

PREA AUDIT REPORT Interim Final
COMMUNITY CONFINEMENT FACILITIES

Date of report: February 23, 2016

Auditor Information			
Auditor name:	Charles E. Owens (SGT) Hawaii Department of Public Safety (PSD)		
Address:	919 Ala Moana Blvd. Suite #116, Honolulu Hawaii 96814		
Email:	Charles.E.Owens@hawaii.gov		
Telephone number:	808-266-9591		
Date of facility visit:	November 16-17, 2015		
Facility Information			
Facility name:	Ahtanum View Work Release		
Facility physical address:	2011 S 64 th Ave, Yakima, Washington 98903		
Facility mailing address:	<i>(if different from above)</i> Click here to enter text.		
Facility telephone number:	509-573-6313		
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Community treatment center	<input checked="" type="checkbox"/> Community-based confinement facility	
	<input type="checkbox"/> Halfway house	<input type="checkbox"/> Mental health facility	
	<input type="checkbox"/> Alcohol or drug rehabilitation center	<input type="checkbox"/> Other	
Name of facility's Chief Executive Officer:	Richard Graziano		
Number of staff assigned to the facility in the last 12 months:	26		
Designed facility capacity:	120		
Current population of facility:	Contracted for 60		
Facility security levels/resident custody levels:	Community		
Age range of the population:	21-67		
Name of PREA Compliance Manager:	Richard Graziano	Title: Community Supervisor	
Email address:	Richard.graziano@doc.wa.gov	Telephone number: 509-573-6313	
Agency Information			
Name of agency:	Washington State Department of Corrections		
Governing authority or parent agency:	<i>(if applicable)</i> Click here to enter text.		
Physical address:	7345 Linderson Way S.W. Tumwater, Wa 98504		
Mailing address:	<i>(if different from above)</i> Click here to enter text.		
Telephone number:	360-725-8800		
Agency Chief Executive Officer			
Name:	Dan Pacholke	Title: Secretary Department of Corrections	
Email address:	Pacholke, Dan J. <djpacholke@DOC1.WA.GOV>	Telephone number: (360) 725-8810	
Agency-Wide PREA Coordinator			
Name:	Beth L. Schubach	Title: WADOC PREA Coordinator	
Email address:	Schubach, Beth L. <blschubach1@DOC1.WA.GOV>	Telephone number: 360-515-8388	

AUDIT FINDINGS

NARRATIVE

A PREA Audit was coordinated by Hawaii Department of Corrections (HIDOC) and Washington Department of Corrections (WADOC) for the Ahtanum View Work Release center on November 16-17, 2015. The audit was conducted by the State of Hawaii Department of Public Safety (PSD) certified PREA Auditor Charles E. Owens (SGT) with Tom Lindsey (LT), who served as Support Staff. Six weeks prior to the on-site audit, the pre-audit questionnaire and documents were provided for reviewed. Four weeks prior to audit, coordination and follow up review of information was completed between the PSD and WADOC PREA Coordinators.

Two weeks prior to the audit, phone interviews were conducted with Washington State Secretary of Corrections Dan Pacholke, State PREA Coordinator Beth Schubach, and State Contract Coordinator Gary Banning to determine Washington State compliance with PREA standards.

Washington State PREA support staff for this audit:

- Beth Schubach, WADOC PREA Coordinator
- Cathy Baker, PREA Coordinator Secretary
- Lori Scamahorn, PREA Specialist
- Lori Morrow, Correctional Specialist
- Richard Graziano, Ahtanum View Work Correctional Supervisor (Administrator)

Ahtanum View Work Release center is a 60 bed (52 males and 8 females) community reintegration facility with 26 full time staff and four on-call staff:

State Employees

1 Community Corrections Supervisor (administrator)
1 Administrative Assistant 3
1 Community Corrections Officer 3 (Facility Classification and Probation Officer)
1 Community Corrections Officer 2 (Probation Officer)
1 Food Service Manager
2 Cooks
2 Maintenance Repairman

Contract Staff

1- Director
1- Assistant Director
1- Administrative Assistant
3- Resident monitor 2
8- Resident monitor 1
3 Chemical dependency workers

On-Call

4- Resident monitor 1

On-Call:

- 6 Corrections Officers
- 1 Cook

On November 19, 2015 a tour for the facility was conducted with the Ahtanum View Work Supervisor / PREA compliance manager Richard Graziano. Interviews were conducted on-site with facility supervisors, staff, one officer from each shift and 11 inmates.

