the Covid unit are now working in a different unit and are exposing themselves to everyone. Social distancing standards are not being upheld, which makes the unit an unsafe environment.	guidelines and uplifted concern to the Assistant Ombuds for that facility.	
93.	Complainant received a 709 infraction for being out of bounds at the business office when he was just responding to a kiosk message that he had received. Further, he says that he asked for permission to be there. He has lost 10 points and lost his job in CI.	Requested and reviewed kiosk messages for three weeks prior to infraction; could not substantiate that staff had messaged him and given him permission to be in the out of bounds area.	Unable to Substantiate
94.	Complainant was sanctioned to 10 days for a 506 infraction but was kept in IMU for two months.	Due to an infraction, a facility-wide prohibited placement was placed between the complainant and SCCC staff person. He was in IMU pending transfer on administrative segregation status per DOC Policy 320.200. At this point, he has transferred.	No Violation of Policy
95.	Multiple persons reported to OCO that an incarcerated person had been subjected to a use of force, including multiple instances of OC spray, and that he was killed as a result.	We have released a full public report with findings and recommendations.	Assistance Provided
96.	Complainant was demoted to medium custody after receiving a 724 infraction for refusing housing. States that DOC double-sanctioned him when they demoted him after receiving the infraction. Also lost his hearing aids at SCCC and has never gotten new ones.	Explained that DOC demoted him to medium after the infraction because the infraction affected his custody points. Explained that he should reach out to medical to provide him with new hearing aids. He may follow up with us if there are issues accessing them.	No Violation of Policy
97.	Complainant says he took outgoing legal mail to be processed to a CO. The CO took the mail to the sergeant's office to be inspected because it contained photographs. This is violating policy by not inspecting the legal mail outside of his presence. The CO claims complainant gave him permission to take the mail, however, complainant says he did not give the staff member permission to do that. Complainant says he would not give DOC permission to violate its own policy. The CO then wrote up complainant for threatening him when he grieved the issue.	Regarding the staff handling of legal mail, that appears to have been adequately investigated and addressed through the grievance procedure. Regarding the infraction, OCO reviewed all relevant infraction paperwork. In addition, upon sending its concern regarding quality of evidence to SCCC, SCCC staff additionally reviewed phone calls made around the time of the infraction in which the complainant allegedly made similar statements to those in the infraction. Regarding the retaliation claim, unfortunately, the complainant did not grieve it, so it was not documented and investigated by DOC. At this point, unclear what evidence exists for OCO to	Unable to Substantiate

		investigate to substantiate the retaliation. The grievance occurred in October and the infraction in December; no clear nexus between the two.	
98.	Person was on a video visit with a friend. He still had 19 minutes left when a CO told him to get off. The individual asked why; CO told him get off now or "I'll make you." Situation escalated and the CO pepper sprayed him. Other COs came and used force to take him down. They put their knees on his neck. Person is currently in IMU. This was video recorded by the person that was on the call. Video visitor states he has a copy of the video.	We released a full public report with findings and recommendations.	Assistance Provided
99.	Complainant's Washington One is inaccurate and falsely states that he has had a domestic violence charge with his ex and one with his daughter. Neither is true and it's impeding his ability to access work release/GRE.	We were able to substantiate the concern. The Washington One is being updated. From our understanding the inconsistencies will be updated but IT is working to address that issue and it may take some time as it's a data fix on a closed case. The reassessment will be completed when that has occurred.	Assistance Provided
100.	Complainant says DOC mailroom staff are opening legal mail. Incarcerated individuals are supposed to do e-files, but for two weeks the machine has been down, so they are being forced to hand their legal documents to DOC staff for filing. Grievances about the issues are not being followed up in timely manner. Recently DOC rejected mail to/from the attorney general, which is clearly listed as legal mail in policy. This has happened with court filings too.	We reviewed documentation and reached out to the mailroom and facility personnel about the E-filing machine being down. Regarding the E-Filing Machine: the equipment is leased and serviced by an outside business that cannot come due to the outbreak. DOC is offering an alternate way to file. Regarding the rejections: OCO could not identify specific rejections with the information we received.	DOC Resolved
<b>Washington Corrections Center</b>			
101.	Complainant says that he should only be subject to a 10% deduction rate on his incoming funds due to his LWOP sentence.	After making outreach to DOC we were informed that 10% total deductions are not correct for those with LWOP sentences, because such individuals are exempted from holding savings accounts. Enclosed the Deduction Matrix from DOC Policy 200.000 Trust Accounts for Incarcerated Individuals, money coming in from the county is posted as an "Other deposit – not listed above." In the notes section on the back it states that incarcerated individuals "sentenced to	No Violation of Policy

