

# OFFICE OF THE CORRECTIONS OMBUDS

## Monthly Outcome Report: September 2020

The Office of the Corrections Ombuds (OCO) initiates and attempts to resolve investigations 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 so as not to create confusion.

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 Information Provided</b>	Insufficient evidence exists to support the complainant's allegation.
<b>Substantiated</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

## September 2020

Allegation/Complaint/Concern	Outcome Summary	Closure Status
<b>Airway Heights Corrections Center</b>		
Complainant fears that he will contract COVID-19 at AHCC. He wants to be transferred. He asked if we can write him with an answer.	Provided tips and resources to be reviewed for transfer. Due to no policy violation OCO cannot assist in a person's transfer.	Information Provided
Closed case review: Complainant is being held beyond his ERD that was confirmed at facility FMRT hearings in 2019. He was packed out and had family waiting at the gate. At the last minute he was denied his ERD. The facility recalculated his ERD and added 9 months to his sentence. He believes that the recalculation was outrageous and deliberate.	Reviewed all case documents and actions taken; original case review findings substantiated.	No Violation of Policy
MH/ADA transportation accommodation needs are not being met. Complainant wants HSR/ASR for specific transportation because of mental health condition. Feels he is unable to undergo necessary outside medical procedures until this happens.	Alerted DOC to mental health denial of HSR/psychiatric ASR. DOC indicated that they do not have current record of disability and thus he would not qualify for an HSR/ASR.	No Violation of Policy
Complainant lost critical KOP medications during transfer and was without them for several days. Worried that he is at risk of developing severe infection if he does not receive meds soon.	Reviewed case with DOC HQ. Confirmed that KOP medications were lost during transfer; facility unable to determine what happened to the medications. However, replacement medications were provided to the complainant.	Substantiated
Complainant reports that AHCC has only supplied one mask over the past two months.	Explained how to access masks and that it's OCO's understanding that they receive replacement masks every other Tuesday. Recommended that he grieve the issue and follow up if still not resolved.	Information Provided
He is in K-unit, which is supposed to house incarcerated individuals who are elderly and infirm. K-unit is being denied yard while other units are allowed to get yard. He feels that this is unfair and discriminating.	Thanked him for reaching out to our office and explained that we are monitoring DOC's adherence to CDC safety protocols to reduce the spread of COVID-19 in correctional settings.	Substantiated
Caller states that DOC staff are lying about him in his Behavior Observation Entries (BOE'S). He also is concerned that he cannot include a letter when sending out finished hobby products.	Asked that he follow up with us after appealing the BOE's to the CPM. Explained why DOC won't allow a letter with their hobby supplies when sent out.	Information Provided
Allegation of excessive use of force by DOC for not wearing mandatory face covering.	Reviewed all evidence and spoke with Supt. Communicated to	Assistance Provided

	complainant that Supt. appropriately handled staff action following mission and values of DOC and that infractions were appropriately reduced.	
PREA allegation that sergeant told complainant that he would be infraacted unless he engaged in sexual acts with the sergeant.	Reviewed PREA packet and found that DOC followed policy when determining that the allegation was unsubstantiated.	Unable to Substantiate
Complainant found guilty of serious infraction violation (providing false or misleading information during any stage of an investigation of sexual misconduct) after he filed a PREA report that DOC determined to be unsubstantiated.	Reviewed PREA and hearing packets and video evidence. Complaint does not match video evidence. DOC acted within policy when an unsubstantiated PREA claim made.	No Violation of Policy
Closed case review: Shower doors in MI3 Units at AHCC are not tall enough to provide an appropriate level of privacy for transgender women.	Reviewed original case work. Then communicated with PREA Coordinator and Facility Manager about increasing shower door height. DOC suggests that a modification plan is being created.	Assistance Provided
Complainant is an older adult and thinks he has COVID-19. He was in the hospital for a week and then sent back to camp. They handed out masks yesterday. The same day, he was called to the sergeant's office and told to throw out the mask. Says DOC is not doing testing.	Suggested that he request an appointment with FMD to discuss.	Information Provided

### Clallam Bay Corrections Center

Letter states that complainant was unjustly demoted to MAX custody due to placement options. Also relays information about the racial injustices happening at CBCC. He states that Black incarcerated individuals are targeted there and get in the most trouble even though they are vastly outnumbered.	Reviewed classification, MAX custody placement decision was overturned, he will remain closed custody. Explained we are attempting systemic review of racial discrimination.	DOC Resolved
Complainant was assaulted by cellmate. The caller is an older adult and was hit in the head multiple times.	DOC followed procedure to keep the person that was assaulted safe and he did receive medical attention. Provided him with resources to press charges if he so chooses.	Information Provided
Complainant has a rash that has been spreading. Received medication for rash on face which has helped but the rash on his body has been spreading. He feels it may be ringworm and he is now being quarantined. Gave permission for us to look into this.	Patient stated complaint can be withdrawn; issue resolved. Treatment provided and symptoms improving.	DOC Resolved
Caller has been in MAX custody for 36 months. He has medium points, and during his Multi-Disciplinary meetings all facility staff recommend GP placement but was then denied that at the HQ level. HQ stated that they will keep him in IMU pending appropriate closed custody housing. There are 2 closed custody units and he doesn't have separatees at either.	Unfortunately, DOC believes that it cannot safely place him in GP. OCO cannot overturn that decision. Will include in potential future report re long-term segregation.	No Violation of Policy

