

OFFICE OF THE CORRECTIONS OMBUDS

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

Monthly Outcomes Report

October 2020

Institution of Incident	Allegation/Complaint/Concern	Outcome Summary	Status Reason
Airway Heights Corrections Center			
1.	Complainant experienced pain and numbness in extremities since receiving TB treatment. Requested medical files and now sees he was diagnosed with peripheral neuropathy but was not told or treated.	OCO appeal. Unfortunately, cannot overturn medical decision. They have given testing with negative findings. Tried treatment and he reported it did not work. Currently HSRs for comfort.	No Violation of Policy
2.	Appeal of previous decision to not investigate based on RCW (outside scope of authority). Complaint suggests that initial prosecutor mishandled case and now complainant is subject to ISRB.	Reviewed documents, previous ISRB hearing, and documented that new .420 hearing is to be scheduled before end of year. Original action correct -- decline based on lack of authority, RCW 43.06C.040(e).	Lack Jurisdiction
3.	Complainant concerned that loved one should have been released in January. Reports that DLC officer approved his release address and then sent it back to the counselor and it appears that it was denied.	Followed up with immediate email to family for more information and did not hear back. Appears that DOC independently reviewed time and has since released him.	DOC Resolved
4.	Complainant reports staff are asking him to open the door of another incarcerated person which is wrong because it is not his job and it causes him pain due to his physical condition.	Refuses to grieve because he says it is a good ol' boys club; however, informed him he does need to grieve before we would review the case.	Lack Jurisdiction
5.	Complainant reports filing grievances but months go by with no responses. He has kited the Grievance Coordinator who states that a reply was sent per policy and he must take it up with the mailroom or the unit sergeant. The grievance gets closed and he can no longer grieve the issue. This is happening with valid complaints and it feels like they are sweeping it under the rug.	Not clear which grievance was not responded to. However, I reviewed multiple grievances and saw that one was informally resolved. This may have been why he didn't receive a response.	No Violation of Policy
6.	Complainant had medical procedure. Now is observing blood in his stool. He tried to ask for a	Patient declined to pursue. Releasing in November; believes he has received	Declined, Other

	second opinion but was denied. He cannot get any medical help on this. He is worried that he might have colon cancer. He has filed medical kites and grievances. He would like AHCC to assess him for colon cancer. The blood test are not helpful because they do not provide a diagnosis. He would like to personally view his biopsy test results and get a second opinion.	inadequate care at AHCC and does not want any further treatment in DOC.	
7.	Alleges retaliation and wrongful termination from job due to false infraction.	OCO appeal. Confirmed with staff witness/victim that incident occurred as stated. Cannot therefore find retaliation or wrongful termination based on false infraction, as it was not false.	No Violation of Policy
8.	Complainant's loved one has late stage liver failure and numerous other serious health conditions. Would like him to be released so that he may spend his last days with his loved ones.	Provided EMP information, as the family member was asking for loved one's release.	Information Provided
9.	Mental health approved her for hormone therapy (HRT), but medical staff denied therefore she cannot access HRT. Also reported anti-transgender bias of on-site DOC medical staff and outside specialist DOC contracts with.	HRT was denied by medical based on diagnosis of Thrombosis (associated risk). OCO cannot overturn medical decision. Patient may access HRT through the Offender Paid Health Plan. No OHP violation.	No Violation of Policy
10.	Appeal -- He 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 12th hour he was denied his ERD and the facility has recalculated his ERD, adding 9 more months to his sentence. He believes that the recalculation was outrageous and deliberate.	Person was released.	Declined, Other
11.	Person is being held two years past ERD because of possible pending civil commitment.	Explained that DOC is following the current policies and explained in detail the civil commitment proceedings.	No Violation of Policy
12.	DOC staff found pruno in common area, nobody had it in their possession. They did not do UAs, breathalyzers and all 8-9 people in the area lost their jobs. Upper staff told him he is clear to return	Reviewed the incident and confidential information from DOC investigations unit. DOC and CI made the decision to terminate per 710.400.	No Violation of Policy

	to work but the CI Kitchen Plant Manager isn't allowing people to return to work.		
13.	He was given a 709 major infraction, no warning, when he should have been issued a 210. Staff members are using COVID to justify giving out these major infractions which have huge impacts.	Explained that when infractions are not appealed, OCO lacks jurisdiction to review the infraction. Provided resources to appeal.	Lack Jurisdiction
14.	Complainant's unit was called for mainline before 1730 hours. It wasn't until two emergency grievances were filed after 1930 that they received information on when they would be provided access to insulin/diabetic line. Earlier that morning, morning diabetic line was delayed over an hour. Concern is that this becomes a pattern.	According to HSM, this did happen mid-September due to hazardous air quality (smoke), but has not become a pattern since that time. Complainant has not pursued grievance beyond Level 0.	Substantiated
Bishop Lewis - King County			
15.	Complainant reports being drug tested via mouth swab while he had a suboxone strip inside his mouth. Tests are not supposed to be conducted at that time. His test came back positive.	Complainant was given 3 UAs between August and September and tested positive for substances. He was terminated from Work Release. DOC followed policy and the UAs were processed by a lab.	No Violation of Policy
Cedar Creek Corrections Center			
16.	Complainant was forced to move to a non-residential area because of COVID-19. They have no showers, internet, or phones. He feels he is being punished. He is not able to contact his family.	OCO staff visited CCCC and can verify that people housed in this area have access to showers and adequate spacing in sleeping quarters within that unit. The phone is in another unit and consistently available.	Unable to Substantiate
17.	Complainant was told he would get paid by CI and he had an option to not work if he didn't feel comfortable working with a site that had become exposed to COVID. Was told he would still get paid and now he hasn't been paid. Kiosk message was sent out that stated people would still be paid. He would like to be paid for the months of April and May.	DOC's memorandum did not cover individuals who were concerned about contracting Covid-19. At this time there is not violation of policy and we cannot impact change.	No Violation of Policy

18.	Complainant's loved one has been waiting in segregation while investigation is pending and was then moved to a gang unit.	Told mother about administrative segregation policy and informed her about the appeals process. Told her to contact us with any further concerns.	Information Provided
19.	Complainant was infracted for failing to provide UA during the allotted time frame. Complainant states he was not afforded a fair and impartial hearing because he was denied access to documentary evidence that would prove he was never stripped out per policy as stated but DOC staff. He took further measures to prove innocence and now has an HSR for extra allotted time. Complainant subsequently lost his DNR job.	Reviewed with superintendent. HSR not requested until after the UA; DNR workers are provided plenty of hydration during day. No strip search log exists or camera to verify allegation. Meets elements of infraction as the complainant factually did not provide the sample in the time allotted.	No Violation of Policy
20.	Complainant did not receive an impartial hearing because they were denied a copy of documents that will prove CO statements are false. Their statements stated that they stripped him out and allowed them to re-dress, however they never stripped them out because if so there would have been a log of their names in the strip out log which is required by policy. Sergeant told complainant that the record for this strip out did not exist. Hearing officer stated the log would not enter into the decision of whether he was guilty or not. Complainant tried explaining that the procedures for testing UA were not followed. Procedures 5, 6, 7, 9 and 11 were not followed because complainant was dehydrated from working and was not allowed any water during the testing time.	Same as above. Reviewed with superintendent. Strip search log does not exist. Plenty of hydration offered to DNR workers. Meets elements of infraction as they did not give a urine sample.	No Violation of Policy
Clallam Bay Corrections Center			
21.	Cell searches happening at CBCC; fiancé reports that approximately 15 of the COs are not wearing masks. He has a compromised immune system and is at risk for complications if he contracts COVID-19. The COs must wear masks to prevent transmission to incarcerated population.	Contacted CBCC day after receiving complaint; they contacted staff and agreed that some officers had mask down during breaks, but not 15. Staff said they would address/remind officers. Provided self-advocacy advice to fiancé to raise issue to CBCC.	Unable to Substantiate