		LWOP or whose earliest possible release date is beyond life expectancy and have been approved on DOC 06-070 Mandatory Savings Account Exemption are exempt from the savings deduction.” Confirmed that, up until the date of this letter, all deductions are correct.	
102.	Complainant says that his unit has been in quarantine so he is only allowed out of the cell twice a week for a 20 minute phone call. He also says that some two-men cells contain three men, but some cells are empty. Says that he is spending more time in his cell than others in segregation are.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided
103.	Allegation that COs told him to kill himself. Alleges they will not give him grievance forms.	Review of use of force documents and video show it appears to be within policy. Could not substantiate staff told complainant to kill himself. Addressed grievance for issue with Superintendent who took care of it the same day. Complainant has since been released from custody.	Unable to Substantiate
104.	Complainant is part of a group being infracted for cell refusal. He tried going to his hearing and they would not produce the video and in the report it said "they" without identifying specific individuals.	Infraction dismissed as part of a concerted effort on the part of OCO to reinforce efforts by incarcerated individuals who did not participate in the alleged mass refusal to move.	Assistance Provided
105.	Complainant was stripped and put in a restraint chair. This happened because he threatened self-harm. He did that because he hadn't been and still is not receiving mental health treatment and the mental health provider had refused to see him until he was out of IMU, making mental health medication unavailable. He's now in the COA but still not receiving mental health care or medications.	Provided complainant with information on our systemic work on restraints and discussed their use for self-harm and the time allowed for chair placement. Elevated the issue of the time in restraints to DOC. It was verified when the case came in that DOC was providing mental health services and treatment. This was verified by the complainant.	DOC Resolved
106.	Complainant says that he and others have been sleeping on the ground even though there are other cells with empty beds. He has spoken to a lieutenant who said it is above him, but he would try to work on it.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided
107.	Caller says that he was given a BOE for a large group situation that he wasn't part of. He wants it removed because his cellie who was actually infracted had his infraction dismissed.	Reach out to DOC revealed that the only negative BOE in the individual's electronic file was not for participating in a multi-man fight, but for an event	No Violation of Policy



		which occurred at midnight for arguing with staff. There was no statutory, rule, or policy violation in issuing the BOE. DOC is acting within the guidelines and the individual was provided an opportunity to appeal the BOE which was ultimately upheld.	
108.	Complainant says that he is not able to have rec time or have phone privileges. He says that he gets to make a phone call once every three days. Says that the people who they are calling do not pick up the first time, they get in trouble. This trouble then led him to be sent to the "hole."	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted the concern to the Assistant Ombuds for that facility.	Information Provided
109.	Complainant says that he and others have all tested negative for Covid multiple times but are surrounded by those who have tested positive. He says that this is a disregard to his health and safety. Believes DOC wants all of them to get infected to increase their statistics so they can get emergency funding. Also says that there are people sleeping on the floor with three men to a two-man cell.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted the concern to the Assistant Ombuds for that facility.	Information Provided
110.	Complainant says that infracted behavior did not happen. He didn't threaten to beat the officer and didn't say that he has 12 years left because he doesn't.	This is essentially a he-said/she-said situation. The US Supreme Court has set a very low standard of evidence for prison infractions - "some evidence," which would include the officer's statement. To convince DOC to overturn this would require incontrovertible evidence that he didn't say it, which does not exist to our knowledge.	Unable to Substantiate
111.	Complainant says that for almost 40 days he has been forced to sleep on the floor in a two-man cell that is holding three people. He says that he is not able to socially distance himself from others and he does not have access to cleaning supplies. Says that his back and neck are being affected by having to sleep on the concrete floor, and there are empty beds open, but he is not being moved to one.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted the concern to the Assistant Ombuds for that facility.	Information Provided
112.	Complainant is experiencing consistent, repeated, and intentional misgendering by staff. Sexual harassment standard outlined in DOC's PREA definitions. This has been going on for months.	Examined all available documentation on complaints regarding this issue involving this complainant while at this facility. While repeated misgendering is a violation of DOC policy, OCO is unable to prove the misgendering occurred in this case. However, OCO	Unable to Substantiate