Wants to be out of IMU and placed in a closed or medium unit.		
Concern about IMU placement. Caller was told that he was placed in IMU due to an involuntary safe harbor. DOC stated that IIU received information stating that he was unsafe. Caller contacted IIU to learn details; IIU told him that they're not sure why he's in IMU and they do not know of any investigation or reason for his placement there.	Person transferred out of IMU. DOC felt it was necessary for his safety to house in IMU prior to transfer. Will consider for inclusion in future report.	DOC Resolved
Closed case review: Mail was rejected for being 3rd party correspondence. Sender was from another country – possibly a book order that came from vendor to Amazon to complainant. Mail staff consider this 3rd party correspondence. He appealed the rejection. Response was delayed but DOC eventually told him it had been upheld. He appealed to next level and was told it was past the 10 days. Unclear if it was 10 days from rejection or appeal decision. The appeal reviews have not been looked at yet and are now out of the 10 day timeframe.	Reviewed all case documents and actions taken; original case review findings substantiated.	Information Provided

**Coyote Ridge Corrections Center**

DOC is restricting his access to attorney calls. Legal access issues.	No grievance on this issue. Elevated to AO review as she is monitoring CRCC and their response to the COVID-19 outbreak. Asked that he follow up after grieving.	Lack Jurisdiction
No access to laundry bags. Wants laundry bags, preferably made out of better material. Says he has filed two grievances and kited the assistant superintendent who said the issue was resolved, but it has not been resolved.	Appears that the matter is being resolved. CI sent them bags that melt in the dryer. CRCC staff figured out a laundry bag that will work better and is distributing them as they get them.	Assistance Provided
Complainant had all points for MI3 dropped and demoted to Close Custody.	Appears that DOC demoted his custody per policy due to 3 serious infractions he received.	No Violation of Policy
Sent check for license and never got a receipt.	Issue was resolved. Funds were sent back and put on this person's books. Asked he follow up if this is inaccurate.	DOC Resolved
Complainant was supposed to have a classification meeting in February. It was pushed back to June and still has not happened. Also wants to get in touch with a family member but doesn't know if their number still works.	Issue resolved. This person had their classification hearing a few days after calling us. Provided recommendations regarding how to contact their family member.	Information Provided
Closed case review: Legal books being taken off the cart that were donated by previous incarcerated individual.	Reviewed all case documents and actions taken; original case review findings substantiated.	No Violation of Policy

Complainant is experiencing discrimination for being transgender and having committed a sex offense. She and others are told they are not allowed to sit in certain parts of the dayroom and fear violent treatment if they do sit there. Repeatedly told by sergeant that she is displaying inappropriate sexual behaviors by braiding people's hair, etc.	Level 0 grievance was withdrawn. Reached out to see if this is still a concern and provided next steps.	Lack Jurisdiction
Complainant received inadequate medical care for his knee.	Surgeon's note indicates that treatment options were discussed; treatment selected based on intraoperative findings.	Assistance Provided
Complainant states that he was never reimbursed for commissary that he never received due to COVID-19. Would like to have his \$40 replaced.	Was not able to locate evidence that complainant had requested a refund yet. Explained how to start that process and requested follow up.	Lack Jurisdiction
Receiving meals with missing food, specifically fruit and hard boiled eggs. Not receiving enough food.	Explained the process for making sure one gets all of the food that is supposed to be on the tray. Staff are aware and are willing to replace any missing food from trays.	Assistance Provided
Complainant had an approved Release Plan and he was ready to release on his Earned Release Date. While awaiting ERD the house he was set to release to burned down. He applied for Housing Voucher program and found a place that would accept him. Plan was sent to the Community Corrections Officer for approval. The CCO has been completely unresponsive and complainant is now past his ERD.	Appears that a release plan is being prepared. Followed up with DOC staff to ensure it would be finalized soon. Limited options during COVID-19 for people with a level 3 sex offense registry.	Assistance Provided
Issue regarding a pending lawsuit with the Snohomish County Jail. Complainant had been forced to strip while handcuffed, in addition to having a tooth broken. He also reported excessive force and PREA-related concerns. Additionally, he asked for access to his legal mail and records.	Letter requests more information. Sent him OCO form and asked that he follow up with more details about the concern.	Information Provided
Concern that mail and Jpay messages from and to family keep being rejected because they are written in Turkish or Russian. Mail rejections say pending translation, but then are rejected without reason. Was told by the mailroom to grieve the issue. Cellmate helped write the grievance, then it was denied as a nongrievable issue.	Provided complainant with timelines for translation and self-advocacy steps. Encouraged them to utilize appeals process and reach back out if they are still having issues.	Information Provided
Complainant reported abdominal pain to medical staff for months. DOC arranged procedure which then had to be canceled due COVID-19. Complainant then filed a medical emergency. DOC brought him to hospital. Hospital staff identified need for and performed emergency surgery. Main concerns are medical neglect/misdiagnosis prior to surgery.	Reviewed records and discussed case with provider. Complainant has received appropriate treatment for his abdominal pain.	Information Provided
Complainant has received ongoing surgeries since being run over by a car in 2002. His titanium screws	Confirmed dental appointments for evaluation and follow up,	No Violation of Policy

and implants are coming out and loose. Also, DOC charged him \$4 for an appointment where they told him the same thing they told him via kite. The dental office encouraged him to apply for dental insurance, he is unable to apply. Also expressed concern about being convicted despite a lack of allowable evidence.	dental staff discussed Offender-Paid Healthcare options for procedures not included in the OHP. Conviction concerns are outside OCO jurisdiction.	
Complainant had COVID-19 and has mostly recovered but shares many concerns related to DOCs response as well as its impact on medical care. Has grieved two issues and was told they are not grievable: 1) Lock down that only allowed one shower a week and 2) staff conduct, not social distancing, not wearing masks, medical staff not changing gloves, staff coughing on inmates. Continues to have two skin problems associated with COVID, but has not been seen by medical.	Requested additional info regarding skin issue. Provided OCO report re: DOC response to COVID.	Information Provided
Closed case review: Caller concerned about loved one who had pat search that turned into excessive use of force. They choked him, put him to sleep, stuck their fingers down his throat.	Reviewed DOC documents. DOC staff were attempting to obtain contraband in his mouth and used force to extract it. He was seen by medical staff. Unable to substantiate he was made unconscious.	Unable to Substantiate