During the tour of the facility it was noted that 32 cameras supplement security observation with exit doors monitored via direct observation from staff. None of the cameras look into the bathrooms or shower area.

Ahtanum View Work Release does a good job with the amount of staff and resources. The facility has adequate technology support for line staff such as video coverage of common area, entrance or exit doors, dining area, and classrooms. Line staff do not log activities with electronic systems for documentation. However, they do have appropriate access to offender management network information system (OMNI) for resident management.

The local Police Department investigates criminal allegations of sexual abuse or sexual assault and Internal Affairs investigates administrative allegations.

Ahtanum View Staff is well-trained in the PREA requirements, they were able to answer all of the PREA Audit interview questions for Random Staff and Specialized Staff. They had a good insight into staff responsibilities and understood their role in mentoring staff and residents in PREA. No staff have any knowledge of PREA concerns at this facility.

Staff and inmates were respectful and that they felt safe at this facility. Interviews with inmates went well. Residents know PREA, have seen the videos and review printed material on walls by the call stations. No residents have any knowledge of PREA concerns at this facility

DESCRIPTION OF FACILITY CHARACTERISTICS

Ahtanum View Work Release



<http://www.doc.wa.gov/facilities/AVWRdescription.htm>

Ahtanum View Work Release
2009 S 64th Ave.
Yakima, WA 98903
(509) 573-6318
CAPACITY: 120

Ahtanum View Work Release is a 60-bed facility that accommodates both male and female offenders. All offenders work in the Yakima area and pay room and board, restitution, legal fees, and family support when applicable. Originally, the work release was located at 1704 Grant Street near Yakima Valley Community College. It opened in Oct 1972 and expanded to its present location in 2010. Since its inception, it has become an intricate part of both the business and law enforcement communities in Yakima. Approximately 3500 residents have successfully transitioned from this program to the surrounding community.

WORK PROGRAMS

All residents are expected to secure employment within ten working days of arriving at the facility. Both state and contract staff work with each offender in order to develop an individualized case plan designed to address the individual needs of the offender.

TREATMENT/SELF HELP PROGRAMS

Programs offered at the facility include employment counseling, drug and alcohol treatment, anger management, and family and personal counseling.

COMMUNITY INVOLVEMENT

A strong community volunteer/sponsor program has for many years been a major component at Ahtanum View Work Release. Reintegration of the offender to the community is the primary mission.

SUMMARY OF AUDIT FINDINGS

When the on-site audit was completed, a “out-brief” meeting was held with the same staff who attended the “in-brief”. No final rating was given at that time; however, the overall audit process was discussed. The Auditor was provided with extensive and lengthy files of documentation, Pre Audit Questionnaire, Auditor Compliance Tool, State Policies and Procedures, and operations memos prior to the audit, in an effort to support a conclusion of compliance with the PREA standards. During the course of the on-site visit, staff were found to be courteous, cooperative, and professional. All areas of the facilities toured were found clean and well maintained.

The auditor got a good outline of this Zero Tolerance Policy, beginning with 1) administration and designation of staff, 2) offender management and services, 3) offender screening and assessment, 4) reporting allegations, 5) investigation, 6) training and education and 7) data collection followed up with additional administrative considerations. Staff participation in the program is essential in implementing, monitoring and improving the Zero Tolerance Policy while identifying aggressive behavior and taking the necessary steps to ensure the safety and security of the correctional institutions. Washington’s Prison Rape Elimination Act Policy is essential to the operations and is adhered to at all times to ensure continuity and professionalism throughout the system as confirmed by observations, review of documentation and interviews with staff, contractors, volunteers and inmates. Through discussions with staff and inmates, observation of bulletin boards, posters, handouts and materials, review of inmate and staff handbooks, and personnel policies it is clear that Ahtanum View Work Release Center is committed to Zero Tolerance of sexual abuse and sexual harassment and they are enforcing the spirit of PREA in Corrections.

Of particular note is the staff and inmates knowledge of the zero tolerance of sexual abuse and sexual harassment when interviewed by the auditor. The Zero Tolerance Policy is posted in the housing units and the subject is a major part of training to new staff and existing staff on a regular basis via a computer data base training system that questions staff on lessons learned during the training. Because of this I have rated Ahtanum View Work Release Center exceeding one standard **115.231 Employee training.**

At the conclusion of the out briefing the Auditor thanked the staff for their hard work and commitment to PREA.