		does not doubt that this does happen in DOC facilities. In this case, as with all cases OCO receives regarding repeated misgendering, we reached out to the facility leadership to alert them of the problem and asked that they remind staff of the policies surrounding this issue and the expectations regarding the proper use of preferred pronouns.	
113.	Caller states that he was assaulted after he reached out to DOC staff multiple times to be moved because he was made aware that he was going to be assaulted.	We were able to substantiate that complainant was assaulted then moved for his safety. Based on the circumstances of the assault, a keep separate was entered with those responsible, and we were notified by DOC that any future placement will be reviewed to determine the safest options. We also reached out for copies of the kites; however, it was reported that only one kite —submitted after the assault occurred —was sent seeking DOC to publicly disclose video footage of the incident. DOC assured that his personal safety will be a determining factor in future facility placement. Unable to substantiate prior notice to DOC about the incident via the kite correspondence system. Provided information re: the tort claim system in the event complainant wishes to file a tort.	Information Provided
114.	Complainant was exposed to Covid in his facility and he has Crohns disease, which makes him very high risk. He tested positive for Covid and fell unconscious due to the combination of his illnesses. He would like to moved into a safer facility or be released on medical emergency. Provided updated complaint form regarding Covid treatment and symptoms and requested to be moved to the Covid isolation unit.	Patient was moved to Covid isolation unit which resolved his concern.	DOC Resolved
115.	Complainant says that he is IMS level 1 and has been in IMU for almost 2 years. Says that he is going to stay in IMU until his ERD. He wants a single man cell and that he is really starting to go through it with nothing to do for his last eight months.	Complainant was released on Rapid Reentry (RRE) program and is now being held at the county jail in his county of origin.	Lack Jurisdiction
116.	Patient was taken off of medication that helped ease side effects of HIV medication. DOC wrote it for 10 pills a month when he's been taking it daily for five years. They changed it	One medication renewed. DOC medical staff states that other requested medications are not indicated because there is no evidence of idiopathic	DOC Resolved

	<p>when he left MCC to WCC. DOC also discontinued allergy medications and epinephrine pen, although he has had idiopathic anaphylaxis.</p>	<p>anaphylaxis. DOC medical staff states that hives are related to anxiety; complainant is currently under the care of mental health providers for this.</p>	
117.	<p>Complainant says that he caught Covid and during the 10-14-day quarantine, no staff members gave him any Covid test. He also says that after he was moved out of isolation, he still did not receive a Covid test. Says that DOC is not complying with social distancing standards and is forcing three people into two-man cells. DOC is also not sanitizing the facilities used by individuals with Covid.</p>	<p>Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.</p>	Information Provided
118.	<p>Complainant was incarcerated as a juvenile and resentenced in December. There is a 20-year mandatory minimum for the crime of conviction, but the judge sentenced him to 180 months, which is below. DOC only gave him credit for 17 years of time served.</p>	<p>Followed up with DOC Records Unit. DOC is currently asking for clarification from the courts regarding his sentence since the judge did not sentence him to the mandatory minimum. After he is resentenced, DOC will conduct a final time calculation. If he has any concerns, he should kite the records staff at his local facility as they will have the most up to date information.</p>	Information Provided
119.	<p>Caller states that he wasn't served his hearing papers in time, violating the hearing timeframes outlined in WAC 137-56-180. He also reported that his ERD is incorrect and that he should be getting out later this week, not in April.</p>	<p>Communicated with DOC staff multiple times who reviewed his case. He had previously been sent the wrong sentence calculator; we were provided the right calculator, which we sent to him. Cannot find that DOC has miscalculated his current sentence.</p>	Unable to Substantiate
120.	<p>Complainant says that he and others are being treated inhumanely and like animals. He says WCC is forcing men to sleep on the floor with three men in a two-man cell. When these men ask to be moved off the floor, DOC tells them no.</p>	<p>Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.</p>	Information Provided
121.	<p>Complainant says that he has been locked in a cell for nearly a month. During this time he has been treated like an animal. He says that he has been exposed to Covid multiple times by COs and infection control. Complainant says that people who test positive for Covid keep getting moved around to be near those who test negative for Covid. Says that he feels as if he has been sentenced to death.</p>	<p>Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.</p>	