### Helen B. Ratcliff - King County

Complainant appealed infractions received while on work release. New hearing was held and she was found guilty of infractions she was previously found not guilty of at the original hearing. She immediately appealed the guilty findings of those infractions and when checking on the status of the appeal her unit counselor stated that OMNI doesn't show the appeals.	Appeal was processed. Three infractions were reversed and 13 days GCT was restored.	DOC Resolved
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### Larch Corrections Center

DOC not following COVID-19 protocols regarding phased reopening of correctional facilities around the state. In phase 1 and 2 the visit room remains closed, but drug treatment and T4C are running. Says that visitation isn't occurring but they haven't missed a single T4C or drug treatment class-- they have been continuing during all COVID-19.	General COVID response complaint. Addressed concerns with Superintendent.	Assistance Provided
Closed case review: Complainant's religious rights have been and are being violated. I am a practicing Muslim and constantly being given pork products to eat. I have tried to grieve the issue, however, been told it's not a grievable matter.	This incident isn't grievable as it relates to a third party. One-time event of a person receiving a pepperoni pizza while on a DNR work crew. Discussed issue with Superintendent to monitor for any ongoing/future incidents.	Assistance Provided

### Mission Creek Corrections Center for Women

Complainant was in pain and medical had not responded to her. She tried to make herself pass out by choking herself. A CO saw this and peppered	OCO opened an investigation, but needed more information from complainant for investigation. She	Unable to Substantiate
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sprayed her. While they were shackling her up for transfer, the COs made fun of her and made inappropriate references to her body parts. Another CO reminded staff that they were on camera, so they stopped. She filed a PREA case.

has not responded to OCO visit to the facility to meet with her and multiple letters.

## Monroe Correctional Complex

Closed case review: After taking a UA that came back negative, an officer poured it into another cup and tested it again. The second test came back negative and he received a 752 infraction. He filed an appeal 3 months ago which DOC has not responded to.

Reviewed all case documents and actions taken; original case review findings substantiated.

No Violation of Policy

The new bras that transgender women must wear at the men's facilities are tight compression bras. They are especially painful now that complainant is undergoing hormone therapy. She is being denied access to recreation time, programming, etc. because she won't wear the bra.

Unable to change the type of bra that is being offered but will raise concern with staff. Will address systemic concern in forthcoming transgender report.

No Violation of Policy

Transgender preference form and housing protocol delayed. She isn't receiving updates/info.

Confirmed transgender protocol is being followed. Provided update on DOC review of housing preference form and info for next steps.

Information Provided

Complainant is constantly receiving infractions because of behaviors associated with his mental health condition.

DOC admin agreed to remove infractions received during most recent mental health crisis. They declined, however, to remove infractions received because of behaviors related to MH decompensation.

Assistance Provided

Concern about several mailroom rejections that he appealed to HQ. Has not received a response for a couple of them. Concern also involves issue with mailroom staff.

Mail rejections were either overturned or DOC was within policy. Clarified information regarding how to utilize the grievance process for overall mail issues due to feedback from DOC.

Assistance Provided

He sent a grievance to medical about problems urinating. MCC sent it back for rewrite 3 times. The grievance states he has seen the provider for results of a bladder ultrasound but he states he is not being helped.

Confirmed that treatment being given. Grievance issues forwarded to Statewide Grievance Mgr.

Assistance Provided

Filed an emergency grievance against the nurse who was very angry and did not give him the correct pills in his cup.

DOC addressed medication error via MIR/CQIP. KOP meds not permitted in SOU per policy.

Information Provided

DOC is not following recommendations of the neurologist they sent him to see for his neck/back injury. He has been scheduled to see medical director 3 times, but each appointment has been cancelled.

Unable to overturn CRC decision. Recommended he see provider and have case presented to CRC; can then appeal if denied, or pursue through Offender-Paid Health Care policy.

Assistance Provided

Closed case review: Tore his ACL while playing basketball. Doctor said therapy is the next step. Complainant believes there should be additional