22.	DOC via WAC 137-48-020 is violating his state and federal constitutional rights discriminating against heterosexual prisoners by way of preventing written words (books, magazines, pamphlets, pictures) of women and descriptions of sexual and intimate nature while allowing transgender prisoners to purchase female undergarments from catalogs.	Explained RCW 9.68.130 that defines sexually explicit material. Was not able to correlate transgender medical care to discrimination against heterosexual incarcerated persons. No WAC or RCW violation.	No Violation of Policy
23.	Caller reports that CBCC resolution staff redacted parts of his complaint that was appealed to HQ. He reports that this is in retaliation and that the resolution staff intentionally redacted the information from his complaint so that when HQ reviewed the concern, they wouldn't have all the evidence they need to understand the retaliation. States that this happened last year as well.	Was not able to substantiate why there is what appears to be redacted text. Reached out to the GPM to ensure she was able to review the grievance in its entirety; she confirmed that she was able.	Unable to Substantiate
24.	Caller was recently released from suicide watch after swallowing razors. A Correctional Officer said very loudly in the day room "You can go swallow some more razor blades."	DOC followed procedure to address the incident and enforce a reprimand.	DOC Resolved
25.	Complainant states that IMU staff are not giving them access to razors to shave during showers. The reporter states that per conditions of confinement, razors must be issued unless security modifications are in place. They state that they have no behavior modifications. They feel that this is retaliation because they identify as LGBTQ+ and staff are discriminating against them.	Concern resolved. Razors were not issued when fill-in staff was working and did not know the protocol. DOC staff stated that fill-in staff have been educated on the protocol.	Assistance Provided
26.	Complainant has an ongoing and unresolvable conflict with a Security Threat Group (STG). He has been placed in AdSeg for protection. He was accidentally released onto mainline, which resulted in an immediate violent encounter. He has since been placed back into segregation. The AdSeg Review Board has recommended placement at a facility where they believe this threat can be properly managed. However, complainant reports	Complainant was released from IMU. Explained to him that he had two days to report a safety concern. This was not reported. Explained protocols to report any future safety concerns.	Unable to Substantiate

	that he has a quad-level seperatee at that institution, so he is requesting to be transferred elsewhere.		
27.	He received a negative BOE from the chapel CO after a verbal disagreement. This has been an ongoing issue at times. The CO speaks to him disrespectfully and he feels that the CO is singling him out and trying to get him removed from his position in the chapel.	CPM met with complainant after OCO outreach and deleted one negative BOE and changed another BOE from "negative" to "neutral."	Assistance Provided
28.	He received an infraction for fighting. He thinks that staff conspired to have the other incarcerated person attack him. He was found guilty and appealed the infraction. It was upheld. He wants it overturned.	Reached out to DOC, reviewed infractions and hearings. Cannot substantiate claim of staff conspiracy and no evidence to overturn infraction.	Unable to Substantiate
29.	Purchased new eyewear from CI Optical on 6/2019. Frames started separating from lenses early 2020. Sent kiosk message March 2020 and again April 2020. Lens popped out. He was not being seen. When the lens popped out, he saw two small chips that indicates his product was defective when he received it. Tried to grieve, but told that he cannot get his glasses fixed or an appointment due to COVID.	CI confirmed backlog in CI Optical; working to address it. Complainant has met with optician once already with another appointment scheduled for early November.	DOC Resolved
30.	Complainant received 3 infractions in May due to a multi-man fight that occurred that day. He was the only one that was not directly involved in the fight who was infractioned for rioting and not following a directive to get on the ground. He was supposed to release in late June but lost 75 days GCT.	Person released in September, which was the desired resolution. Cannot impact further change.	Declined, Other

Coyote Ridge Corrections Center

31.	Complainant states that, during his incarceration at CRCC in 2018, the Public Disclosure liaison, the medical records liaison, and the legal liaison released 1,275 pages of his medical records to an unauthorized individual. DOC tried to claim that	Provided information on filing a tort claim for the monetary compensation he is seeking for wrongful actions by the state.	Information Provided
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	they released the documents accidentally and didn't vet the materials for protected information before releasing them. Complainant believes this was intentional.		
32.	Complainant called regarding a pat search that turned into excessive use of force. Staff choked him, put him to sleep, stuck their fingers down his throat. He has medical, hospital, DOC write up reports, witness and staff witness.	We were not able to substantiate what he claimed in his complaint by medical visit nor by video.	Unable to Substantiate
33.	Caller is trying to access funds that he qualifies for under the CARES Act. He does not have access to the necessary form. He has reached out to his counselor and the law librarian and neither of them can provide him with the document.	Provided new information regarding the CARES Act court ruling and materials for self-advocacy. Let him know to call us and we will do our best to stay updated as new information develops.	Assistance Provided
34.	Complainant reports that his DOC file shows a stipulation that he cannot contact anyone under the age of 13. There is no mention of this in his J&S paperwork. Section 4.2 doesn't have anything about it marked or filled out. Complainant has two young children who are currently in dependency. His plan and hope is to get out, get on his feet and get custody of his children.	Gave information about the no contact order and provided steps to be able to have it modified to have contact with his children.	Information Provided
35.	Complainant's concern is that his current pathway to restoration of good conduct time is not accurate, based on his understanding of past pathway agreements.	Communicated with CC and Deputy Director. Restoration of good time is at discretion of Deputy Director and in this case, they restored over 50% but denied the rest due to severity of the infraction.	No Violation of Policy
36.	Complainant reports that 90-day property disposition form was not correctly completed -- it is missing his cracked digital device. Filed a tort claim and it was denied. He wants a new player or other compensation.	Cannot substantiate that DOC did not give him the property disposition form. Also, neither OCO (nor DOC) can reimburse for property; OCO doesn't have authority over DES.	Unable to Substantiate
37.	Legal books that had been donated by a previously incarcerated individual were removed from the cart.	Appeal was closed because OCO could not find evidence to substantiate the information in the case.	Unable to Substantiate

38.	Complainant has been in IMU since July after he was assaulted by three people in the bathroom. He did not receive an infraction. He has been waiting for a transfer that he request in July. Had a similar problem in April and he still hasn't been transferred.	DOC was not violating policy as he could be held for his safety pending transfer per 320.200; however, I explained that we recognize that IMU is harmful to mental health. We agree that DOC must consider alternatives to IMU whenever possible.	No Violation of Policy
39.	Complainant is releasing soon and will be traveling by train to his county of origin to begin community supervision. States that he is worried that because the train ride is so long that he won't make it to his first check in on time. He wants to contact his Community Corrections Officer (CCO) to speak about that but, his Classification Counselor will not provide him with the contact information to do so. The counselor also has not been willing to reach out to the CCO to explain to them that this may be an issue.	Reached out to DOC staff who confirmed that he will transport to his county of origin and that he will not be late if he reports right after arrival.	Assistance Provided
40.	A CO verbally assaulted the caller, attempting to incite them to violence. He filed a grievance about this event. The CO retaliated by reporting that the caller sexually harassed and threatened him. This resulted in the caller being placed in IMU.	DOC Hearings Officers were persuaded by the staff testimony and the inconsistencies with the witness statements. Video was waived by the incarcerated person therefore the Hearings Department and OCO were not able to review it. Evidence and Hearings Proceedings were followed per DOC policy.	No Violation of Policy
41.	Complainant has multiple medical conditions and needs HSR for shaded glasses. He is unable to participate in outside recreation because going outside in bright sun without shade or eye protection results in seizures.	Confirmed he is receiving medical treatment. Alerted DOC to bucket hat concern and confirmed he received bucket hat.	Assistance Provided
42.	Received a major infraction for possessing sexually explicit materials due to an email written to his significant other. He feels that this punishment is excessive and unusual.	Reviewed disciplinary packet. Appears to meet elements of infraction and "some evidence" standard.	No Violation of Policy
43.	Caller and his wife have been trying for three years to get her on his visitation list. DOC has provided different reasons for denying her. Every time he and	Explained that his wife needs to appeal the current visitation denial and they may follow	Lack Jurisdiction

	she fix the issue, the committee gives them a new reason for denial.	up with OCO after DOC responds to the appeal.	
Larch Corrections Center			
44.	Complainant reports that his religious rights have been and are being violated. He is a practicing Muslim and is constantly being given pork products to eat.	Spoke with complainant by phone. He confirmed that during this DNR season the incident has not occurred again.	DOC Resolved
45.	Complainant feels due process was violated during his infraction hearings and processes. He got a 752 infraction (positive U/A) that was resulted in 762 (DOSA revocation). Complainant names that the DOC staff involved in the infraction was the person that performed his hearing for the 752 infraction. He was transferred and never received a response to his infraction. Would like for the hearing process to be reviewed and overturned due to violation of due process.	Reviewed disciplinary packet and policy 460.000; do not see a conflict with the CUS serving as the hearing officer in his case.	No Violation of Policy
Mission Creek Corrections Center for Women			
46.	Complainant was woken up around 9:30pm to do a UA. She gave a sample and wasn't shown a cup with an expiration date and wasn't told if it was dirty or not. She found out it was dirty today. She asked if it was sent to the lab and they said yes. She said that impossible because they made her dump it.	OCO appeal. Asked superintendent to re-review in March; he could not find medication caused false positive. Person has since been released. Cannot assist further at this point.	No Violation of Policy
47.	Complainant was verbally and physically assaulted by another incarcerated individual and her friend. The friend held her arm down while the other assaulted her. Complainant was infraacted for disruptive behavior (general infraction) but was then infraacted again (major infraction) when she was out of her cell during her room lock to use the phone. She sat at a picnic table briefly and was infraacted for breaking the conditions of her room lock. She is dealing with daily harassment as a result of this incident.	DOC did not break policy for infraacting her for breaking sanction.	No Violation of Policy