122.	Patient says that prior to being taken into custody he was taking medicine to treat severe muscle spasms and nerve damage to his foot and leg (Gabapentin and Methocarbamol). He says that he has had a total of 19 surgeries. Reports that he is not being given his medication or equipment needed for his feet (type 3 insoles or arch support shoes, compression socks).	Methocarbamol was reconsidered at a recent CRC and approved; patient now has the medication. Patient also has an appointment pending with an outside provider for special insoles. With regards to Gabapentin, this medication needs to be authorized by CRC; patient instructed to speak with provider about having case presented at CRC for this medication, or to discuss other appropriate alternatives.	Assistance Provided
123.	Complainant was supposed to have 85 days of good conduct time restored. Believes that this restoration would make him less than six months to release, and therefore he cannot be awarded the full 85 days. His concern is that he will not have time to make it to work release which he feels is an important step for him.	It was confirmed that this issue has now been resolved and 85 days good conduct time has been restored.	DOC Resolved
124.	Complainant says that he is stuck in solitary confinement (due to Covid lockdown) with only phone calls for five minutes every three days and showers every other day for five minutes. He says that being locked away like this is worse than being in the hole. Says that this situation is degrading, inhumane, unfair, traumatizing, and mental/emotional abuse.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided
125.	Complainant says that he has been stuck in a cell for 384 hours, had only four showers, had access to cleaning supplies twice, and got 45 minutes in total of phone time. He was then moved to a different cell and now has to sleep on the floor and has been in cells with those who have tested positive for Covid.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided
126.	Complainant says that a staff member who was exposed to individuals with Covid was sent home to quarantine, but came back to work three days later, even though people are supposed to follow a 14-day quarantine. DOC is not providing cleaning supplies and he only gets five minutes on the phone every few days. He also says that they are only allowed to shower three times a week for 5-7 minutes. Says that medical access has been poor and those with medical emergencies are not being treated.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided

127.	<p>Complainant says their cellmate got suboxone and offered some to complainant, which he refused. His cellmate then gave him suboxone in a cup without the complainant's knowledge because he thought it would be funny.</p> <p>Complainant got a UA that popped for suboxone and he sent a kite on the same day to I&amp;I. They were served a continuance paper in December and for a hearing the next day. The hearing officer didn't try to hear him out.</p>	<p>Unfortunately, there does not seem to be an evidentiary issue as his UA was positive for suboxone and he admits to taking suboxone, although he says his cellmate gave it to him without his knowledge.</p> <p>Even if the cellmate submitted a statement saying that they gave it to him without his knowledge, unclear that this would prove that this actually happened. DOC does have cause to infract the complainant.</p>	No Violation of Policy
128.	<p>Complainant says he complained about stomach cramps and pains but was told that the pain was a result of constipation. He was provided stool softeners and laxatives which were ineffective. He declared medical emergencies and was given antibiotics. When those did not work, he was not taken to see an outside provider even though a nurse said he needed to go to an ER. After six weeks he was taken to a hospital after declaring another medical emergency. He was then diagnosed with colon cancer, stage 2 and now has to wear a colostomy bag.</p>	<p>Case was included in the OCO investigation into delays in diagnosis and management of cancer within DOC. Copy of report sent to complainant.</p>	Substantiated
<b>Washington Corrections Center for Women</b>			
129.	<p>Complainant was transported to Yakima. She passed out on the way. They took her to the hospital, but she has not been fully examined.</p>	<p>She was seen at the hospital when this incident took place. She was then transferred back to WCCW and seen by medical.</p>	Unable to Substantiate
130.	<p>Complainant has two injured ankles and uses a wheelchair. They will not give her an ADA room and her wheelchair will not fit in the cell. She refused to crawl on the ground to her bunk and was given five infractions. She had been forced to crawl to her bed for weeks.</p>	<p>Alerted DOC. She was seen by medical and issued HSRs. She was then moved to a different cell and her infractions were dismissed.</p>	Assistance Provided
131.	<p>Complaint received while conducting a site visit at WCCW. Report related to Therapeutic Community (TC) homework that had been assigned to at least two individuals in the TC program. Assignment had highly inappropriate and potentially traumatizing content from a very questionable source.</p>	<p>DOC did address the staff member and has changed the process of assigning reading materials. The staff member was not aware of the content.</p>	DOC Resolved
132.	<p>Caller was placed in segregation pending an infraction, but the infraction has not been served. She's not sure why she's still</p>	<p>She was issued an infraction and will move back to general population.</p>	DOC Resolved