Conducted interview with complainant and performed preliminary review of records

Assistance Provided

<p>treatment or surgery and would like an MRI. Doctor refused brace; offered instead Tylenol, an ice pack, crutches and an ace bandage. Complainant is scared to walk due to pain.</p>	<p>provided by DOC. Initial handling of case was appropriate, and he is getting the treatment that he needs. His complaint that his MRI was delayed by 8 months due to CRC denials may be included in a future investigation regarding delayed care for orthopedic cases due to the use of DOC internal consultants and/or CRC decisions.</p>	
<p>Complainant finds it inflammatory for COs to wear Trump 2020 masks on the job in the facility. RCW 72.01 forbids staff from political campaign speech while on the job or government property.</p>	<p>The CO stopped wearing the mask.</p>	<p>Assistance Provided</p>
<p>Mailroom does not provide notice for mail rejection appeal decisions. Mailroom will also not provide notification of JPay request rejection, which is a violation of policy. Grievance coordinator is blocking this grievance as part of a pattern of forcing burdensome rewrites and even forcing the removal of factual evidence. Mailroom should be required to give notice when operations have not allowed for the delivery of mail as well as decisions regarding mail.</p>	<p>Superintendent re-instructed mailroom and mail was re-sent</p>	<p>Assistance provided</p>
<p>Complainant has cancer. Reports that DOC did not tell him this diagnosis and he only found out because he asked for his CT scan.</p>	<p>Will be included in systemic investigation of delayed cancer diagnosis.</p>	<p>Substantiated</p>
<p>Radiation from xrays has caused damage to complainant's thyroid gland. Mentions broken bone in hand and other medical concerns.</p>	<p>Unable to identify any grievances on file. Requested phone call with complainant but he declined. Followed up with next steps via letter.</p>	<p>Information Provided</p>
<p>Complainant has ongoing health needs due to allergies and HIV and often has to declare medical emergencies to see medical providers. Each time he is charged a co-pay. These are chronic, ongoing medical issues, so he should not be charged every time he needs to receive ongoing care. Also, his allergy is documented in his HSRs, but he is often given strawberry jelly in his breakfast boat.</p>	<p>DOC agreed to reimburse co-pays for eight visits. Fixed specialized diet concern via OMNI updates and communication with kitchen through Dietary Services Manager.</p>	<p>Closed - Assistance Provided</p>
<p>Ongoing severe bacterial infection for two months caused by a lodged cotton swab from a COVID-19 test. He says this is resulting in gastrointestinal and kidney failure symptoms. He has been in and out of DOC and external hospitals over the past several months.</p>	<p>Medical records including ENT specialist could not find any sign of swab leftover from COVID test. No record of bacterial infection. No record of gastrointestinal or kidney failure.</p>	<p>Unable to Substantiate</p>
<p>Complainant states that he kited medical about getting sandals or croc type footwear to alleviate the pain in his feet caused by spine and hip problems. Medical denied him footwear stating, per OHP, medical provider does not provide medical sandals or crocs. Indicated complainant may purchase sandals from commissary or catalog.</p>	<p>OCO cannot overturn CRC decisions. Medical sandals and crocs are not included in the OHP.</p>	<p>No Violation of Policy</p>



<p>This concern was received by OCO staff at cell front during visit: Complainant said he warned staff that he wanted to commit suicide and says staff didn't respond in an appropriate matter. He did attempt suicide and sustained injuries. His grievance was investigated but no proof of video reviewed. Facility didn't upload all the pertinent documentation and delayed his appeal. It was later rejected.</p>	<p>Reviewed all available documents, spoke with complainant as well as DOC staff members. Unable to substantiate this concern due to lack of evidence (video or otherwise).</p>	<p>Unable to Substantiate</p>
<p>Family member contacted OCO regarding incarcerated individual's loss of good time. Family believes restoration pathways have not been honored in the past and current pathway would restore too few days for a fight that occurred more than 20 years ago. Believes that 300.380 has not been followed and a proper restoration pathway plan has never been created.</p>	<p>After multiple contacts with CCs and HQ, DOC agreed to restore 190 days good conduct time.</p>	<p>Assistance Provided</p>
<p>Closed case review: Complainant would like to resume same medication regimen he had at the Veterans Administration but DOC will not agree to that. Complainant believes this is discrimination.</p>	<p>DOC is following the OHP and policies. I/I received pain medication by the VA that is not allowed by DOC.</p>	<p>No Violation of Policy</p>
<p>When complainant arrived at facility he was placed in mental health area and was forced him to take medication. He is still on involuntary medications. He doesn't want to take the medications and his family doesn't want him to either.</p>	<p>Confirmed information and involuntary hearing decision. Recommended he write to director of mental health.</p>	<p>Information Provided</p>
<p>Caller states that her husband had surgery a few months ago. He has been told that he needs regular followup after the surgery and has not received any. Caller states that husband has had worsening abdominal pain, vomiting and diarrhea. Has reached out to medical staff via grievances and kites but medical has dismissed it as ongoing recovery. Medical also will not schedule the follow up surgery that original surgeon said would be necessary. Relayed that he also has a brain tumor that never gets checked on by DOC medical.</p>	<p>DOC confirmed that treatment being requested has been or will be received.</p>	<p>Assistance Provided</p>
<p>Complainant called a medical emergency because of shortness of breath. DOC did not offer proper medical care. Complainant would like to get a CT scan and proper medical care.</p>	<p>Requested treatment being received per DOC and medical documentation.</p>	<p>Information Provided</p>
<p>Complainant was denied for the medically assisted treatment (MAT) program. Criteria for accessing MAT program is extremely limiting (must be 60 days from release). He has opiate use disorder. He feels that DOC is failing to treat a serious medical need that prompts illicit usage and can result in overdose or death. Under RCW 71.24.585, Washington legislature declared substance use disorder a medical condition, however, DOC isn't providing adequate care and the limiting criteria from accessing the MAT program leaves people with OUD with inadequate treatment until 60 days from their release date.</p>	<p>Complainant contacted OCO to ensure that our office is aware of the issue. OCO reviewed complainant's concern and verified that the outcome is in line with DOC's policies for MAT..</p>	<p>No Violation of Policy</p>