Monroe Correctional Complex

48.	Complainant reports that the guards sat around and watched man die for 20 minutes while they laughed, joked, and clapped. He lay face-down in the dirt before the nurse was called. They thought he was under the influence of spice. He said that even when the nurses did come they causally walked out with no emergency emphasis. They fear for their lives when they have emergency situations and fear being targeted by I&I for reporting it.	Reviewed all medical records, CIR, administrative memos. No video or other objective information to substantiate allegations by complainant.	Unable to Substantiate
49.	Complainant reports long pattern of not receiving mental health medications and/or withdrawals from abrupt stoppage of medications.	Complainant was transferred to county jail after contacting OCO and has remained there for months. Advised him to use grievance process and contact OCO again if he still has concerns upon return to DOC.	Lack Jurisdiction
50.	Complainant says that DOC did not follow UA policy. Staff did not give him a glass of water to drink before the UA and they did not give him the full 60 minutes to produce urine. There are also time inconsistencies in the infraction report and they make false claims. For example, they state that they did watch him drink an 8 oz. glass of water before the UA. Appealed infraction for a UA.	Reviewed disciplinary packet. Timeframe inconsistency appears to be in complainant's favor. Regarding water, officer statement indicates he was given water prior to the UA and no camera exists to contradict. As he did fail to produce urine sample, meets requirements.	Unable to Substantiate
51.	Says that he has been denied a transfer from MCC to Western State Hospital; denied the opportunity to attend his mother's funeral; and also issues regarding custody and LFO but does not provide details.	Does not appear he has filed grievances; sent the OCO request form. Also informed OCO likely would not have any say in any Western State decision. Need more info on the other issues.	Lack Jurisdiction
52.	PREA-related. Complainant is being stalked by an incarcerated individual. DOC is aware of the situation and hasn't resolved it.	Contacted the complainant's counselor regarding the safety concerns and the other person's behavior. The person who was alleged to have been causing the problem transferred to a new facility, resolving the issue.	DOC Resolved

53.	Complainant is experiencing retaliation after filing a lawsuit. Lawsuit named a specific CO who is now working in complainant's living unit.	OCO confirmed that this CO was only in the unit temporarily due to a staff shortage. The complainant indicated that he felt safe as long as the CO wasn't permanently assigned to the unit.	Substantiated
54.	Complainant transferred from TRU to SOU. CUS packed his property and it was put in the car and transported with him. Policy says he can have two boxes; he chose a box of legal paperwork and a box of hygienic supplies including his denture adhesive. He still hasn't received those items. He can't eat without the denture adhesive. He doesn't have soap or lotions either. He feels that DOC is intentionally withholding his property.	DOC has returned his property. DOC also arranged an appointment for his dentures to be repaired.	DOC Resolved
55.	DOC is not giving him his property because they are housing him in a medium facility, but his plan still shows that he is minimum.	There is no grievance or tort claim on record in OMNI. Informed him on the next actions or recourse.	Lack Jurisdiction
56.	Conditions in the unit are unsanitary. The administration has neglected to clean up the raw sewage. Incarcerated individuals in the unit are being exposed to toxic sewage smells.	No grievance, but I elevated concern to MCC and asked for more information. Staff relayed extensive investigation into smell and cannot verify source; believe it to be external due to delivery of biosolids to neighboring business. MCC staff said that they are looking into potential mitigation.	Lack Jurisdiction
57.	Sewage leakage/smell in MCC WSR. Gasses come up through pipelines and cause headaches.	Complainant has not yet received Level 2 response. Staff relayed extensive investigation into smell and cannot verify source; believe it to be external due to delivery of biosolids to neighboring business. MCC staff said that they are looking into potential mitigation.	Lack Jurisdiction
58.	Complainant applied for EFV program; DOC determined that he was "amenable for treatment" but was told he isn't eligible for EFV due to his life without the possibility of parole sentence. Counselors, superintendent were in favor of his	Communicated with DOC HQ. The EFV policy and forms have changed, so his family needs to reapply with new forms. If he is denied, appeals and is denied again, then OCO can reopen case.	Lack Jurisdiction

	participation, but Assistant Secretary denied his participation in the program. He feels this is due to his innocence plea. Reapplied. Rejected and told all future correspondences will not be replied to.		
59.	Complainant does not feel that his rights were met in regards to the hearing for his serious infraction (752). He says DOC violated policy because he was not given proper notice of the hearing, he was not permitted to submit questions for witnesses, and because the hearing officer did not note his proposed questions in the record.	His concern was substantiated; DOC has since fixed the form to provide better notification of rights. Asked for further review by HQ and HQ declined to overturn his infraction as they did not feel it prejudiced the outcome.	Assistance Provided
60.	Complainant's husband was approved for work camp in September. He will be placed at AHCC. Complainant recently moved cross-country to support her husband. She and rest of family visit him every weekend. Complainant requested that DOC keep him in western WA but they assigned him to eastern WA. She is very concerned that DOC has chosen to move him 6+ hours, 400 miles away – does not foresee a positive outcome.	Institutional placement/transfers are always within DOC's discretion/policy 300.380.	No Violation of Policy
61.	Complainant alleges staff misconduct because staff are not allowing phone use, staff are contaminating his food, and he worries that his letters to OCO and to his family are not leaving the facility. He is still on cell confinement/loss of dayroom, yard, gym and recreational activities and programs. He is able to use the phones from 6pm to 7pm. He feels that his life is being threatened and does not feel safe.	DOC investigated claims and found them linked to mental health concerns. One of his concerns was about mail. We gave him possible actions of recourse to address those concerns.	Information Provided
62.	Complainant filed grievance against DOC staff member for not replying to his kites requesting legal addresses.	At this time DOC policy does not dictate time frames for responses from the law library. Other actions of recourse given to hopefully improve results.	Information provided
63.	Complainant was moved from a single person cell to a double and he doesn't want to be in a room with people he doesn't know.	After further review of the complaint, request and statutory authority, we cannot dictate placement and have no jurisdiction.	Lack Jurisdiction

		We are currently working on a report related to the single cell policy.	
64.	Memorandum stated incarcerated persons would be compensated for wages lost while in quarantine. He was not paid for two weeks he spent in quarantine in March.	Based on communication with DOC staff, the memorandum is not retroactive. There is no violation of policy.	No Violation of Policy
65.	Complainant needs help obtaining new prescription for pain medication.	Spoke with provider. Meds (opioids at mod-to-high dosages) are per pain specialist. Will have procedure for pain. Sees ARNP weekly. Treatment is per OHP and DOC protocols.	No Violation of Policy
66.	Complainant had follow up appointment with medical. EKG wire that medical tried to use was broken. Medical spent an hour trying to tape it to him. At that point they decided to transport complainant to hospital. Total of two hours spent waiting during a potential heart attack situation.	Spoke with facility leadership. EKG lead wire broken; has since been replaced. Delay in care not substantiated as no patient harm occurred; passed info to HQ for process improvements as needed.	No Violation of Policy
67.	Complainant is unable to get his allergy medication. Because of the current condition in institution he cannot get face-time with the medical staff. He is having a hard time breathing.	OCO previously responded that he needs to see provider for this issue to be able to get the healthcare that he needs. No relevant grievance found. He needs to work to resolve through DOC first.	Lack Jurisdiction
68.	DOC sent out a statement that incarcerated persons would be paid for work missed while under quarantine. He did not get paid for the time he spent in quarantine in March. He filed a grievance but was told that it's not grievable.	Relayed information that payments would not be retroactive under this memo.	Information Provided
69.	Complainant says new officers are jangling their keys loudly during walk-throughs, often because their keys are attached to their pants.	No violation of policy, but still notified the MH Unit Supervisor and the CPM of the concern.	No Violation of Policy
70.	Complainant experienced COVID-19 symptoms but DOC did not provide adequate healthcare. Also reports that DOC staff are deliberately not using empty rooms and instead staff are putting people in rooms together and denying the ability to socially distance. Specifically targeting people of color.	COVID -19 concerns addressed systemically by OCO recommendations. The race equity concern in this case was grouped with his BOE for BLM for the race equity review.	Information Provided