	being held, and staff are not giving her much information about her situation.		
133.	Complainant says that she has been targeted on several occasions by a CO. She says the CO waits for her to do something wrong so she can be written up. The CO previously wrote her up on an infraction that was later dismissed due to a miscommunication.	OCO could not substantiate harassment. She did receive infractions that were based on the "some evidence" standard that is used by DOC.	Unable to Substantiate
134.	Complainant says that visits with her husband have been denied because of their past. She says that her past crimes have nothing to do with her husband and that they have been married for 14 years. Not having visits is putting a strain on their marriage.	Per policy 450.300 visitors with past adjudicated offenses are ineligible. There is a history of domestic violence.	No Violation of Policy
135.	Complainant was not given male staff to take a UA and was infraacted for refusing. He was not offered a mouth swab per policy.	DOC violated policy 490.700, which states that a mouth swab will be conducted if staff are unable to accommodate the identified gender preferences. This individual did have a preference sheet for male staff on file. The infractions will be dismissed. Memo sent to WCCW outlining policy and procedure.	Assistance Provided
136.	Complainant graduated from TC last year. She was released for eight months on DOSA charge. When she did not complete IOP, she was revoked. She questioned being put back in TC in prison, so DOC wrote her a 557. They found her guilty and told her she could be demoted or put back in TC. She chose TC and then told her to appeal since she is active in TC currently and she's not asking to leave. The infraction was upheld. She wants this infraction removed as it impedes her option for Work Release and GRE. This directly impacts successful reentry.	She did choose to enter the TC program and she is progressing. DOC will overturn this infraction.	Assistance Provided
137.	Complaint regarding delayed cancer screening. Patient had lung x-rays several months ago, images read by radiologists, and needed more imaging because of concerns with nodules on lungs (potentially cancer). She has not been seen since for further imaging. She sent a kite and grievance and hasn't heard back.	No evidence for malignancy on x-rays; however, DOC agreed to schedule low-dose CT scan for screening purposes due to history of smoking.	DOC Resolved
138.	Patient says that she needs a sacral neuromodulator surgery due to frequent herpes and bladder infections, as this was	Unable to override CRC decision; only individual with power to override CRC decision is DOC's chief medical	No Violation of Policy

previously discussed with a doctor. She also needs a catheter and this surgery would help connect her brain systems to her body systems.

officer. Also unable to impact DOC approval of request for extraordinary medical placement (EMP). Encouraged patient to reach out to DOC CMO to explain medical needs and request override of CRC decision.

### Washington State Penitentiary

139.	Complainant says WSP East complex is not ADA compliant. Doorways are too narrow, shower is difficult to enter and exit, walkways are in disrepair causing him to fall several times while trying to navigate with his walker and wheelchair.	Raised accessibility concerns with DOC HQ and facility administration. Substantiated complainant's concerns regarding aging infrastructure of WSP East complex. DOC ultimately transferred complainant to another complex in preparation for upcoming release.	Substantiated
140.	Complainant has terminal cancer. Wants his pain medication increased and wants to be released on EMP.	Communicated with HQ regarding the patient's need for increased pain medication due to terminal cancer. Complainant reported that his provider was changed and his pain management successfully increased. Regarding EMP, he is not eligible per RCW 9.94A.728, which states that individuals serving LWOP are not eligible.	Assistance Provided
141.	Complainant states, "I continue to receive grievance responses that say I am somatic..." Reports receiving no help. Says that DOC says he is "making up" his pain. He says he is not interested in receiving drugs or benefits, he just wants help.	Neurologist consultation submitted and approved.	DOC Resolved
142.	Another incarcerated individual alleges that an incarcerated patient in E Tier engaged in self-harm and the officers were aware that this self-harming was happening and did not correctly respond.	Spoke with both complainant and subject individual about concerns. Reviewed multiple incident reports; reviewed uses of force packets; reviewed all available videos of incidents and uses of force, toured HSB E-Tier; and interviewed WSP Health Services Staff and E-Tier Custody Staff about policies and procedures related to self-harm, emergency restraint chair and bed, and mental health care. Based on review of incidents found that staff did respond to pattern of self-harm and did provide on-going care. May be reflected in systemic mental health report or emergency restraint report. Provided self-advocacy information.	Unable to Substantiate

