

**PREA AUDIT REPORT Interim Final
COMMUNITY CONFINEMENT FACILITIES**

Date of report: October 29, 2015

Auditor Information			
Auditor name: Robert Real			
Address: 777 Stanton Blvd., Ontario OR 97914			
Email: Robert.C.Real@doc.state.or.us			
Telephone number: 541-709-7515			
Date of facility visit: May 19, 2015 and May 20, 2015			
Facility Information			
Facility name: Eleanor Chase Work Release Center			
Facility physical address: 427 West 7 th , Spokane WA 99204			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: 509-456-6318			
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: Laura Jense			
Number of staff assigned to the facility in the last 12 months: 87			
Designed facility capacity: 40			
Current population of facility: 26			
Facility security levels/inmate custody levels: MII Minimum Custody			
Age range of the population: 18-67			
Name of PREA Compliance Manager: Laura Jense		Title: Community Corrections Supervisor	
Email address: LJJense@doc1.wa.gov		Telephone number: 509-363-8102	
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: 7435 Linderson Way SW, Tumwater WA 98504			
Mailing address: <i>(if different from above)</i> Click here to enter text.			
Telephone number: 509-363-8102			
Agency Chief Executive Officer			
Name: Bernard Warner		Title: Secretary	
Email address: bewarner@doc1.wa.gov		Telephone number: 360-725-8810	
Agency-Wide PREA Coordinator			
Name: Beth Schuback		Title: PREA Coordinator	
Email address: blschubach@doc1.wa.gov		Telephone number: 360-725-8789	

AUDIT FINDINGS

NARRATIVE

The PREA Audit of the Eleanor Chase Work Release Center was conducted on May 19, 2015 and May 20, 2015. Notice of the audit was posted three months prior to the audit and again six weeks prior to the audit beginning with auditor contact information. Approximately three weeks prior to the audit, the auditor received the Pre-Audit Questionnaire with supporting documentation provided on a flash drive. Prior to the audit the auditor reviewed the Pre-Audit Questionnaire and the provided documentation as well as the agency's website to evaluate compliance with the federal PREA standards.

On May 19, 2015 an entrance meeting was held where introductions were made. The facilities leadership team was present which included Ms. Laura Jense, Community Corrections Supervisor and Mr. John Harris, Facility Director. Following the entrance meeting the auditor conducted a tour of the facility which included all housing areas, showers, bathrooms, offices, kitchens, meeting rooms and machinery spaces. Due the type of facility there were no medical or mental health areas to check. During the tour, not only were PREA posters posted throughout the facility, there were PREA bulletin boards in prominent areas to include common congregation areas and offices of staff who meet with offenders.

As part of the facility audit, the auditor interviewed key agency and facility staff to include Deputy Secretary Pacholke; Facility Director Mr. John Harris; Community Corrections Supervisor Laura Jense; and Beth Schubach, PREA Compliance Coordinator.

All required staff and offender interviews were conducted which included six staff and eight offenders that were selected randomly from staff and inmate rosters provided by the facility. Due to the limited number of staff, small offender population and type of facility, there were no offenders identified as LGBTI, disabled or limited English proficient at the time of the onsite audit.

During the audit, the auditor found that both staff and offenders were aware of PREA and felt that they could trust staff to protect them. Staff was aware of their responsibilities to prevent, detect, report and investigate all allegations of sexual abuse and harassment. Offenders all stated they knew how to report allegations of sexual abuse, harassment and retaliation and knew how to access services.

The auditor reviewed staff and contractor training records to ensure all required PREA training had been completed.

DESCRIPTION OF FACILITY CHARACTERISTICS



The Eleanor Chase House Work Release houses female offenders. Female offenders can be referred to work release 12 months prior to their earned early release date.

Eleanor Chase works with residents to obtain employment that can provide a livable wage for re-entry stability upon release. Residents develop resumes; focus on interviewing techniques, and work ethics that will support their success when returning to the community.

Residents participate in a child visitation program, MRT, group and individual counseling, parenting and self-esteem classes, chemical dependency treatment programs. Residents have available to them a Licensed Mental Health Counselor while at Eleanor Chase.

Residents may attend higher education programs consistent with their re-entry goals outlined in their Classification Facility Plan. Residents who do not have their GED participate in Education Programs to assist them to obtain their GED.

Eleanor Chase House recognizes the many different challenges that women face when re-entering the community and works with each resident to meet their individual challenges and goals that are unique to them.

SUMMARY OF AUDIT FINDINGS

The overall tone of the facility was very positive. All offenders interviewed expressed satisfaction with the facility and staff that supervise them. All staff and offenders that were interviewed indicated an understanding of PREA policies and practices that contribute to an environment free of sexual abuse, sexual harassment and retaliation. While touring the facility I observed staff and offenders' interacting positively with staff and overall was very impressed with the professionalism of staff.