Number of standards exceeded: 1

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 0

Standard 115.211 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC Policy 490.800, Prison Rape Elimination Act (PREA) outlines the Washington Department of Corrections (WADOC) Agency’s zero tolerance policy regarding sexual abuse, sexual harassment and retaliation. The Agency has an upper level, Agency Statewide PREA Coordinator who states she has sufficient time, and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities in the WADOC. The organization chart has the position identified as a Correctional Manager/PREA, and the PREA Coordinator reports to the Assistant Secretary of Prisons Division. The Ahtanum View Work Release has identified a PREA Compliance Manager with sufficient time and authority to coordinate, develop, implement, and oversee the agency’s efforts to comply with the PREA standards at the Facility level. While conducting interviews of staff and residents, all were aware of the agency’s zero tolerance policy. During the tour of the facility, the Auditor observed posted information throughout the facility regarding the agency’s zero tolerance policy regarding sexual abuse, sexual harassment and retaliation.

Standard 115.212 Contracting with other entities for the confinement of residents

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800 PREA policy, states that any new or renewed contracts for the confinement of residents will include the requirement that the contracted facility comply with federal PREA standards and allow WADOC to monitor for PREA compliance. It also states that the Department will not enter into contracts with facilities that fail to comply with PREA standards, except in emergent situations. WADOC conducts audits of all county jails that currently contract for the confinement of residents to ensure compliance with the federal PREA standards. All confinement contracts are reviewed and updated annually. All contract language provided indicated that all contracts with agencies or other entities included language of the entity’s obligation to adopt and comply with the PREA standards. WADOC states they monitor to ensure that the contractor is complying with the PREA standards. An interview with the Contract Administrator demonstrated they were aware of this requirement and it is in practice.

Standard 115.213 Supervision and monitoring

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800 Policy addresses this standard. Ahtanum View Work Release has demonstrated compliance with all elements of this standard. While touring the facility, the Auditor observed unannounced rounds being conducted throughout the facility. During interviews of staff, they acknowledged that supervisory staff conducts unannounced rounds on a regular basis. A review of logs verified that these rounds occur and are being documented.

Standard 115.215 Limits to cross-gender viewing and searches

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 420.310 and 420.312 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard, which requires staff of the opposite gender to announce their presence when entering housing areas. The Auditor observed staff announcing themselves prior to entering a housing area. A review of policies and procedures, as well as interviews with staff and residents, demonstrated all residents are able to shower, perform body functions and change clothes without non-medical staff of the opposite gender being able to view their genitalia, breasts, or buttocks, including during routine cell checks.

Standard 115.216 Residents with disabilities and residents who are limited English proficient

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 310.000, 450.500, 690,400 and 490.800 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. During the on-site visit of the facility, there were no residents with disabilities or with limited English proficiency. WADOC has taken significant steps to ensure that any offender, regardless of physical limitation or language barrier, has equal access, opportunity, and ability to benefit from the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA signs and bulletin boards were displayed in prominent areas throughout the facility, which included information in both English and Spanish languages. PREA Pamphlets are also available for Spanish and/or Residents with limited intellectual capabilities. Interpreter services are available for both deaf and limited English proficient Residents.

Standard 115.217 Hiring and promotion decisions

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 810.800 Policy, Recruitment, Selection and Promotion outlines that a criminal background check will be completed for all promotional candidates and external candidates in the hiring process. Ahtanum View Work Release has demonstrated compliance with all elements of this standard. Documentation was provided, which demonstrated that staff, contractors, and volunteers received a background check prior to having contact with residents. Per Policy ,Human Resources (hereinafter “HR”) will review promotional candidates and former department employees on the Offender Management Network and the PREA database for information regarding substantiated allegations of sexual misconduct, or any resignation pending investigation of alleged sexual misconduct, and provide the review results to the Appointing Authority. The HR staff member confirmed that all employees have an affirmative duty to immediately disclose PREA related misconduct through their chain of command and material omissions or materially false information shall be grounds for termination. All new employees, contract staff and volunteers are required to complete a sexual misconduct disclosure form that asks about prior sexual misconduct/harassment.

Standard 115.218 Upgrades to facilities and technologies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. Recently, no major improvements or additions have been made to the facility; however, the Auditor did suggest the installation of Video Closed Circuit (VCC) cameras in key security areas that are not directly monitored by security staff. Management will evaluate priority areas as new equipment is made available.