71.	Complainant is challenging a negative BOE written by the CPM after a discussion about him sending a letter to the superintendent regarding multiple concerns related to COVID-19 safety. The BOE contains false information and the CPM is retaliating against him for addressing the concerns they spoke about in the letter to the superintendent.	Provided DRW contact information. COVID concerns addressed by OCO recommendations. The BOE concern in this case was grouped with a race concern for race equity review.	Assistance Provided
72.	Complainant called to report a PREA incident that he witnessed between two incarcerated individuals.	Contacted DOC for information on the PREA incident reported. As the incident did not directly involve the complainant we cannot discuss details with him. Spoke with complainant and explained this.	Information Provided
73.	Complainant has chronic pain and history of opioid use and would like to get on MAT program. One provider suggested that the MAT program would be good for him. Provider said he had to be within two months of eligibility for work release. Right now he's eligible for GRE/work release. Provider has not responded to multiple kites sent over recent weeks. Filed grievance with no response.	Suggested that he grieve again and send kite to GC. I also notified HSM of his need to see provider, which satisfied complainant.	Lack Jurisdiction
74.	Complainant reported a PREA on DOC's hotline against a sergeant and states he filed a grievance. He is concerned about potential retaliation.	Reviewed PREA packets. DOC investigated appropriately. Complainant did not report retaliation, but concern of potential for it. Complainant released to community custody 9/24/2020.	No Violation of Policy
75.	Complainant is seeking a single cell due to mental health concerns. He indicates that he is also seeking an interpreter. He has grieved both issues but the grievance process has not been helpful for him.	Alerted DOC to need for mental health review; requested additional clarifying info from complainant regarding type of translator needed.	Information Provided
76.	Complainant was moved from MCC-MSU to EFV trailers because he is high risk for COVID. Staff packed his property. When he got to the trailer, he was missing his \$90 wastewater treatment book. His tort claim was denied because he could not prove that staff lost his property.	Reviewed tort claim and contacted staff. He waited over a month to file a tort claim; did not file grievance until September. Did not tell staff same day that loss occurred. Cannot substantiate that loss happened due to staff.	Unable to Substantiate

77.	Complainant's paperwork was mixed up when he first arrived at MCC this month. DOC thought he had COVID-19. DOC officer told him he had COVID-19 and isolated him. His COVID test was negative. He was told he needed a second one 48 hours after the first test but he never received the second test. DOC put him in a COVID-19 cell in isolation. He had no symptoms. He has asthma, pre-existing condition, and is high risk. This placement caused negative mental health impacts. He asked DOC when he was supposed to get his next test and staff told him he had already had it but he said nobody ever came around to do a second test.	COVID-19 isolation appears to be per current STIC protocol. Unable to research further as incarcerated individual was released.	Unable to Substantiate
78.	Complainant is struggling with mental health and does not feel he is receiving the specific counseling he needs.	Alerted DOC MH to need for services; referred to DRW. Encouraged complainant to call our office if there is additional information he would like us to know.	Information Provided
79.	Complainant was transported to IMU in July pending investigation for harassing staff. He states he received an infraction but claims that the staff lied and that unit video would prove that. The hearings officer wanted to reduce the infraction from a major to a minor, however he appealed the infraction stating that once it has been proven that the staff who lied cannot use their testimony as facts unless it is corroborated by an independent third person.	DOC overturned the infraction.	DOC Resolved
80.	Complainant was found guilty of a positive UA, however, after a segment published by KIRO 7 news regarding DOC's use of faulty UA cups, he believes he was one of the individuals impacted. Complainant is concerned that this may impact his chances of going to work release.	Cannot find DOC violated policy with the infraction, but checked with counselor and confirmed that it should not impact WR eligibility, although that will be HQ decision.	No Violation of Policy
81.	Appealed three serious infractions to DOC -- 506, 509, 896 -- but hasn't received a response.	Appeal responded to; upheld guilty finding. Based on review of packet, he appears to have admitted to the action. Grievance	No Violation of Policy

		procedure better avenue for staff conduct concerns.	
82.	Complainant feels that he should not have been infracted and found guilty of escape because he willfully returned within 24 hours. He could not appeal because he was on COA.	Regardless of return, appears to meet definition of escape. Was released to GP from COA with time to appeal. Has since been released and returned to prison since the time of this issue.	No Violation of Policy
83.	Caller was infracted for WAC 603 unauthorized drug/paraphernalia. He pled guilty and stated to me that the incident did occur. However, his concern relates to his sanctions. Caller states that the disciplinary sanction guidelines state that DOC staff cannot hold property for more than 30 days. DOC is holding his property for the full 180 days.	Per DOC Policy 460.050, DOC can hold someone to maximum sanction regardless of 1st or 2nd offense. 4th attempt in 5 years to introduce contraband, so held to maximum.	No Violation of Policy
84.	Complainant was found guilty of introduction and possession of intoxicating substance. He was found with crushed medication (a stimulant, Efexor, prescribed by DOC). It appeared as a white powder, so DOC tested it and the results came back positive as cocaine. He says this was a false positive because he knows it was his own crushed medication and he has no contact with anyone on the outside to bring drugs in. They gave him a UA and it came back negative for any drugs in his system. He requested they retest the medication and they refused and upheld the infraction. DOC staff told him they are considering long-term Ad Seg for introducing drugs to the facility. He has completed his time in IMU pending infraction hearing, but now they are holding him there while they consider Ad Seg.	DOC reduced violation to 716, misuse of prescribed medication. The contraband was crushed Effexor. Appears to meet infraction definition and "some evidence" standard.	No Violation of Policy
85.	Complainant was infracted and charged \$242.75 for hitting the phone booth and breaking off the ear piece of the phone. He has appealed infraction. He admitted to hitting the phone booth, but says that he did not completely break it off.	DOC says video no longer exists. He says his father has it; if he can send us the video, we will reactivate case. Without the video, we cannot substantiate his concern.	Unable to Substantiate

86.	Staff conducted pruno check in his cell and went through his bags, which they are not supposed to, and confiscated all of his fruit and his boat, which they should not have done. He did file a grievance, but he never received a response to his grievance.	Contacted GC to send him the grievance response and hopefully allow him to appeal even though past timeframe since he never received the original response.	Assistance Provided
87.	Complainant is at high risk for contracting COVID-19. He has been given an HSR for daily masks, but they were never given to him. He also wants hand sanitizer. Wants to be able to clean his hands in high traffic sink in order to return to cell with clean hands (i.e. does not want to wash hands in cell).	OCO substantiates that they are not given daily masks, hand sanitizer for personal use, and they have to use their sinks to wash their hands. This is a systemic issue and we are working with DOC to address better COVID prevention/precautions.	Substantiated
88.	Complainant was violated on his first violation in 2018. Per his J&S, he should not have been subject to more than 60 days until after the third violation. He is now on his third violation. He is going to be released next week.	OCO cannot impact change on this case. This is about his first violation in 2018. He is now back on his third violation and will be released. Recommended he consult an attorney if he would like to pursue further.	Lack Jurisdiction
89.	Complainant's husband has had numerous serious medical concerns and symptoms for past seven months. Provider has repeatedly minimized symptoms and attributed them to mental health. Husband saw mental health and MH ruled out any psychological concern. Complainant and husband want him to be properly examined and diagnosed by health services.	Confirmed that appropriate care (diagnostics, consultations, and treatment) has been or will be provided.	Assistance Provided
90.	Complainant was infracted unjustly over a situation that occurred during pill line. Complainant's pusher did not show up to push him so he went to pill line himself. The CO at pill line yelled that he'd be infracted for coming to pill line without his pusher. An argument ensued that resulted in him being placed in IMU and being infracted with five WAC infractions. Complainant states that this is retaliation that stems from the multiple issues in medical that he is exposing.	Complainant admits to pushing over the water cooler and calling DOC staff a name. Cannot find that DOC violated policy with infracting him for these actions. No additional evidence that this is retaliation.	No Violation of Policy