Number of standards exceeded: 0

Number of standards met: 39

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. Overall, the auditor was very impressed with the Agency and Facility’s efforts as they work towards compliance with PREA standards. DOC Policy 490.800, Prison Rape Elimination Act (PREA) outlines the Agency’s zero tolerance policy regarding sexual abuse, sexual harassment and retaliation.

The Agency has designated an upper level, Agency Statewide PREA Coordinator who states they have 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 reports to the Assistant Secretary of Prisons Division.

The Eleanor Chase Work Release has identified a PREA Compliance Manager. It was apparent that there is 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 offenders, all were aware of the agency’s zero tolerance policy. During a 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)

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The Washington Department of Corrections conducts audits of all county jails that currently contract for the confinement of inmates to ensure compliance with Federal PREA standards. All confinement contracts are reviewed and updated annually. A shell agreement is included for all confinement contracts requiring each facility to be actively working towards PREA compliance.

WADOC has other contracts for confinement and provided this auditor with:

- Documentation of contract language (template/shell) for all applicable facilities
 - Documentation listing all contracts entered into for offenders in confinement
 - Memo from Secretary Bernie Warner, regarding violator jail bed contract
 - Contract with Yakima County jail for overflow offenders
 - Contracts with American Behavioral Health Systems
 - Contract with Snohomish County jail and Clark County jail for housing of work release offenders
- PREA Audit Report

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, and WADOC states they monitor to ensure that the contractor is complying with the PREA standards.

Policy documentation was provided for this standard in 490.800 PREA policies, which states that any new or renewed contracts for the confinement of offenders will include the requirement that the contracted facility comply with federal PREA standards and allow WADOC to monitor PREA compliance. It also states the department will not enter into contracts with facilities that fail to comply with PREA standards, except in emergent situation.

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)

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Eleanor Chase Work Release has demonstrated compliance with all elements of this standard. The Washington Department of Corrections contracts with Pioneer Human Services for the supervision of Eleanor Chase Work Release. As part of this contract, there are minimum staffing standards that provide for the staffing of the facility. The contract does not allow for any deviation in the minimum staffing requirements. Positions would be filled from an on call pool of staff or the on shift staff would be required to stay and fill the post. In addition to an adequate staffing plan, Eleanor Chase has a limited camera system in the facility. In addition to cameras, mirrors have been placed in areas of concern to reduce blind spots and maximize staff's ability to observe offenders. The Eleanor Chase Management Team has taken steps to restrict access to areas of the building where observation is limited. Increased tours are conducted in these areas.

While touring the facility, the auditor observed unannounced rounds being conducted throughout the facility. During interviews of staff, they acknowledge 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)

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Eleanor Chase Work Release demonstrated compliance with all elements of this standard. A review of policies and procedures as well as interviews with staff and inmates demonstrated all inmates are able to shower, preform 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.

Eleanor Chase Work Release has a policy that requires staff of the opposite gender to announce their presence when entering housing areas. The auditor observed male staff announcing themselves prior to entering a housing area. All inmates interviewed stated that no staff observed them in a state of undress.

Offenders in Washington State Department of Corrections work release facilities are subject to electronic and pat searches by same gender staff. In the event there is a reasonable suspicion that the offender is concealing contraband that warrants a strip search or body cavity search, the offender would be transported by staff to either a local jail or prison for the search to be conducted.

Within the audit period, there were no identified transgender or intersex offenders assigned to the facility. During interviews of staff, they were able to describe how an appropriate pat search could be conducted of transgender and intersex offenders if required.

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. Any offender assigned to reside at a work release center assumes all financial responsibility for routine medical concerns. During the onsite visit of the facility, there were no offenders with disabilities or offenders that could not speak English.

The Washington State Department of Corrections has taken significant steps to ensure that any offender regardless of physical limitation or language barrier have equal access, opportunity and ability to benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. There are PREA signs and bulletin boards in prominent areas throughout the facility that include information in both English and Spanish. Pamphlets are also available for Spanish and/or low functioning offenders. Interpreter services are available for both deaf and limited English proficient offenders.

In a memorandum dated February 1, 2015 from Laura Jense, Community Corrections Supervisor, she states that there have been no residents at Eleanor Chase Work Release that have had disabilities as defined by this standard during this audit year. She did state that in the event that a resident with disabilities was transferred to the facility, the staff would consult with the Agency ADA Coordinator to ensure orientation was provided in a format that accounted for the disability.

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)

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Corrections, Eleanor Chase Work Release and Pioneer Human Services all adhere to the agency policy requiring criminal background checks for new employees and contractors who may have contact with offenders to ensure they do not hire or promote anyone who has engaged in sexual abuse in prison or other confinement setting; been convicted of engaging or attempting to engage in sexual activity in the community or refuse; or had civilly or administratively been adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent.