Standard 115.221 Evidence protocol and forensic medical examinations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.850, 610.025, 600.00 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. All staff interviewed could describe what actions would be taken to protect evidence for investigators. Ahtanum View Work Release has an agreement with the local Police Department, which is the primary investigative agency for criminal sexual abuse allegations. WADOC also has an agreement with the Office of Crime Victims Advocacy (OCVA) to field calls from residents for advocacy services. OCVA staff will screen the call and transfer the caller to a geographically appropriate victim advocacy organization. A contract with OCVA and WADOC indicated that OCVA will provide services to survivors of sexual abuse by ensuring a response to the hospital during a SANE exam, presence during all investigatory interviews and legal proceedings, and will provide emotional support, crises intervention, information, and referrals. If a report were received that sexual abuse had potentially occurred, the Police Department would be contacted and would be responsible for all evidence collection at the facility. All criminal sexual abuse investigations are referred to the Police Department. Ahtanum View Work Release stated that during this audit reporting period they have not had an incident of sexual abuse that required an offender to be taken to the hospital for a forensic medical examination or contact with a victim advocate. Staff has been trained in evidence collection and preservation to maximize the potential of collecting usable evidence, which they were able to articulate during interviews on-site. During the tour of the facility, posters for OCVA were posted in living units and other areas. residents were aware of this service.

Standard 115.222 Policies to ensure referrals of allegations for investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC Policy 490.860 PREA Investigation and 490.850 PREA Response address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. Provided documentation showed all allegations of sexual abuse and sexual harassment must be investigated and the PREA Coordinator will review all allegations, determine which allegations fall within the definition of sexual misconduct, and will forward those allegation to the appropriate appointing authority for investigation. 490.860 PREA Investigation policy outlines the agency’s requirement to investigate all allegations of sexual abuse and sexual harassment, and that all allegations that appear to be criminal will be referred for law enforcement investigation. All allegations are referred for investigation to the appropriate authority, per agency memos. WADOC is responsible for administrative PREA investigations.. The local police are primary investigators for crimes committed in the Ahtanum View Work Release center. Interviews with staff showed knowledge of the requirement that all allegations must be reported and referred for investigation.

Standard 115.231 Employee training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC Policy 490.800 addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The agency requires all staff to complete an online PREA 101 curriculum that outlines the agency’s zero tolerance policy towards sexual abuse and sexual harassment, including; how to prevent, detect, and report incidents of sexual abuse and harassment; resident rights to be free from sexual abuse and sexual harassment; rights of staff and residents to be free from retaliation for reporting incidents of sexual abuse and harassment; dynamics of sexual abuse and sexual harassment in a confinement setting; common reaction of sexual abuse and sexual harassment victims; how to avoid inappropriate relationships with residents, and how to communicate effectively with LGBTI residents. This online PREA training with annual required testing is a great tool to reinforce requirements to staff. Training records were provided and reviewed by the auditor.

Standard 115.232 Volunteer and contractor training

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC Policy 490.800 addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The agency requires all contractors, and volunteers to complete an online PREA 101 curriculum that outlines the agency's zero tolerance policy towards sexual abuse and sexual harassment, including; how to prevent, detect, and report incidents of sexual abuse and harassment; resident rights to be free from sexual abuse and sexual harassment; rights of staff and residents to be free from retaliation for reporting incidents of sexual abuse and harassment; dynamics of sexual abuse and sexual harassment in a confinement setting; common reaction of sexual abuse and sexual harassment victims; how to avoid inappropriate relationships with residents, and how to communicate effectively with LGBTI residents. Volunteers who has not yet attended training are given a PREA Brochure and the state policies pertaining to PREA with critical information for them to understand and they must sign the PREA Acknowledgement form 03-478. Volunteer's signature acknowledged that PREA information was provided and they understand the agency's zero tolerance policy, the difference between sexual abuse and sexual harassment, as well as their rights to be free from retaliation for reporting such incidents.

Standard 115.233 Resident education

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC Policy 490.800 addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. As part of orientation, all residents received an orientation handbook at intake where they received PREA training upon arriving at the facility. Posters and materials are posted throughout the facility and in all areas where residents could congregate. During interviews with residents, they acknowledged that PREA information was provided and they knew the agency's zero tolerance policy, the difference between sexual abuse and sexual harassment, and how to contact an outside victim services agency, as well as their rights to be free from retaliation for reporting such incidents. The PREA bulletin board with Spanish and English PREA posters, related materials and information was up-to-dated. WADOC documents that residents participated in these education sessions, as required by the PREA policy.