Olympic Corrections Center

91.	Complainant received an infraction for a tattoo that he said was an old tattoo. Also reports that his WA One assessment score changed from Low to HP even though he has a record of positive behavior.	Previously closed separate case regarding tattoos; OCO could not find evidence that tattoos existed prior to infraction. The WA One change was due to previous errors that were corrected.	No Violation of Policy
92.	Complainant was denied for GRE. He has appealed it. Denial was due to warrants that have already been taken care of.	His ORP was approved so he should be released on ERD. GRE policy is still being reviewed/finalized, so no violation of policy.	Information Provided
93.	OCC staff aren't allowing the possibility for social distancing because they are mandating classes of over twenty people for TC; they are regularly having COs searching and entering living spaces; they are continuing with unit-to-unit moves; and SCS/DNR worker-inmates still working. These are in violation of posted DOC policy, especially while Jefferson county is in phase 1. Wants DOC to follow DOC and statewide orders to increase social distancing and protect incarcerated individuals.	Relayed concerns to the superintendent as we address the COVID-19 concerns systemically.	Assistance Provided
94.	Complainant is concerned about contracting COVID due to underlying health conditions (diabetes, high blood pressure, old age, Hepatitis C) and TC program running prematurely (Jefferson County is in phase 2, not 3). He would like to be released early because of COVID vulnerability.	We have no jurisdiction over release but did inform the superintendent of these concerns. OCO is making systemic recommendations on this matter.	Lack Jurisdiction
95.	Complainant's counselor completed his WA One assessment and his risk level was moved from low to high violent (HV), even though he was maxed out on points. Grieved but told it is non-grievable because there is an appeal process.	Counselor says that domestic violence was not checked on previous assessments; he corrected it on the current assessment, which increased the risk level.	No Violation of Policy

Reynolds - King County

96.	PREA concern. CO flirted with complainant which made complainant feel uncomfortable. This CO and another officer searched complainant when he was	Reviewed PREA packet and full video of pat search. Do not see any evidence of misconduct. However, relayed that OCO is	Unable to substantiate
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washing his hands in the bathroom. Complainant reports that CO groped him and put his hand in complainant's waistband. Ultimately complainant lost 88 days of good time for making a false statement against a staff member and he also lost his job. Complainant feels that this is retaliation.

currently co-chairing workgroup with DOC to improve conditions overall at work release centers.

Stafford Creek Corrections Center

97.	Complainant was approved for release in March. His counselor submitted four or five release plans for transitional housing, but the DOC officer assigned to him keeps denying them saying he "doesn't have family support" at those addresses. Anyone who utilizes transitional housing typically does not have family support so he doesn't know how to solve this. He is being held past his ERD. Also concerned that this may be racial discrimination as white prisoners with similar histories have been released to these placement options while he has been denied repeatedly.	DOC has approved a release address. Closing case, but also asked him to follow up with more information regarding the racial discrimination concern.	DOC Resolved
98.	Complainant was infraacted for contacting a victim. DOC used a letter he wrote as evidence, but he believes that this letter should have exonerated him instead. Says that he wrote to the mother, not the minor victim, whom he was not prohibited from contacting.	OCO appeal. Reviewed infraction packet. Letter no longer exists because infraction is from 2014. Appears to be sufficient evidence of guilt. OCO handled the case appropriately.	No Violation of Policy
99.	Complainant is being retaliated against; the CUS has begun getting his subordinates to issue additional false infractions.	Sent letter to complainant and asked for more info; have not heard back. Reviewed infraction history: general infractions for missing call-out, not standing at count, and having other person's legal work. Does not appear that these are false; do not have evidence of retaliation.	Unable to Substantiate
100.	In August 2019 complainant was issued a false 603 major infraction. DOC provided no evidence of him having drugs, paraphernalia, or dirty UAs. DOC had no informants or evidence. DOC found him guilty	DOC only required to have "some evidence" per Supreme Court; this appears to meet that low bar. Do not see any violations of policy to request further review by HQ.	No Violation of Policy

	based on phone conversations in which he discussed money. They also used a conversation he had with his brother who owns a marijuana dispensary in the hearing, which had nothing to do with prison but instead was a general conversation about marijuana. They also removed his brother from his visiting list based on this false infraction.	Provided self-advocacy information to write to HQ.	
101.	OCO assisted in getting an infraction dismissed, but DOC HQ staff are still using it to deny him camp classification. He wants to be able to get to camp and work release and have DOC stop using a dismissed infraction to justify his current classification.	Reviewed infractions, custody and facility plans, chronological events and policies concerning eligibility. His infractions are not a year old and are impacting release. Release is not being impacted by the dismissed infraction.	No Violation of Policy
102.	Complainant was infractioned for not providing a urine sample in January and was put in segregation for nine days. The same thing happened to two other people but he was the only one found guilty due to "time confusion." Other two individuals are white and complainant is black. He lost his cell and job as a result.	No violation of policy for infractioning for failure to produce urine; requesting more info from complainant regarding the other individuals who were not found guilty to evaluate disparate treatment.	No Violation of Policy
103.	Complainant writes that husband was served a piece of paper last year that has something to do with PREA, but he has never filed a PREA claim. Concerned that someone has filed a false PREA complaint in his name.	Followed up with original complainant, who reported that the investigation was closed with no additional problems for her husband.	Problem Solved
104.	Complainant received a 752 infraction and has exhausted all appeals. He was not present at the hearing and was never on the callout for the hearing and was not notified there was a hearing. His due process was violated.	DOC cleared infraction from his record prior to OCO involvement.	DOC Resolved
105.	Complainant was chosen for a strip search when leaving job. Officer accused complainant of throwing his clothes at him, and officer became confrontational, antagonizing, yelling, then followed him out of the building after the strip search. Complainant filed a PREA. He was told he is going to	OCO appeal. The alleged behavior does not meet PREA definition. Provided information about filing a grievance regarding staff misconduct. Prior handling of case by OCO was appropriate.	No Violation of Policy

	be written up for “throwing items at an officer” and was told that DOC thinks that his PREA claim is retaliation for the infraction. No video surveillance in the room but there was a camera outside when the officer followed him out of the search. Pending infraction is keeping him from working his CI job because his movement has been restricted beyond the hub at SCCC.		
106.	Complainant received bogus infraction (714) and was found guilty. He appealed and wrote to DOC HQ.	OCO appeal. Current issue is that date on disciplinary hearing minutes does not match infraction. Raised to DOC Disciplinary Program Manager, who declined to overturn due to not impacting guilt. Cannot further assist.	Declined
107.	Complainant says they filed grievance in April. Reports that dentist was violent and seemed confrontational. Many delays in grievance responses. In July he wrote an emergency grievance because he was in agony, but it was deemed non-emergent.	Delays in grievances substantiated. HSM interviewed him in September and he had an appointment next day. DOC indicates that this resolved his concern; OCO has contacted complainant to verify.	DOC Resolved
108.	The grievance coordinator did not allow complainant to grieve the hobby craft policy. He says they used the policy that he was grieving as a response to the grievance. He wants them to accept his policy-change grievance and give an appropriate response. Also requests us to review the policy as a systemic issue.	Received his comment on the new hobby policy and its negative impact on him. Provided him with the addresses for three DOC HQ staff to contact regarding his concern.	Assistance Provided
109.	Complainant states he has been denied EFV visits due to a DV situation that he was found not guilty of, was then dismissed and expunged off of his record. DV incident involved his mother -- not his wife -- and he was told that it should not affect EFV visits with his wife.	DOC says DV “indicators” are reviewed under policy 590.100, even if the individual is found not guilty. Appears there are two DV charges and one allegedly against romantic partner. Urged complainant to appeal with any info regarding the DV charge.	No Violation of Policy
110.	Complainant was infracted for something he didn't do and was not given the proper procedures in order to fight his infraction.	Reviewed disciplinary packet and all information. Appears thorough and meets	No Violation of Policy