DOC Policy 810.800, Recruitment, Selection and Promotion outlines that a criminal background check will be completed for all promotional candidates and external candidates in the hiring process. DOC Policy 810.800 further states that for promotional candidates and former department employees, Human Resources will review 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.

Human Resources were interviewed during the audit. 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. Copies of these forms were provided as documentation to the auditor. To the extent possible for initial appointments previous institution employers are contacted. For promotional candidates, WADOC will review the Offender Management Network Information system and the PREA database for information on all PREA allegations.

Documentation was provided demonstrating that contractors and volunteers received a background check prior to having contact with inmates. Interviews conducted with Human Resources determined that they are conducting background checks for new hires, promotional employees, contractors, and volunteers.

Per the Personnel Files policy 810.005, it requires that WADOC provides information on substantiated allegations of sexual abuse or sexual harassment involving current or former employees, upon receiving a request from an institutional employer conducting a background check on the employee.

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. No major improvements or additions have been made to the facility.

During interviews with Deputy Secretary Pacholke, he stated prior to designing, acquiring any new facility or prior to any substantial modifications of existing facilities, the agency considers architectural design, video monitoring and other technologies that assist in protecting residents from sexual abuse.

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)

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Eleanor Chase Work Release demonstrated compliance with all elements of this standard. The auditor interviewed Ms. Laura Jense, Community Corrections Supervisor, who is responsible for conducting all administrative investigations to include PREA related investigations. She had completed the Agency’s PREA 101 training as well as completed specialized training for PREA investigations in a confinement setting. This training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in a confinement setting, and the criteria and evidence required to substantiate cases for administrative action or to be referred for prosecution.

Eleanor Chase Work Release has an agreement with the Spokane Police Department who is the primary investigative agency for criminal allegations. If a report were received that sexual abuse had potentially occurred, the Spokane Police Department would be contacted and would be responsible for all evidence collection at the facility. All staff interviewed could describe what actions would be taken to protect evidence for investigators.

All criminal sexual abuse investigations are referred to the Spokane Police Department, or the Washington State Patrol. The agency has written a MOU with the Spokane Police Department. Eleanor Chase 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.

An attachment to the PREA Policy, titled Sexual Assault Evidence Collection was provided to the auditor. This document outlined uniform evidence protocol as outline in the PREA standards. In addition to this document 420.375 Contraband and Evidence Handling and 420.365 Evidence Management for Work Release outlines evidence protocol consistent with the national protocol.

The local medical center provides a forensic medical exam by a SANE and a test for sexually transmitted diseases. Provided with documentation was the Forensic Medical Exam Procedure for transportation staff and DOC Health Care staff that provide for maximizing potential for obtaining usable physical evidence.

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 onsite.

WADOC also has an agreement with the Office of Crime Victims Advocacy (OCVA) to field calls from offenders 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 indicates that OCVA will provide services to survivors of sexual abuse by ensuring 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 tours of the facility posters for OCVA were in living units and other areas. During interviews some inmates were aware of this service and some were not. The information is also available to inmates during the orientation process.

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. WADOC Policy 490.860 Prison Rape Elimination Act (PREA) Investigation outlines the agency requirement to investigate all allegations of sexual abuse and sexual harassment; 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. Investigative agencies that could potentially investigate criminal allegations have the authority to do so. As part of the referral process, it requires that information be shared at least every 30 days and upon completion of the investigation.

490.860 PREA Investigation and 490.850 PREA Response was provided as documentation that all allegations of sexual abuse and sexual harassment must be investigated and the PREA Coordinator will review all allegations and determine which allegations fall within the definition of sexual misconduct, and will forward that allegation to the appropriate appointing authority for investigation.

This policy requires that allegations of sexual abuse and sexual harassment are referred for an administrative or criminal investigation. An allegation of sexual harassment is only referred for a criminal investigation if it meets a criminal standard. If it does not meet, then it is referred to the facility investigator. The policy is available on the agency website.

The agency PREA Coordinator provided a memo, dated October 2014, which states WADOC is responsible for administrative PREA investigations and that all felonies will be reported to law enforcement authorities. The PREA Coordinator also states that the sheriff's office or local police department if the facility is located within city limits are primary investigators for crimes committed in facilities.

Interviews with staff indicated they knew that all allegations must be reported and referred for investigation. One noted concern is staff notify the appointing authority or the duty officer of all PREA allegations but are prevented from notifying the on shift supervisor or the facility management team. On shift supervisors and Facility management should be included in the notification process.

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)

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Eleanor Chase Work Release demonstrated compliance with all elements of this standard. The agency requires all staff, 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; inmate rights to be free from sexual abuse and sexual harassment; rights of staff and inmates 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 offenders, and how to communicate effectively with LGBTI inmates.