143.	Complainant states that he had deductions made to his \$1200 CARES Act stimulus check. Reports that the grievance office gives them generic answers to their grievances about it.	Explained the deductions from DOC.	Information Provided
144.	Complainant says that he filed a grievance about the lack of civil procedure books in the law library. He says it was deemed non-grievable and he appealed it. Says that his grievance is being blocked and they are making excuses as to why it is blocked.	Explained that it's my understanding that during the outbreak at WSP, law libraries were closed. However, staff tried to provide as much legal access as possible. Now they are fully operational. State libraries are still closed.	Information Provided
145.	Complainant is in pain and is not getting the proper medical care for foot injury. Person was getting around by walker, transferred and was going to need a wheelchair. His left foot has sharp pain. He doesn't feel that his injury was properly treated.	Complainant had appointment with outside specialist; DOC Resolved CT scan recommended.	
146.	Complainant says a pill line nurse for Echo Unit came to administer his morning dose of suboxone, but she did not follow protocol for administering by doing a mouth check before or during administration to check for any irregularities in his mouth (the roof of complainant's mouth is abnormal). After he felt like the medication had dissolved the nurse accused him of having medication remaining. The roof of his mouth being abnormal has caused similar issues with three other nurses. He reported this to his prescribing physician and has had nurses steal his medication, which he also reported. The nurse had his physician taper off his medication, which also caused other problems. Requested to be placed back on Suboxone or alternative medication.	Person was released from prison, issue no longer ongoing. OCO could not impact change related to suboxone prescription prior to release because there was no violation of policy. Patient was found diverting pills and given multiple opportunities for correction, but was ultimately discontinued from the suboxone program. DOC stated that he would be scheduled with the suboxone program coordinator prior to release and with a suboxone clinic within 48-72 hours of his release.	No Violation of Policy
147.	Complainant says he has been trying to get his education documented in his DOC records to show that he has been programming and doing something with his time. He has grieved this matter to no avail. His counselor will not meet with him so he can show her his certificate of schooling. His educational records need to be entered into Washington One system, OMNI system, and the programming tab. In his second letter he says his disciplinary records on DOC's OMNI system are incorrect, the violation code does not correctly show the infraction data indicator on certain infractions as general, the system has listed them as serious.	After OCO outreach, DOC staff met with this person and updated his programming in the DOC system.	Assistance Provided



148.	Requesting all of the available educational programming while he's housed in the hospital at WSP.	Explained that, as we understand it, DOC is not set up to have regular programming in the hospital because ideally people are housed there short term, but when they are housed at the hospital long term, staff will work to provide them access to programming. Provided information about how to get access to education for a staff member.	Information Provided
149.	States that DOC staff at WSP are using the WAC 714 infraction incorrectly and are not willing to provide folks with a 30-day notice of the changes to the WAC 714.	Appears that Union Supply is using old language from the WAC 714. WAC 714 has not been changed; I provided the current definition of that WAC and how it can be applied.	Information Provided
150.	Complainant says that he tested positive for Covid and was sent to the IMU. He says that over 100 men were moved to the gym and COs did not want to monitor the bathrooms so they shut them down. He says that they have been on lockdown after the 14 day quarantine period.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines and uplifted concern to the Assistant Ombuds for that facility.	Information Provided
151.	Complainant says that he was forced to send out a dental graph gear mechanical pencil because he was told he would not receive his property until he did so. He said that a 90-day disposition was forced on him.	Was asked to send out the mechanical pencil so that he could be allowed the other art supplies he ordered.	No Violation of Policy
152.	Complainant says that WSP is not providing him with cleaning supplies for his cell. He also says that COs who have tested positive are continuing to work within the unit and are not wearing their face masks. Expressed concern that they are not provided with time outside of their cells.	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19 guidelines.	Information Provided
153.	Complainant has not received the money from the stimulus payment. Believes that DOC is purposefully delaying so he cannot hire a lawyer to file a PRP.	Provided information to reach out to the IRS, as the facility has no records of his stimulus check coming into the facility. Cannot substantiate that DOC staff tampered with the mail.	Unable to Substantiate
154.	Complainant needs a religious diet (Jewish/kosher) – Chaplain is refusing to do it. Put a request in October (as required) and he kited. Staff haven't replied, they haven't done anything. When he first came in, he had Covid, so they didn't do the intake properly and it wasn't put on his OMNI.	After OCO reach out, DOC changed his diet to the correct diet.	Assistance Provided
155.	Complainant says that he is currently being housed in the prison's hospital. He says that due to Covid he has been	Informed complainant that OCO continues to monitor DOC's response to CDC-recommended Covid-19	Information Provided