		low “some evidence” standard set by US Supreme Court for evidence.	
111.	New transgender policy 470.900 is not being followed, especially in regards to safe strip searches. She has requested a female staff member provide strip searches. This was done a few times but lately DOC has refused.	Trainings for trans strip searches were supposed to occur in March. DOC canceled trainings when COVID-19 protocols initiated. IMRS reports submitted during trans strip searches in interim. OCO will include in forthcoming trans report.	No Violation of Policy
112.	She has repeatedly applied for gender-affirming surgery. DOC began screening her for the procedure, but then stopped without explanation. She also reports that she isn’t getting mental health care for gender dysphoria.	Ensured appointments scheduled for gender dysphoria work-up and mental health to discuss care and provider options. Confirmed process is now moving forward again for GD treatment & gender-affirming surgery.	Assistance Provided
113.	Complainant states that there is black stuff growing in toilet in the IMU. They have been having respiratory symptoms. The cleaning supplies DOC provides don’t prevent it; it keeps growing back.	Reached out to DOC to have the possible mold looked at and sanitized. DOC looked at the black substance and cleaned the toilet. Issue resolved.	Assistance Provided
114.	Complainant has received threats of bodily harm from fellow incarcerated people. These threats are occurring multiple times a day.	Contacted DOC regarding complainant’s safety. Staff checked on safety/complaints, reviewed video, offered relocation, which complainant refused.	No Violation of Policy
115.	Complainant reports multiple concerns including racial slurs, retaliation, and potential uses of force.	Per conversation with complainant, clarified that his priority concerns are receiving MH treatment and getting out of max custody. Reached out to DOC regarding MH treatment and referred to DRW. DOC will not change max custody.	No Violation of Policy
116.	Complainant says he was given an infraction for not returning to his cell after his cellmate wanted to fight. They both went to the sergeant to resolve it and his cellmate told him the sergeant wanted them to fight.	Based on the incident report, he did not tell staff that he was in fear for his safety, he said he was waiting for MH staff. Unfortunately, it appears to meet elements of refusal of cell assignment. DOC indicated that they would not have infringed him if he had told staff that he was in fear.	No Violation of Policy
117.	Complainant was attacked but DOC didn't investigate and instead he was charged with the	Video no longer exists. Reviewed medical records from period immediately after	Unable to Substantiate

	assault. He was placed in IMU for 90 days and DOC falsified information during the hearing. He reports that staff lied saying that the video showed him pushing the other person, but that is false. He had injuries to his head that were not addressed by staff and failed to be taken into account by hearing officer.	incident and do not see any mention of head injury. Cannot find evidence to substantiate his allegation.	
118.	Complainant was given a cell confinement sanction of 10 days. He was told that he could only have 30 minutes a day to be out for a phone call, to shower and to get water. The cells at Stafford are dry cells. One day he was out of his cell to get water so he could make the juice packet with his lunch and the CUS saw him and wrote a major infraction for violation of sanctions. Believes this is retaliation because he was outspoken about the pepper spray incident that happened in front of his unit.	Sanctions were suspended; no impact to incarcerated individual. Already monitoring disciplinary issues out of SCCC and considering future report.	Lack Jurisdiction
119.	Complainant was infraacted for a positive U/A. The hearing and appeal procedures were not done according to policy. The U/A was done with cross contaminants around. The hearing officer did not look at all the evidence presented and did not act in a professional manner when hearing the infraction and sanction. Complainant's appeal was denied and the associate superintendent affirmed the guilty verdict.	OCO appeal. Raised the procedural issues with SCCC admin and DOC Disciplinary Program Manager, but they declined further action. OCO does not have proof of the procedural violations, but it appears DOC would not have overturned regardless. Consider for future report regarding SCCC discipline.	Unable to Substantiate
Washington Corrections Center			
120.	Complainant states that for his DOSA revocation hearing, he was denied necessary witnesses, including his treatment provider, to demonstrate compliance with treatment. He attempted to send in appeals, but none were received until the last one, which was returned as untimely. He also has received credit for only five months.	Case was reviewed by DOC Hearings Unit Supervisor. Person was allowed witnesses, including treatment provider. Complainant sent other communication, just not appeals. Records Unit needs to review time.	No Violation of Policy
121.	Complainant was placed in segregation originally for a pending infraction investigation. The infraction	OCO appeal. Reviewed case. OCO cannot dictate institutional placement. Complainant	Declined, Other

	was unsubstantiated but DOC is continuing to hold her in IMU and are recommending prohibited placement which would result in at least another six months in segregation, which would be detrimental to her mental health. She would like the prohibited placement lifted and to be able to return to general population.	has since transferred to CBCC and is out of IMU, the original request.	
122.	Complainant's husband doesn't know why he has been in IMU for 63 days. He has not been infraacted and is not under investigation.	Per 320.255, people can be placed in IMU for personal safety. Spoke to wife, relayed husband in IMU for personal safety reason, facility plan at HQ for review. Provided email for self-advocacy.	No Violation of Policy
123.	Reports poor treatment due to his religion, including being forced to cut off his dreads despite their religious significance to him.	OCO appeal. Prior legal research does not indicate that cutting dreadlocks when not directly tied to a person's religious practices is a violation of rights. In this case, dreadlocks are not a key tenet of the person's religion. Gave CLS' address if they want to pursue this further.	No Violation of Policy
124.	CO gave complainant a UA that came back positive for meth. The CO told him it would be sent to the lab for re-testing. A few days later, the complainant asked him if he would still like his UA to be sent to the lab. He said yes and filled out the paperwork. Sergeant said that he should have signed it immediately after he had given the UA. Complainant says that this is a violation of DOC Policy 420.380 because they didn't process the specimen following the chain of custody assurance.	DOC overturned the infraction with the help of OCO.	Assistance Provided
125.	Complainant was diagnosed with cancer. DOC sent him out for an ultrasound. Upon return, he had to be put in quarantine per new policy. He was quarantined with two other people in a cell and one on the floor. They are from all different counties, coming in from receiving. Cancer makes him high	This person was later released.	DOC Resolved

	risk for COVID-19 so he doesn't want to be in a cell with others. He is requesting to be released.		
126.	Complainant believes his property has been misplaced as he is unable to confirm that it is still in the property office. He will be released soon and is asking for assurance that his property is still being held.	Grievance response received after complaint was filed indicates that his property was returned to him.	DOC Resolved
127.	Multiple complaints. Priority complaint is that CO's have been falsified info on his infractions, hearing officer is omitting this evidence as well. His statement was edited without his permission as well. This false information is being used to classify him to max custody.	No evidence exists to support the allegation; however, communicated with superintendent who relayed that he can earn back his good time through pathway. Very likely OCO will issue individual report related to MH/disciplinary concerns.	Unable to Substantiate
128.	Complainant was issued a pager ASR in 2017 and was told that he wouldn't have to apply for it again and that it wouldn't expire because it's a permanent disability. He was transferred to WCC and is now being told that they don't have pagers there and don't have the infrastructure for it.	OCO appeal. Agree with OCO staff that OCO cannot mandate pager system. Contacted DOC regarding PREA notification; doorbell should also have light function for hearing impaired.	No Violation of Policy
129.	Complainant cannot get information from DOC staff. He is wondering if he is going to be released on his upcoming ERD. He shared that he is in IMU after being released as part of rapid reentry and getting a dirty UA. He would like info about his release date and access to DOC staff support for release planning.	Complainant was released back into the community soon after contacting our office.	DOC Resolved
130.	Complainant's husband is MI2 classification but is being housed in medium and closed custody cell, a two man cell with three men in it for 23 hours a day with no masks or social distancing possible. The COs also walk around without masks. He has been at WCC for four months due to COVID-19 restrictions. He is approved for OCC. He has not been allowed educational course materials or text books to spend his time. He doesn't have video tablet capability since WCC is	OCO substantiated that there were three people assigned to one receiving cell. OCO assisted in obtaining books from storage during monitoring visit. Confirmed that education and tablets are not provided in receiving. Could not substantiate mask concerns. Complainant's husband moved to OCC after OCO's monitoring visit.	Assistance Provided