Standard 115.234 Specialized training: Investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800, 490.860 and 880.100 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC initiated PREA investigator training in 2011 and updated it in 2013. Corrections Supervisors, must completed the online PREA 101 training, as well as the specialized PREA Investigations training, and an updated booster training for PREA in order to qualify for conducting investigations. The training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Standard 115.235 Specialized training: Medical and mental health care

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800, 610,025 and 880.100 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The Work Release facility does not have medical or mental health services available on-site. Residents assume personal liability for their own medical care as part of participation in the work release program. All medical or mental health services are provided by community providers at the resident's co-payment expense, unless services are required due to sexual abuse, at which time the agency would assume the liability.

Standard 115.241 Screening for risk of victimization and abusiveness

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.820 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC incorporated into their PREA Risk Assessments the requirements for the facility to ensure the initial assessment is completed within 72 hours and that additional screening occurs within the 30 days. The Auditor was impressed with how the agency developed an objective computer management screening tool that considers whether the offender has a mental, physical or developmental disability; age; prior incarceration; criminal history; prior convictions for sex offenses; whether the offender is identified as LGBTI or is other gender non-conforming; prior victimization; and the residents own perception of vulnerability.

Standard 115.242 Use of screening information

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 300.380, 490.820 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. All housing assignments are based upon the information obtained during the individualized intake assessment. During the audit, no transgender or intersex residents were identified; however if the facility were to have a transgender or intersex resident, then their placement and programming would be reassessed at least twice a year to review any threats to their safety. Housing decisions for transgender and intersex residents would be reviewed on a case-by-case basis. Transgender and intersex residents would shower separately by a private shower or when no private shower is available, allowing them to shower at a specific time when no other residents are using the shower.

Standard 115.251 Resident reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 320.255, 320.260 and 490.820 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC has made every effort to ensure multiple ways for residents to report concerns related to sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities. Residents can report PREA concerns via direct reporting to staff, kiosk, grievance, friends and family, attorney or third party agency. During interviews, all residents were aware of several ways to report sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities. Staff understood the procedure that requires them to report PREA concerns privately. During this audit period, there were no PREA reports received.

Standard 115.252 Exhaustion of administrative remedies

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.820 and 550.100 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC does not process PREA related allegations through the internal offender grievance program. All PREA complaints, regardless of the reporting source, are immediately forwarded to the appointing authority and investigated. While there are no time limits in reporting a complaint, internal process requires that any investigation that has been open for a period of 90 days be reviewed by the agency PREA Coordinator, and the appointing authority is responsible for updating the status and/or issues that need to be addressed. This allows for oversight of the investigation without restricting the investigation.

Standard 115.253 Resident access to outside confidential support services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC has an agreement with the Office of Crime Victims Advocacy (OCVA) to field calls from residents for advocacy services. OCVA staff will screen the call and transfer the caller to a geographically appropriate victim advocacy organization. The information is available to residents during the orientation process and WADOC indicated that OCVA will provide services to survivors of sexual abuse by ensuring a response to the hospital during a SANE exam, presence during all investigatory interviews and legal proceedings and will provide emotional support, crises intervention, information and referrals. During the tour of the facility, posters for OCVA were attached to PREA bulletin boards in all common areas and offices. During interviews, all residents were aware of this service.

Standard 115.254 Third-party reporting

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. There are multiple methods that can be utilized for third party reporting. Agency policy directs that regardless of how a report is received, it will be investigated. WADOC's website has a PREA section that is easily accessible by the general public, family, and friends of incarcerated residents. It describes PREA, how to report Sexual Misconduct, how residents can report Sexual Misconduct, what to do if someone is being threatened or victimized and how the investigative process works.

PREA information is posted prominently throughout the facility on PREA bulletin boards and near the phones describing how to report. Additionally, there are family brochures in both English and Spanish that outline the department's zero tolerance policy with contact information for the PREA Hotline and mailing address.