	Complainant has stage 4 liver cirrhosis and has been trying to get a cirrhosis diet from DOC for over a year. Has gone through the grievance and appeal process and has been told that the "orange snack" was adequate for their condition. However, the orange snack includes red meat and white bread which they are not supposed to eat. Concerned about eating a noncompliant diet and in turn dying much sooner. Also in need of an endoscopy and colonoscopy that was suggested by gastroenterologist.	Confirmed he is on a waiting list for GI follow up procedures. HSR diet issue options to be discussed at follow up appointment (changing orange snack and offering boiled eggs snack and lighter fare diet.	Assistance Provided
	Complainant is concerned about wellbeing of incarcerated individual who has history of mental health concerns. He had a mental health crisis and will now transfer to another facility to finish his short sentence. He needs mental health services.	Alerted DOC to his need for mental health services and confirmed that he has been accessing mental health services recently. Also verified that transfer has been canceled. Provided DRW referral information.	Information Provided
<b>Olympic Corrections Center</b>			
	Complainant is being infraacted for tattoos that are 5 years old because DOC says they look fresh. He has documented pictures from 2018 with the same tattoo work.	Reviewed all necessary disciplinary documents. Cannot find evidence of tattoo existing in 2015.	Unable to Substantiate
<b>Peninsula - Kitsap County</b>			
	Mortality review: Suicide.	Reviewed all records available to OCO. Identified concerns and made recommendations. Included in 2019 report on suicides.	Investigation Substantiated
<b>Stafford Creek Corrections Center</b>			
	He was found guilty of a 603 infraction for introducing drugs to the facility. He would like for the infraction to be reduced to a 752 infraction for possession of drugs because he purchased them from within the facility and did not introduce them to the facility or transfer them from another facility. He filed an appeal, but the decision was upheld.	Reviewed all disciplinary documents and communicated concerns to Disciplinary Program Manager. DOC would not lower to WAC 752 violation. Technically, this is no violation of policy, but OCO disagrees with the decision.	No Violation of Policy
	Complainant is a transgender woman housed in a men's facility. She expressed concerns about being unable to access gender affirming surgery. She is classified as male in DOC database. Wanted to file complaint for systemic purposes, so that OCO is aware.	OCO does not have power to impact change in this situation. Will attempt to address as a systemic issue in future transgender report.	No Violation of Policy
	Staff misconduct. Staff are discriminating against her for being trans by moving her, threatening to transfer her, giving her infractions, not using her proper pronouns, not giving her mental health help, and intimidating her.	No grievances on file for these concerns. Provided info to I/I for next steps.	Lack Jurisdiction

<p>Delayed process to confirm and access hormone replacement therapy due to release date. Additionally: she is supposed to be seen by mental health every 2-6 weeks and has not been seen for 9 weeks. They are still not calling her by the appropriate name/pronouns.</p>	<p>Confirmed process for HRT is on-going although lengthy. Will address systemic concern in forthcoming transgender report. Confirmed receiving MH appointments. Has not grieved pronoun issue; provided next steps info.</p>	<p>No Violation of Policy</p>
<p>Complainant did not receive mental health meds for three months at beginning of pandemic. His mental health records show that he has been taking medications since 2005. Due to the neglect of the doctor and other mental health staff, he attempted suicide. Also, he had a medical appointment and asked CO for a wheelchair for his call out due to chronic back/nerve pain. CO told him that medical would not allow wheelchair and said that he would be infractioned if he did not attend the callout. On the way to medical he fell and injured himself. He also hasn't been getting to pill line due to not having a wheelchair.</p>	<p>DOC reports that wheelchair is not medically indicated. OCO confirmed appointment with FMD to reassess. Confirmed that complainant is receiving medications and has been seen by mental health. MH records show that threat of self-harm was due to frustration with services and that MH verified that no suicidal ideation was present.</p>	<p>Assistance Provided</p>
<p>Closed case review: HSRs for medical equipment, including a wheelchair, were removed in February during a transport. HSRs need to be reinstated. Would like to meet with facility ADA coordinator.</p>	<p>Initial handling of case was appropriate. Information reaffirmed.</p>	<p>Assistance Provided</p>
<p>Complainant is being mistreated by medical staff. He needs a certain medication and was told "don't come back to prison." Feels medical staff are retaliating because he filed a staff conduct grievance.</p>	<p>No longer in a state prison. Released to community.</p>	<p>Decline/other</p>
<p>Complainant is having problems with the grievance coordinator not processing grievances in a timely and fair manner.</p>	<p>Encouraged complainant to continue using grievance process through to level 3. OCO has addressed grievance backlog with SCCC superintendent. Suggested kiting superintendent about response to PREA.</p>	<p>Information Provided</p>
<p>Complainant having problems with mail room (concerned that staff are opening legal mail).</p>	<p>Information given on next steps of recourse.</p>	<p>Information Provided</p>
<p>Complainant filed a grievance eight months ago regarding not being able to schedule a medical procedure and wants help following up. Update: procedure was performed; now he is supposed to have surgery and is waiting for that.</p>	<p>Confirmed procedure occurred. Confirmed appt with surgeon is scheduled.</p>	<p>DOC Resolved</p>
<p>He turned in medical emergency grievance, applied for sick call, and contacted medical staff. When he was put on sick call he wasn't seen by a doctor and was sent back to his cell without treatment. DOC does not respond to grievances.</p>	<p>Appointment scheduled. FMD additional assessment and care. Verified that medication and treatment plan are being updated.</p>	<p>Assistance Provided</p>
<p>He had a surgery and now is experiencing pain and abnormal swelling.</p>	<p>No grievance on file. Provided info on next steps.</p>	<p>Lack Jurisdiction</p>

OCO previously worked case. Issue is on-going. Due to back and neck injuries, he is unable to sit up without pain while eating. He was originally issued an HSR to eat in his cell. Since then the HSR was removed and now he only has an HSR for a walker, which helps him move around the facility, but does not make eating at mainline accessible.	HSR for wheelchair was deemed not medically necessary and contradicts treatment plan and medical records that show the need for movement to improve condition. OCO cannot overturn medical decision.	No Violation of Policy
Closed case review: Having problems finding wheelchair accessible housing where he can use his voucher, so his release is being postponed.	He is under ISRB and has to meet ISRB's requirements. Since the complaint the person passed.	Declined, Other