	not his final institution. Complainant wants him to be moved to OCC.		
131.	Complainant was told that they will be transferring him to another facility because of two infractions. He does not feel safe at other facilities and doesn't want to be transferred due to these safety issues.	DOC kept this person at the facility as was his wish when facing new placement.	DOC Resolved
132.	Complainant reports that mental health has not provided services to him. Alleges that mental health's grievance response was false – that he has not been seen seven times by MH.	Confirmed that complainant is now receiving mental health services.	Assistance Provided
133.	Complainant wants a classification demotion from medium to close custody and would like to get a single cell because of his mental health condition.	Alerted DOC MH to his request for single cell assessment. Alerted DOC health services re: need for HSR for orthopedic shoes. Provided referral info for DRW.	Information Provided
134.	Complainant wants infractions dismissed because he says his due process rights were violated per WAC 137-28-270. Also, he was found not guilty of the infraction for aggravated assault because CO said that he didn't see him strike, which means he should also be found not guilty of the IGN for assault. He's appealed them.	Disciplinary packet has evidence of assault. Did not meet standard for aggravated assault, so that is why he was found not guilty of aggravated assault, but still qualifies as assault due to injuries to staff.	No Violation of Policy
135.	Received infractions for behavior while in the midst of self-harm.	Refused cell placement in IMU. After alleging threat of self-harm, appropriately taken to medical staff for assessment. However, it still meets the definition of the infraction of refusal of cell assignment.	No Violation of Policy
136.	Complainant was infraacted for UA testing positive for multiple drugs. He believes policy was not followed because he was not allowed to wear gloves or wash hands and he was only allowed to seal the sample the next day. Received 30 days cell confinement and loss of 30 days good time. He would like the 30 days of good time back.	The procedural violations do not have a bearing on the guilty finding. According to DOC staff, the sample's initial seal was done right away. Unclear how not wearing gloves or washing hands would result in a positive UA test for multiple drugs.	No Violation of Policy
137.	Complainant's loved one is awaiting transfer to a different facility. She believes he is experiencing	No grievance related to staff conduct or retaliation was in the system. Provided	Information Provided

	retaliation because he has called out COs for not following policy. A cell door closed on him and he had to go to medical.	information on filing a grievance and how to get assistance with medical if needed.	
138.	Complainant says he is being treated inhumanely in Shelton's isolation unit. He would like a civil claim form from Seattle's risk management department. He would like to know the daily dollar amount he can justifiably request from the city of Shelton because he plans to file a claim for damages. He would also like to file a claim against the DOC for inhumane treatment.	Reviewed DOC records; appears he has moved several times and is no longer in quarantine unit. Provided self-advocacy information regarding tort claim.	Information Provided
139.	Complainant reported many issues related to infractions, but not specific to which infraction he would like us to review or the evidence that it was false/wrongfully decided.	Requested additional information from complainant regarding which infraction he would like us to review as he has many; he did not respond for over a month. Will open a new case if he does respond in future.	Declined
140.	Complainant was diagnosed with chronic pancreatitis. Complaining of severe pain, can barely walk, something feels swollen inside.	OCO appeal. Researched his grievance and related records for 2020. Cannot substantiate, but asking Dr. David to follow up with medical staff to ensure his medical concerns have been addressed.	Unable to Substantiate
141.	Complainant has been repeatedly denied promotion to general population. Believes he is being targeted and intentionally prevented from going to GP.	OCO appeal. Concern was that he was still in max custody, but review indicates he is now at close and transferred to WSP.	DOC Resolved
Washington Corrections Center for Women			
142.	Complainant terminated herself from TC due to what she felt was a toxic and vindictive environment. She received a 557 which is a loss of five custody points. She qualifies for minimum custody however she is housed in CCU.	She will move to medium custody due to points then back to minimum. Due to the issues she has raised HQ will implement new TC processes	Assistance Provided
143.	Complainant reported that naked women in the bathroom are visible from the dayroom. Multiple COs have said they can't fix it and it's not their problem. Complainant received infraction for a 210 because she went to seek out a shift lieutenant for assistance.	The 210 infraction will be removed from the record.	Assistance Provided

144.	<p>Caller reports ongoing harassment. She was terminated from Graduated Re Entry (GRE) and not told until the day she was supposed to leave. She was infractioned for filing a false PREA, although she believes the PREA investigation was poorly done. Since these incidents, she has received multiple general infractions that she believes are retaliation and harassment.</p> <p>She wants the PREA investigation to be reviewed and the serious infraction dismissed.</p>	<p>No violation of policy could be determined. However, DOC agreed to meet with complainant in an effort to resolve some of the concerns.</p>	No Violation of Policy
145.	<p>Complainant was attacked by another inmate who came up to their tier. Both were taken to segregation and complainant was charged with an assault and fighting infraction. The person who attacked her only received a fighting infraction.</p>	<p>The assault charge was dismissed, they were able to move from segregation a few days early and resume programming.</p>	Assistance Provided
146.	<p>Incarcerated individual was in TC and opted to leave program. She was demoted to close custody despite having enough custody points to avoid custody demotion. Concerned that DOC has not followed policy in demoting her and that she is being treated differently than others who have left TC and not been demoted.</p>	<p>DOC did not violate policy by issuing a 557 infraction for failure to program. She is being moved to minimum security.</p>	No Violation of Policy
147.	<p>When CO called complainant to get her lunch, CO said "come get your lunch patient monkey." Another CO was told and laughed. Complainant grieved this and it was resolved informally. DOC gave the CO an informal warning and said that the complainant should be happy with that conclusion. DOC closed the grievance and complainant said that she is not comfortable with that outcome because the CO continues to degrade incarcerated people.</p>	<p>OCO held several meetings with DOC management about this case and its adverse impacts. DOC agreed to address the concerns raised in this case systemically by working on processes and procedures moving forward.</p>	Substantiated
148.	<p>DOC keeps trying to take complainant out of her programming and move her into TC even though it isn't in her J&S and she already completed it in 2015. Threatening to demote or serve her with a major infraction if she doesn't go to TC.</p>	<p>She is not in the TC community. Her J&S does indicate Chemical Dependency programming must be completed if necessary.</p>	No Violation of Policy

149.	Complainant was found guilty of a dirty UA due to her medication. She has taken Zoloft (sertraline) for six years. She has always received a pass (DOC 420.380) because Zoloft causes false positives for benzodiazepines. This time staff did not honor the pass because the form had been revised in March. Kiosk message indicates that the form will not be active until after COVID-19. DOC took 30 days of all electronic communication (phone & email). She has a daughter with COVID-19 and a father in his final stages of liver failure, and she is unable to contact either of them due to the sanction.	Spoke with DOC HQ who informed us that cup was changed in 2017 so that Zoloft would no longer trigger false positive, but form wasn't updated until 2020. Only having this problem at WCCW. Cannot change this outcome.	No Violation of Policy
150.	DOC is forcing complainant to take her seizure medications, but she wants to discontinue them. The meds cause joint pain, sleepiness, and shortness of breath. Doctor told her that if she refuses medications, DOC will pursue an involuntary medication order. DOC has also threatened to move her to TEC Acute, although she doesn't have a mental health condition. Complainant has brain condition that renders her unable to handle the sound from a loud TV, but DOC has restricted her from having or using earbuds.	OCO appeal. Said her issue wasn't the medications, but the TV volume. Relayed that she should work with her CUS and MH counselor regarding TV volume.	Information Provided
Washington State Penitentiary			
151.	Complainant filed a staff misconduct grievance on PREA coordinator. She was sexually harassed and nothing was done about it. PREA coordinator determined that the harassment does not meet the definition of a PREA violation. Complainant believes the denial is intentionally discriminatory.	OCO appeal. Agree with PREA Coordinator that no violation of PREA policy. Sent PREA definitions. Also followed up to ensure her safety was ensured (staff relayed that the other person is not housed in the same unit and that complainant could not identify the second individual).	No Violation of Policy
152.	Complainant is being retaliated against by CO. CO is not letting her out but is letting others out to do things like take out the trash and get ice. She says the CO stated she can do that during work hours but she is busy during work hours and cannot get personal things done. This is ongoing.	OCO appeal. Cannot find relevant grievances. Person was moved soon thereafter.	Lack Jurisdiction