Standard 115.261 Staff and agency reporting duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 350.550, 490.800 and 490.850 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. Staff are trained to report any knowledge, suspicion or information regarding an incident of sexual abuse, sexual harassment that occurred in a correctional facility, regardless if it is part of the agency. WADOC requires all staff that receive PREA information to report directly to the appointing authority or duty officer only. During staff interviews, all staff were aware that they are prohibited from revealing any information related to a sexual abuse report to anyone other than, and to the extent necessary to, manage treatment, investigation, and other security decisions.

Standard 115.262 Agency protection duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.820 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The PREA Risk Assessment Policy requires information from the risk screening to be considered. The PREA Response Policy 490.850 requires immediate action to protect residents from sexual abuse. The facility complies with the Agency Protection Duties that outline staff responsibilities related to keeping an resident safe when it is learned that they may be at substantial risk of imminent sexual abuse. When a staff learns that an resident is subject to a substantial risk of imminent sexual abuse, the staff member is required to take immediate action to protect the resident. All staff interviewed knew and could describe what actions they would take if they received information indicating an offender was at imminent risk of sexual abuse.

Standard 115.263 Reporting to other confinement facilities

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.850 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. Report to other confinement facilities are completed by the appointing authority or facility administrator within 72 hours after receiving an allegation of sexual abuse. Ahtanum View Work Release has not receive any allegations of sexual abuse from or about a resident while housed at a different facility. All key staff interviewed knew and could describe what actions they would take if they received information indicating an offender was at imminent risk of sexual abuse.

Standard 115.264 Staff first responder duties

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 420.375 and 490.850 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. All staff from the Facility Director to random staff knew of their first responder responsibilities, that include separating the alleged victim and abuser, what steps to take to protect and preserve evidence, and to maintain confidentiality by only sharing information with those with the direct need to know. Tri-Cities Work Release had no reports of sexual abuse, assault or harassment during the audit period.

Standard 115.265 Coordinated response

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.850 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The PREA Response Policy states that each prison, work release, and field office will maintain a PREA Response Plan that provides detailed instructions for responding to allegations of sexual misconduct. The plan coordinates response to an incident of sexual abuse among first responders, supervisors, law enforcement, medical and mental health practitioner, investigators, and facility leadership. Interviews with the Appointing Authority, Facility Director, and Supervisor demonstrated knowledge and practice which further supported compliance with this standard. The facility practiced drills to test staff on their knowledge and procedures when dealing with this situation.

Standard 115.266 Preservation of ability to protect residents from contact with abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The WADOC collective bargaining agreement for the Washington Federation of State Employees allows the agency to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation or of a determination of where and what extent discipline is warranted. PREA Investigations policy 490.860 protects all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The policy states that when a PREA investigation is initiated, the appointing authority of the facility where the alleged victim is housed will monitor to assess indicators or reports of retaliation against victims and reporters, and the indicators listed may include, but are not limited to: disciplinary reports, changes in grievance trends, housing/program changes and reassignments, or negative performance reviews.

Standard 115.267 Agency protection against retaliation

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The WADOC collective bargaining agreement for the Washington Federation of State Employees allows the agency to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation or of a determination of where and what extent discipline is warranted. PREA Investigations policy protects all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The policy states that when a PREA investigation is initiated, the appointing authority of the facility where the alleged victim is housed will monitor to assess indicators or reports of retaliation against victims and reporters, and the indicators listed may include, but are not limited to: disciplinary reports, changes in grievance trends, housing/program changes and reassignments, or negative performance reviews. Policy indicates retaliation monitoring will occur for 90 days following the allegation or longer if the appointing authority determines it’s necessary. Interviews were conducted with the Director, Facility Director, and Supervisor regarding the agencies process to protect residents from staff retaliation. All were well able to describe retaliation monitoring and what actions would be taken if allegations of retaliation were received.

Standard 115.271 Criminal and administrative agency investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 400.360, 420.375, 490.800, and 490.860 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC conducts its own administrative investigations and an external agency conducts investigations that are criminal in nature. WADOC Policy on PREA Investigations indicated that investigations conducted by WADOC will be done thoroughly, promptly and objectively. All allegations that appear to be criminal in nature are referred to local and/or state law enforcement agencies for criminal investigation, per the PREA Investigation policy 490.860, and documented utilizing DOC Form 03-505- Law Enforcement Referral of PREA Allegation. The PREA Prevention and Reporting policy 490.800 states that PREA investigators will receive specialized training. A review of the training curriculum and

related policies indicated that all elements required by the standard are met. DOC PREA for Appointing Authorities training curriculum was supplied, which addressed credibility assessments and job aid. All investigative reports are maintained for a period of five years (hard copy) and electronic records are maintained for a period of 50 years. The state's archive records were provided as documentation. No reported PREA allegations were received during the twelve months preceding this audit.