### Tri-Cities - Benton County

Complainant reports that a male resident experienced substance-induced rage and tried to attack a female resident. Complainant and another incarcerated person intervened and stopped fight. Feels that COs should carry OC spray in case of emergencies like this.	COs are not required or able to carry OC spray in work release facilities.	No Violation of Policy
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### Washington Corrections Center

He recently returned to WA DOC and recalled a staff sexual assault from several years ago. He reported the incident and requested mental healthcare. He was assessed and qualified for treatment, but has not received treatment.	Alerted DOC to pressing need for mental health treatment. Confirmed that he has seen MH and will have regular appointments once he is classified and transferred to assigned facility. Provided info on filing MH emergencies and DRW contact info.	Information Provided
Closed case review: Complainant has been feeling dizzy. He went to medical several times but was treated with medications that made symptoms worsen. He is also now losing his vision and hearing.	Info originally provided in closing letter. Closed case review indicates that case was appropriately managed. New info will be placed into a new case file.	Assistance Provided
Complainant has attempted to file a grievance regarding staff misconduct regarding a nurse. Reports that now staff are covering up the incident and not responding appropriately.	DOC could not find any witnesses to corroborate complaint.	Unable to Substantiate
Complainant reported retaliation for filing PREA report for sexual harassment. Loss of good time due to an infraction that was unjust and a hearing that he was uninformed about attending.	Reviewed all PREA documents. Appears that DOC fully investigated and reviewed concerns. Cannot substantiate retaliation. Will advise complainant that non-PREA staff misconduct issues may be better addressed through grievance program.	No Violation of Policy
Complainant's legal property is being withheld from him. He was recently transferred and the property is at the receiving facility but property staff have not released the legal property to him yet. He has legal deadlines coming up and needs his paperwork.	Complainant will be put on an upcoming callout to be issued his property.	DOC Resolved

### Washington Corrections Center for Women

Surgery supposedly scheduled for June never occurred. Informed via kite that the appointment was never scheduled.	Surgery had been delayed due to outside provider's COVID-19 restrictions. Confirmed DOC is calling them weekly for first available appt. OCO cannot impact outside provider scheduling restrictions.	Lack Jurisdiction
Officer using hate speech to refer to transgender individual at WCCW.	The PREA concern was investigated per DOC policy. There was not enough evidence to substantiate.	Unable to Substantiate
Complainant's DOSA was taken away for an infraction that caused a classification demotion. The infraction was later dismissed. During the hearing, the hearings officer tampered with the documents.	Reviewed case and hearing documents. DOC did not break DOSA policy during termination.	No Violation of Policy
A PREA was reported against a CO for screaming at her daughter for identifying as transgender.	The PREA concern was investigated per policy. Not enough evidence to substantiate claim.	Unable to Substantiate
She filed a PREA four times on the same officer: twice by kite and they didn't report it; 3rd time nothing was done; 4th time she called the hotline. They are now retaliating against her.	With the evidence we reviewed, we were unable to substantiate a PREA concern.	Unable to Substantiate
Complainant states they have been retaliated against by DOC staff person since May after filing a grievance against this staff person which resulted in the staff person being investigated by DOC.	DOC has opened an investigation. Officer has been moved to another unit. We requested the investigation report once it has been finalized and will review it for any needed follow-up from our office.	Information Provided
Complainant is being harassed by staff for being transgender, and staff are not protecting her from other incarcerated individuals who are also harassing her.	The PREA was investigated per policy. We cannot substantiate the claim that staff forced other inmates to file PREA.	Unable to Substantiate
Complainant noticed racial tension in the facility, such as the use of racial slurs. She has filed grievances. Another incarcerated individual called her an "N-word lover" and used other racial slurs to refer to her son. They got into a fight and complainant was infringed. She has several statements from other officers. She has sent the appeal to the superintendent and they want her under IMS.	Although there was not a violation of policy in this concern, the altercation could have been avoided if DOC staff had responded to her kite or grievance regarding the racial discrimination.	No Violation of Policy
Complainant states that she has been promoted to MI1 custody and is eligible to be transferred to MSC but the CUS is denying her the move. The CUS also denied her the opportunity to appeal. Complainant states she was supposed to transfer to MCCCW but she is approved and has a bed date for work release so DOC decided against the move.	She will move to the correct custody level while she awaits Work Release.	Assistance Provided