	receiving meals via styrofoam containers, which means the meals are cold and inedible. Says that he has not eaten much since and has been feeling weak, shaky, and dizzy.	guidelines and uplifted concern to the Assistant Ombuds for that facility.	
156.	Filed grievance in September or beginning of October but never heard back. Sent out some stuff through hobby crafts/curio while he was at WSP and he has receipts for the stuff that he was charged for, but all three envelopes were empty when they arrived to their destination and they charged him \$3 for the envelopes. Beading projects were inside. The envelopes had holes like someone had taken out the bead projects from them. Believes mailroom staff stole the items.	Could not find evidence to support that the beadwork was taken from the WSP mailroom.	Unable to Substantiate
157.	Complainant says illegal deductions were taken from the Federal Cares Act Stimulus Check and grievance staff are not following policy as per the program manual.	Provided in depth information about DOC deductions from the CARES Act.	Information Provided
158.	Reports that DOC will not allow him, as the founder and leader of his religion, to cover his head with a white cloth. It is part of "the three requirements" in his religion. Wants to be able to practice but DOC says he needs an outside religious sponsor.	DOC is following policy 560.200 Religious Programs. An incarcerated person cannot be the faith sponsor of his own religion.	No Violation of Policy
159.	Complainant previously infringed for sending out artwork to a third-party vendor who posted them for sale. Unfortunately, the infraction likely met the "some evidence" standard so it was not overturned. His present concern is that his typewriter and artwork (valued altogether at \$300) has been confiscated and DOC says it will be destroyed.	The property was confiscated related to the infraction. Complainant was attempting to send out the typewriter and artwork to a third party (infracted because DOC believes he knew the third party would sell it). Per DOC Policy 420.375, DOC has the ability to confiscate and dispose of contraband.	No Violation of Policy
160.	Complainant is concerned that the ID badges that staff are required to wear that are supposed to be for identification purposes (DOC policy 400.025) have print that is too small and too hard to read. This makes it impossible to identify staff while staying six feet away. He has seen staff hide their IDs. When they have asked staff for their name, staff give a false name or say "keep moving or get an infraction".	Explained what I could about the rights incarcerated people have regarding accessing DOC staff names. The font on the machine that creates badges cannot be changed.	No Violation of Policy
161.	Complaint on behalf of person recently transferred to WSP from CRCC. DOC will dispose of his food that he had prior to transfer because he was in IMU for over 30 days, but he was	We were able to have DOC staff review the matter and confirm that the property items should be given back to him.	Assistance Provided

	there for that long due to Covid. Spoke to two DOC staff who just quoted policy; one of them was rude.		
162.	Complainant reports that he's in a close custody BAR unit not a medium custody BAR unit. He's classified as medium.	Explained that he is on the waiting list to be moved to the medium custody BAR units.	Information Provided
163.	Complainant is being housed in the hospital due to ongoing injuries/ailments. He cannot use the ELL computer to review legal matters in the hospital, so he cannot review what he needs until he's in general population.	Worked with DOC staff to get him as much legal access as possible while being housed in the hospital.	Assistance Provided
164.	Complainant says that he received a Blick art order but did not receive the items. The items are just sitting somewhere but he is not able to receive them.	Blick art order was sent back per this person's request.	No Violation of Policy
165.	Complainant has been in the hole for over two months. Mental health got him on medication when he requested it. They offered to have a psychiatrist speak with him and he agreed. DOC staff told him he would be seen after the 1st of the year. It has been more than a month since then and he still has not been seen. He's sent multiple kites. Filed a grievance the last week of January; hasn't heard back.	This person released shortly after contacting OCO.	Declined, Other