Standard 115.272 Evidentiary standard for administrative investigations

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC conducts its own administrative investigations and an external agency conducts investigations that are criminal in nature. WADOC Policy on PREA Investigations indicated that investigations WADOC conducts will be done thoroughly, promptly and objectively. All allegations that appear to be criminal in nature are referred to local and/or state law enforcement agencies for criminal investigation per the PREA Investigation policy 490.860 and documented utilizing DOC Form 03-505- Law Enforcement Referral of PREA Allegation. The PREA Prevention and Reporting policy 490.800 states that PREA investigators will receive specialized training. A review of the training curriculum and related policies indicate that all elements required by the standard are met. DOC PREA for Appointing Authorities training curriculum was supplied, which addresses credibility assessments and job aid. DADOC uses the preponderance standard in determining whether an allegation is substantiated or non-substantiated. All investigative reports are maintained for a period of five years (hard copy) and electronic records are maintained for a period of 50 years. The state's archive records were provided as documentation. No reported PREA allegations were received during the twelve months preceding this audit.

Standard 115.273 Reporting to residents

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The PREA Investigations policy 490.860 states that the findings of the investigation will be reported to the offender, WADOC will request investigative reports from outside investigators, if the accused has been indicted on or convicted of a charge related to the sexual abuse, if the employee is no longer assigned to the offender’s unit or no longer works at the same facility as the offender. Notifications are provided to the offender victim in a confidential manner, either personally, through legal mail, or by another method determined by the Appointing authority. Notifications are documented on the PREA Investigations Finding Sheet and samples were provided as documentation. No reported PREA allegations were received during the twelve months preceding this audit.

Standard 115.276 Disciplinary sanctions for staff

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.800 and 490.860 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC requires disciplinary sanctions up to and including termination for sexual abuse or sexual harassment policy violations. Human Resources policies do not specify termination as presumptive discipline in instances of sexual abuse. However, RCW 72.09.225 “Sexual misconduct by state employees, contractors,” states in relevant part, “the secretary shall immediately institute proceedings to terminate the employee of any person: (a) who is found by WADOC, based on a preponderance of evidence, to have had sexual intercourse or sexual contact with the resident, or (b) upon a guilty plea or conviction for any crime specified in chapter 9A.44 RCW when the victim was an resident”. The PREA Prevention and Reporting policy 490.800 states that WADOC has zero tolerance for all forms of sexual misconduct and WADOC will impose disciplinary sanctions for such conduct, up to and including dismissal for staff. No reported PREA allegations were received during the twelve months preceding this audit.

Standard 115.277 Corrective action for contractors and volunteers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. RCW 72.09.225 directs that when the Secretary has reasonable cause to believe that sexual abuse by a contractor has occurred, the contractor will be immediately removed from any position that would permit contact with residents. All allegations that are criminal in nature are reported to law enforcement agencies, including contractors and volunteers. WADOC takes appropriate remedial measures and considers all relevant information when determining if further contact with residents should occur in cases of other violations of the agency’s sexual misconduct policies. WADOC policy on Disciplinary Sanctions 320.150 outlines that residents are subject to disciplinary actions if they are found in violation and are adjudicated as guilty of a misconduct violation. A WAC 137.25.020 indicates that the sanction shall be commensurate with the nature and circumstances the incident and the offender. Any contractor or volunteer that has a substantiated PREA allegation is terminated and flagged in the State Volunteer Share Point site. No reported PREA allegations were received during the twelve months preceding this audit.

Standard 115.278 Disciplinary sanctions for residents

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 320.150, 460.000 and 490.860 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC policy on Disciplinary Sanctions 320.150 outlines that residents are subject to disciplinary actions if they are found in violation and are adjudicated as guilty of a misconduct violation. A WAC 137.25.020 indicates that the sanction shall be commensurate with the nature and circumstances the incident and the offender. This process takes into account the resident’s mental disabilities/illness that contributed to his/her behavior when considering why type of sanction, if any, should be imposed. Residents are disciplined for sexual contact with staff only upon finding that the staff member did not consent to such contact and residents are not subject to discipline for a report of sexual abuse made in good faith. During the audit period, there were no substantiated incidents of resident on resident sexual assault or abuse. There has been no allegation of sexual contact against a staff that was without the staff’s consent.