Complainant is being bullied by another incarcerated individual. She is blind and has hearing loss but the officers are laughing about the situation.	Worked with complainant's unit counselor to address staff behavior, other I/I's behavior and access to ADA. Unit counselor addressed concerns with her and she states no further problem.	Assistance Provided
Complainant reported that a CO grabbed her inappropriately. Female CO's arm brushed against complainant's breast during a scuffle.	We reviewed infraction given. There was no available camera evidence. The complainant admitted to refusing to disperse and throwing an object at the CO. We could not substantiate evidence to prove if she was grabbed or not by a CO.	Unable to Substantiate
Complainant reports that trans men experience discrimination at WCCW. He was in a verbal altercation with another incarcerated person because she was gender shaming him. He received a neutral BOE but two days later was moved to segregation. The other person was not moved. He has filed grievances for similar situations before and nothing was done. Feels that every time trans men get gender shamed they are always the ones who end up in segregation. He doesn't have access to grievance materials and he still hasn't received an infraction.	His infractions were dismissed. He will move back to GP.	DOC Resolved
When COVID-19 protocols first began, she was told by medical that she is a high risk and should self-quarantine. She recently requested to self-quarantine and was denied. She was told to self-isolate but still has to go to work and chow hall. She filed an emergency grievance.	DOC stopped offering self-quarantine but is now offering it to high risk patients on a trial basis. Staff sent patient a kite asking if she would like to be considered for self-quarantine now.	Assistance Provided
Complainant went to hospital in May after experiencing cardiac problem and broken leg. Released after three days with agreement from facility doctor that medical would follow release plan. Medical is not following up as agreed. She has not received a wheelchair or medications as called for by hospital treatment plan. Reports that there is still a bone in her ankle that is protruding and resulting in swelling. She reports that hospital x-rays showed a break but DOC is not treating it as such. She reports that hospital doctor ordered heart monitor use shortly after discharge but DOC waited 16 days. Also reports too much pain to walk to get meals – would like HSR for eating in room.	Her original complaint was not being seen by medical. Confirmed that she was seen. Need more information from her regarding additional concerns she added to complaint after original filing.	Information Provided
Complainant reports that DOC nurse gave daughter wrong dose of medication. This caused overdose and daughter was taken to the hospital. Daughter is still recovering from the poison levels in her system. Wants to be sure that she is receiving appropriate medical care since she is still recovering.	DOC did an investigation into the concern and has improved medication distribution processes.	Assistance Provided

## Washington State Penitentiary

Complainant grieved not receiving his dentures two months ago but has not yet received a response. He has been without dentures for 2 months now.	His unit was on lockdown during last four scheduled appointments. Denturist will be at facility this month and they are rescheduling him and getting clearance if unit is locked down again.	DOC Resolved
Complainant is being held in IMU with no infraction.	Transferred to WCC and no longer in IMU.	DOC Resolved
Complainant is in IMU because he reported having a problem living with a certain people. He was told that he may either write a statement on who is intimidating him or refuse housing, receive a major, and go to IMU. He chose to be infracted. Would like to be transferred out for his safety. He feels that he is a target because he was convicted of a sex offense. He has refused mainline and lost good time because he fears for his safety.	Approved by HQ for transfer to AHCC very soon.	DOC Resolved
Complainant was transferred from WSP to county jail for court, but then was transferred back to WSP before he could go to court, so he missed his court date.	Checked with multiple DOC staff member and reviewed court documents, Was not able to find a missed court appearance noted. Asked he follow up with us with more information.	Unable to Substantiate
Complainant is reporting a food strike at WSP due to contamination of foods. Only one kiosk in two of the units and another unit nearby has two.	Explained our involvement in looking at the issues that resulted in a food strike and that we are monitoring DOC staff and their actions to rectify the situation. Explained some units have two kiosks.	Information Provided
His order of art supplies was denied because of DOC policy violation (450.100 and 450.120). Named staff violated this policy and now he does not have access to his items.	Issue resolved. DOC admin staff reviewed the incident and provided him with the allowable items in the order.	DOC Resolved
Closed case review. Request for OCO assistance to correct Behavior Observation Entries (BOEs) that do not conform to policy.	Reviewed all case documents and actions taken; original case review findings substantiated.	Assistance Provided
Closed case review. Complainant was infracted for handling drugs. Sergeant reduced infraction from 701 to 601 because complainant explained that he had believed the box he'd been given contained sugar, not drugs. He was found guilty for 601 and was sanctioned. Then was told he'd lose his job and not be able to apply again for six months. He believes this is a violation of DOC policy (staff are prohibited from punishing incarcerated individuals twice for the same offense).	Reviewed all case documents and actions taken; original case review findings substantiated.	Assistance Provided
Complainant was evaluated for gender affirming surgery via GDCRC. DOC refused to pay for evaluation for surgery despite telling her she would	OCO cannot overturn CRC decisions, therefore cannot impact change in this situation.	No Violation of Policy

<p>need that evaluation. Would like DOC to pay for evaluation by transgender specialist. Also reports separate systemic issues 1) that PREA issues are not investigated when submitted by trans people, and 2) it is stigmatizing to house transgender people all together instead of having a specific unit for trans or LGBTQ people.</p>	<p>Requested and received PREA data from DOC. Will address systemic concern in forthcoming transgender report.</p>	
<p>Complainant reported having high blood pressure. He says that DOC retaliates against him regularly for pursuing a lawsuit for use of force. This causes him extreme stress, chest pains, and heart racing. He reports that DOC does not check blood pressure rate regularly.</p>	<p>Reviewed blood pressure records and noted that two readings were above normal but did not indicate treatment. BP checks were ordered every month and completed. OCO requested additional BP checks but DOC refused.</p>	<p>No Violation of Policy</p>
<p>Family calling about individual who was assaulted by another incarcerated person while at WSP. He was hit from behind and suffered a blow to the head. He went back to his cell and swelling started. He filed an emergency grievance. DOC took over an hour to check on him. During this time he began vomiting blood, experiencing dizziness and loss of consciousness. He was air-lifted from WSP. His family called because they are getting no response from DOC about his condition. Family says he was at the hospital, then at MCC, then back at WSP. Family is concerned due to DOC's slow response that he may not live.</p>	<p>Family member received/completed ROI. Confirmed locations, diagnostic testing, and treatment provided. Case approved for OCO Patient Safety Review re: DOC handling of medical emergency.</p>	<p>Assistance Provided</p>
<p>Complainant tried to file two emergency grievances but issue not resolved. Complainant fell out of bed and sustained injury. Seen 48 hours later. He had requested medical attention for underlying issue but had gone untreated, which led him to fall out of bed. DOC x-rayed and offered minimal treatment. Experiencing severe pain and would like better pain management plan.</p>	<p>Confirmed no abnormal findings from shoulder x-ray and that treatment provided for broken wrist aligns with OHP. Medical staff will follow up with him via appointment for further assessment of shoulder concerns.</p>	<p>Assistance Provided</p>
<p>Inadequate medical care and possible retaliation after filing an emergency grievance.</p>	<p>Confirmed that treatment was appropriate. RN retaliation could not be substantiated.</p>	<p>Unable to Substantiate</p>
<p>Complainant is not getting the proper medical attention or treatment that he needs for his seeing, walking, and hearing issues. His desired resolution is to see an ophthalmologist for eye surgery, get an HSR for a better ankle support or hightop work boot, and to see a hearing specialist. He has filed many grievances.</p>	<p>Confirmed that he is receiving treatment for his medical conditions. Explained the treatment guidelines per the Offender Health Plan.</p>	<p>Information Provided</p>
<p>Closed case review. Complainant reports being harassed since arriving at WSP. He was attacked by another incarcerated person, suffered injuries, but was sent to segregation. He believes DOC is trying to cover up the incident. He was x-rayed and given pain medications but put back in IMU. I &amp; I did not contact him.</p>	<p>Reviewed video, UOF packet, keep separates - DOC responded in 8-10 seconds, no keep separates at WSP. Suggested that complainant use grievance procedure regarding medical concerns.</p>	<p>Unable to Substantiate</p>