153.	Complainant said he was put under investigation and removed from programming. He appealed the decision. Now he is in maximum custody and he believes that is it because people with safety concerns and mental health concerns are housed together in the BAR units. States that if they were housed separately he would be able to be in general population.	The infraction and max custody placement were done per policy.	No Violation of Policy
154.	DOC has infringed and is punishing complainant for utilizing the grievance process. DOC violated policy 460.000 and WAC 137-28-210 – “Officer may not preside over the disciplinary hearing when they are related to the concern, involved, are about, or pertain to the offender, the hearings infracting officer, the witness or the victim.”	DOC followed the correct procedure and provided this person access to withdraw any grievances over the limit. PREA reports were sent to HQ for review.	No Violation of Policy
155.	Complainant was sent to WSP and demoted to close custody. He had notified DOC of his safety concerns regarding gang members in general population. He was told it would be less of a concern in the newly assigned unit. He was assaulted the day he arrived. He is still being treated for serious injuries which may be permanent. Complainant is also concerned that DOC staff response to the attack was delayed.	Unable to substantiate staff involvement with the assault. Appears that he was treated and the assault was broken up per policy and he is currently awaiting transfer to a safe harbor unit.	Unable to Substantiate
156.	Complainant received four 557 serious infractions for failure to program. He states that according to RCW 72.09.100 subsection 2 the programming that they infringed him for was voluntary. He lost seven months of good time which he would like to get back.	OCO appeal/closed case review. OCO did not find that the issue was handled improperly and found no evidence that supported that allegation.	No Violation of Policy
157.	Complainant has been in IMU for 18 months. HQ denied his release from IMU again at his last review, even though he completed all his expectations. HQ stated it is because no viable placement options are available. He believes this is related to STG concerns. He worries that DOC will keep him in IMU until his release from prison in one year.	Communicated with DOC: no current safe placement. Complainant should communicate with WSP I&I. May include this concern in future systemic report regarding excessive IMU stays.	No Violation of Policy

158.	Complainant was infracted for conspiring to introduce contraband. No drugs found. He thinks that this is wrong because he wasn't able to have access to the phone calls and he never had a visit. He doesn't understand how this would have happened.	OCO appeal. Reviewed prior case and believe OCO staff did a thorough review. Provided self-advocacy information.	No Violation of Policy
159.	DOC medical is denying her access to hormone therapy treatment (HRT - Hormone Replacement Therapy). She has appealed the decision of the GDCRC and has done everything she can to self-advocate.	Ensured that she is now able to access HRT through her primary care provider.	Assistance Provided
160.	Complainant says he has been harassed by staff at WSP since he arrived because he does not respond to or use his last name. Instead he prefers to use his first name or full name.	OCO appeal. OCO AO took appropriate action of communicating with DOC staff. OCO cannot enforce staff use of his first or full name rather than last name.	Declined
161.	Complainant reports that he was infracted for allegedly stealing the property of one of his cellmates who had been relocated due to self-harm. He believes he was infracted because of the CO's opinion.	DOC is following WAC 137-25-030: the person responsible for the area in which contraband (including stolen goods) is found is considered responsible for the contraband. This incident shows systemic concerns with property pack outs.	No Violation of Policy
162.	Complainant was denied a donation of religious oils to the Nation of Islam community under policy 440.000 (personal property), when it should be allowed through policy 560.200 (religious property, etc.). He has appealed twice. He wants oils to be kept on property shelf until the issue is resolved and ultimately wants the community to have access to the oils.	Unable to locate any information regarding this incident. Requested additional information from complainant in order for us to investigate.	Unable to Substantiate
163.	Complainant was put in COA. He was made to clean feces on the walls after a mental health incident. Denied food and medical for three days. Would like to leave WSP. Reports incident with staff where no separatee was filed after the incident. Wants OCO to review the incident for any violation of policy.	Explained that there is a lack of evidence to support these claims. OCO is currently working to make recommendations to DOC about improving mental health care in their facilities.	Unable to Substantiate

164.	Complainant's loved one was placed incorrectly and ended up in segregation for two months awaiting transfer. Complainant states that other people were transferred much faster than he was and that they couldn't get in touch with anyone at HQ to finalize his plan.	It appears that due to limited placement options, he was held in IMU awaiting space at a facility that could meet the safety needs noted.	Information Provided
165.	Complainant has untreated medical issues. Spinal cord fusion was done many years ago, but a screw is broken inside of his neck. DOC documented it and told him to wait. He's waited 2.5 years. He is experiencing pain, numbness down the side of his right leg, and can't feel upper parts of arm, forearms and finger tips. When he turns his neck left to right it causes inflammation, swelling and pinching of the spinal cord. He has tried to work with medical to no avail.	Complainant appears to have had good surgical outcome per DOC. Alleged delay in care that occurred 2.5 years ago may be considered for possible patient safety review. OCO unable to waive DOC copy fees.	Assistance Provided
166.	Complainant alleges that several nurses were negligent due to racial and political differences. When he commented on something political on the TV, staff made degrading comments about his beliefs and ignored his call button requests. His wound care worsened due to these actions. Complainant is Native American.	Discussed with DOC facility and HQ leaders. Staff deny recollection of conversation. No objective evidence to support comments made. Per MARs he is receiving care as prescribed.	Unable to Substantiate
167.	Complainant is in IMU and wants to be able to get out to General Population. He will have to complete DOCART in order to level out of MAX custody. However, the waitlist is so long that no one knows when he'll be able to complete that.	Confirmed that complainant is in the DOCART programming. Max placement appropriate due to two assaults on other incarcerated individuals.	DOC Resolved
168.	DOC should not be housing protective custody incarcerated individuals with incarcerated individuals with mental illness in the BAR units. This is a violation of the Constitution. Complainant was kicked out of the RTU due to a CI statement that he was going to stab him and now he can't return to the RTU.	No violation of Constitutional rights, but OCO agrees that housing RTU and PC together may not be preferred. No RTU policy currently exists for exclusion criteria.	Substantiated

169.	Caller has had all of his personal effects removed from his cell without due process or explanation.	Appears that he was covering his cell window with legal documents. During transfer from COA to IMU, he wasn't given his legal materials until after he was transferred to IMU. He has since been given his legal documents.	DOC Resolved
170.	Complainant requests OCO assistance in correcting behavior observation entries (BOEs) from prior years that do not conform to policy.	Teleconferenced with complainant to explain that BOE policy revision was not retroactive. Policy should be clarified.	No Violation of Policy
171.	Complainant's son has been in IMU for over a year. She reports that he is not violent and that he has completed all requirements to be transferred but DOC has not moved him.	Complainant asked to withdraw this case.	Declined, Other
172.	Husband has been in IMU for six months. Complainant would like to see if DOC would be lenient on the six month phone restrictions due to COVID.	Contacted DOC. DOC says it's following DOC Policy 460.050(A)(3), which states, "For any offense, up to the maximum sanction may be imposed...regardless of whether it is a first or subsequent offense."	No Violation of Policy
173.	Property confiscated by DOC staff that complainant was attempting to send out to a friend on his approved visitor list.	Property confiscated as it was being sent to a person who was posting his and others' items for sale to the public.	No Violation of Policy
174.	Complainant is repeatedly being threatened by other incarcerated individuals at both WCC and WSP.	Moved to different facility.	DOC Resolved
175.	Complainant alleged that DOC infringed her for another person paying for her tuition, even though they had previously approved it. She has lost her ability to complete the distance-learning-certificate.	Tuition paid for by family member of another incarcerated individual at the facility; no evidence that staff knowingly approved it. DOC cannot compensate or re-enroll for free.	No Violation of Policy
176.	Complainant states that he was found guilty of two infractions, a 714 and 203 for sending out a drawing to a friend and claims he was not given a fair and impartial hearing. His claim that he was not asking for money or anything of value for the drawing was ignored and that DOC never tried to prove he wasn't friends with the women whose names are on the drawing who later became victims.	Appears to meet very low "some evidence" standard; he was sending drawings with his victim's name to a person who posted them for sale. OCO agrees that it is not established that he knew that the other person was selling them; however, it still appears to meet the low standard of evidence.	No Violation of Policy

177.	Complainant had a reaction to the adhesive on the dressings that medical used. He has begun having fecal matter underneath the dressings. The dressings are too close to his rectum and they collect fecal matter.	Contacted WSP HSM. HSM indicated he would meet with the medical provider and nursing supervisor to address this.	Assistance Provided
178.	Complainant was injured in 2005. He did not undergo appropriate therapy and has lost 30% of his grip strength in his right hand as a result. He would like to receive proper medical care to address this.	Closed case review. Handled appropriately by ERO. No grievance filed and had not sought treatment for his symptoms.	Assistance Provided
179.	Complainant alleges that DOC has not honored current HSRs. Worries that HSRs will be removed.	Case resolved by AO under a different case.	Assistance Provided
180.	Complainant alleges violation of DOC policy 300-380. He wasn't present at the hearing. He never signed or received DOC form 05-794. He never had a unit team or mental health counselor. A review was done on him at a facility that he was not housed at. 05-794 DOC waiver form was not given to him before his classification review. He was not present at the classification hearing. He wasn't present for the review at the facility that he wasn't at.	Substantiated the policy violation and producing additional report. However, MI3 can be housed with medium custody.	Substantiated