Standard 115.282 Access to emergency medical and mental health services

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 and 630.500 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. The facility has no medical or mental health staff on-site. Every offender has the opportunity to receive medical care at any of the local hospitals in the immediate area. Residents who report sexual abuse are provided immediate access to medical care provided at no expense to the offender. If a report of sexual abuse is received, staff takes immediate steps to protect the offender and report the information to the appointing authority or duty officer and make immediate notification to the local Police Department. When appropriate, steps are taken to transport the offender to an area hospital who would help in coordinating mental health and advocacy services provided in the community. No reported PREA Allegations during the twelve months preceding this audit.

Standard 115.283 Ongoing medical and mental health care for sexual abuse victims and abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.850 600.000, 600.025, and 600.10.25 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. All residents are responsible for their own medical, dental and mental health needs. They are given resource information about local facilities, non-emergency care, as well as the local hospitals available in the event of an emergency. For sexual assault and abuse cases, the residents would be provide with the same community care, but the Department of Corrections Health Services would work with the community providers for financial coverage. There would be no cost to the offender. As part of the medical and mental health care, they receive follow-up care and counseling, as well as outside services with a rape crisis center, and other contracted advocacy groups. As part of the medical care, when medically indicated, victims receive tests for sexually transmitted diseases, hepatitis and are offered any appropriate care. During this audit period, there were no allegations of sexual abuse that warranted any referrals for non-emergent or ongoing medical or mental health services. Additionally, staff has not received any reports of sexual abuse.

Standard 115.286 Sexual abuse incident reviews

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. No reports of PREA allegations were received during the twelve months preceding this audit; however, during interviews with the Facility Director and Supervisors, it was clear that they understood that upon conclusion of every sexual abuse investigation that has been deemed substantiated or unsubstantiated, an incident review is required.

Standard 115.287 Data collection

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC established a PREA allegation case database within its Offender Management Network Information (OMNI) system that allows standardized collection of data as required by the PREA standard. All reports are available to the general public via the agency's website (<http://www.doc.wa.gov/prea.asp>).

Standard 115.288 Data review for corrective action

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 490.860 Policy addresses this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC established a PREA allegation case database within its Offender Management Network Information (OMNI) system that allows standardized collection of data as required by the PREA Standard. All reports are available to the general public via the agency's website (<http://www.doc.wa.gov/prea.asp>). WADOC published on its website a thorough and detailed report and analysis identifying problem areas and corrective action. Additionally, they have produced and published a report with a comparison of the previous years' data and an assessment regarding the agency's progress in addressing sexual abuse.

Standard 115.289 Data storage, publication, and destruction

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

WADOC 280.310, 280.515 and 490.860 Policies address this standard. Ahtanum View Work Release demonstrated compliance with all elements of this standard. WADOC established a PREA allegation case database within its Offender Management Network Information (OMNI) system that allows the standardized collection of data as required by the PREA standard. All reports are available to the general public via the Agency's website (<http://www.doc.wa.gov/prea.asp>). WADOC published on its website a thorough and detailed report and analysis identifying problem areas and corrective action. Additionally, they have produced and published a report with a comparison of the previous years' data and an assessment regarding the agency's progress in addressing sexual abuse. The agency PREA Coordinator collects data and reports from all facilities and compiles a report annually of all allegations and investigations of sexual abuse and sexual harassment. The agency PREA Coordinator compiles the report which consists of prevention and response, findings of corrective action and the assessment of the Department's progress in addressing sexual abuse and sexual harassment allegations. This report is compared against previous years. They then submit the report to the WADOC Secretary for review. Once the review is completed, a copy is then placed on the Department's website. All data and reports are submitted to the U.S. Department of Justice, upon request. The PREA Coordinator maintains electronic records of sexual abuse and

sexual harassment cases pursuant to the State's Records Retention Schedule. All investigation records are retained for five years after the close of the investigation. Excluded are records covered by PREA, which are retained for 50 years after the close of the investigation. This includes incident and investigative reports, evidence cards, photographs, interviews, and other related items.


AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.

- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and

- I have not included in the final report any personally identifiable information (PII) about any resident or staff member, except where the names of administrative personnel are specifically requested in the report template.

Charles E Owens 

February 23, 2016

Auditor Signature

Date