Release date has been pushed back nearly two months without explanation. Original release date aligned with the court decision (30 months probation, 60 months sentence). He has grieved and been denied.	Explained how to get DOC's Records Unit to review the time calculation issue.	Information Provided
Complainant called to report systemic concerns to OCO as our office reviews disciplinary procedures and property. Explained that DOC's current disciplinary procedures violate due process. Incarcerated persons are not allowed to call witnesses and evidence used would not be valid in a regular court of law. Asked that we review California's DOC property policies and procedures as they are much better than those in WA.	Thanked him and uplifted the systemic concerns to Joanna Carns.	Information Provided
Complainant requesting help getting visiting privileges reinstated with his fiancé. Visits were terminated due to a 603 infraction. She is his only visitor.	Fiancé needs to appeal the decision. Explained how she can do that and to follow up after DOC responds.	Lack Jurisdiction
DOC misplaced complainant's legal paperwork.	Explained that there is only evidence of 3 boxes; unable to confirm 4th box was ever recorded.	Unable to Substantiate
Complainant is older person being harassed by medical staff. When he requests medications, staff postpone his meds. They have also increased his dosage and he is having a bad reactions, including stomach pain/burning sensation and very loose stool.	Asked that he follow up with us after filing a grievance. Made outreach to medical staff to ensure he getting his medications on time.	Assistance Provided
Custody review in May recommended transfer to AHCC "Safe Haven." He is appealing his conviction and worries for his safety should his case become public. He has been in protective custody since he arrived because of death threats.	OCO cannot impact change with regard to facility moves. However, DOC has decided to keep him at WSP.	DOC resolved
Complainant is work-release eligible but counselor refuses to screen him due to an expired no contact order referenced in his chronos. Grieved the issue and reached out to HQ staff to resolve this issue.	DOC is following policy 300.500 which states that incarcerated people with victims concerns will not be screened for work release.	No Violation of Policy
Concern that DOC is not adhering to HSRs (not providing sufficient supplies to clean cell and showers in IMU) and that unit staff have no new grievance forms available to incarcerated individuals in the unit.	Observed unit cleaning supplies. Spoke with I/I and spouse and attended multiple conference calls with DOC staff. Most HSRs returned and after thorough review unit is now utilizing new grievance forms.	Assistance Provided
Closed case review. Complainant decided to officially stop all STG activities and drop out and debrief. Does	No longer being transferred out of state. DOC says he does not have	No Violation of Policy

not want Out-of-State transfer. Would like to get out of IMU.	a safe placement outside of IMU at this time.	
Complainant was diagnosed with Hepatitis C in January but has not yet been prescribed the medication to treat it. COVID-19 has delayed the process, but he should be able to access the treatment now.	Six month viral load test occurred after first positive HCV test. He has been added to the statewide treatment list.	DOC Resolved
Complainant was sent to solitary for excessive period of time as a retaliation for participating in the food strike and grieving COVID-procedures and JPay.	At the time of working the case, DOC had already approved him for transfer. As of the date of response, he was en route. Will consider for inclusion in future systemic report.	DOC Resolved
DOC changed the guidelines for 603 infraction. Complainant would like his good time back.	Could not find that the 603 infraction had changed. Cannot substantiate his concern.	Unable to Substantiate
Mortality review.	Extraordinary Medical Placement information provided to caller. Case to be reviewed as part of investigation on delayed cancer diagnoses.	Information Provided
Complainant had chest pains and then was diagnosed with inflammation of the heart. Did not receive proper medical care.	Confirmed that complainant is receiving appropriate treatment.	Unable to Substantiate
Closed case review: Complainant reports lung problems that medication is not treating effectively. Worried about contracting COVID. Mental health medications no longer sufficiently treating anxiety/stress.	OCO cannot provide immediate release or financial compensation as requested. Medical records show extensive diagnostics and care provided, updated asthma and allergy diagnosis and updated prescriptions.	No Violation of Policy
Closed case review: CRC approved medical diet for soy and gluten allergies not being provided since transfer to WSP.	Reviewed medical records. Complainant was evaluated by specialist and recommended for additional evaluations, which complainant declined. I/I's allergy cannot be demonstrated through testing; no violation of policy to not provide special diet.	No Violation of Policy