The training is designed to address issues related to both genders and is provided to all staff, contractors and volunteers prior to them being allowed contact with inmates. All training is documented with training be provided annually. Training records were provided and reviewed by the auditor.

Custody staff are provided through a contract with Pioneer Human Services. Each contractor is required to complete a 40 hour training that includes PREA 101 prior to having contact with offenders.

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)

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Eleanor Chase Work Release demonstrated compliance with all elements of this standard. The work release centers contract with Pioneer Human Services for supervision of its work release facilities. As part of the contract, all staff are required to complete the agency's PREA 101 training.

Additionally, all contractors and volunteers who have contact with inmates have been trained regarding their responsibilities under the agency's sexual abuse, sexual harassment prevention, detection, and response policies and procedures. Interviews with contractors and volunteers demonstrated their knowledge of their responsibilities and the agency's zero tolerance policy regarding sexual abuse and harassment.

Training records were provided and reviewed by the auditor.

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)

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Eleanor Chase Work Release has demonstrated compliance with all elements of this standard. Every offender receives PREA training within 72 hours of receipt to the facility as part of an orientation.

Posters and inmate materials are provided and posted throughout the facility. Each office or area where offenders could congregate has a PREA bulletin board with PREA related materials and information. During interviews with offenders, they acknowledged the information being provided upon arrival. 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.

PREA Policy 490.800 and the Orientation for Offenders Policy 310.000 outlines offenders will be provided PREA information at intake and facility transfer.

All offenders also receive an offender orientation handbook at intake. The facility ensures that every inmate regardless of limitation or disability has the same access to PREA education resources.

Educational materials were reviewed, and they include information explaining WADOC's zero tolerance policy, right to be free from retaliation, and how to report incidents or suspicions of sexual abuse and sexual harassment. It is documented that inmates participated in these education sessions, as required by the PREA policy. Documentation was provided to show compliance. Spanish and English PREA posters were also visible throughout the facility when conducting the tour.

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)

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Eleanor Chase Work Release demonstrated compliance with all elements of this standard. In a memorandum Beth Schubach, Agency PREA Coordinator, she states that WADOC initiated PREA investigator training in 2011. This course was updated in 2013. Ms. L. Jense, Community Corrections Supervisor, completed the on line PREA 101 training as well as the specialized PREA Investigations training and updated booster training for PREA. The auditor checked training records to verify completion of the training. 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)

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Eleanor Chase Work Release does not have medical or mental health services available on site. Each offender assumes personal liability for their own medical care as part of participating in the work release program. Any needed medical or mental health services are provided by community providers at the offenders 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)

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recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Eleanor Chase Work Release has not met all elements of this standard. Eleanor Chase Work Release ensures that all offenders are assessed during an initial intake screening and upon transfer to another facility. During an interview with the facility Community Corrections Officer, they acknowledged that this screening is generally conducted within the first week after transfer, but most often within 72 hours. The agency has developed an objective 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 offenders own perception of vulnerability.

Section (f) of this standard requires that the offender be reassessed within a time period not to exceed 30 days from the time they arrived at the facility for their risk of victimization or abusiveness based upon any additional information received since the intake screening. WADOC incorporated into their PREA Policy 490.820 Prison Rape Elimination Act (PREA) Risk Assessments and Assignments, language that requires the facility to ensure an additional screening occurs within 30 days and the initial assessment is completed within the prescribed 72 hours.

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)

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Eleanor Chase Work Release demonstrated compliance with all elements of this standard. Eleanor Chase Work Release demonstrated that it is effectively utilizing the information obtained from the vulnerability risk assessment to make housing and programming assignments. All housing assignments are made by the Community Corrections Officer based upon the information obtained during the individualized intake assessment.

Efforts are taken to house offenders who have been identified for being at high risk of abusiveness from those at risk of being sexually victimized.

The facility reported at the time of the audit there were no transgender or intersex inmates, however if there were, the placement and programming assignments for each transgender or intersex inmate is reassessed at least twice each year to review any threats to safety experienced by the inmate. Housing decisions for transgender and intersex inmates would be reviewed on a case by case basis. Eleanor Chase Work Release would ensure transgender and intersex inmates 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 inmates 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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. The Washington State Department of Corrections and Eleanor Chase Work Release have made every effort to ensure multiple ways for offenders to report concerns related to sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities. PREA Policy 490.800 and Mail for Prison Offenders policy 450.100 detail how inmates can report.

WADOC has a MOU with Colorado Department of Corrections that details a joint agreement to serve as each other's external reporting entity, to include the Reporting Form. The MOU met the requirements that an inmate may request to remain anonymous, and that reports will be immediately forwarded to agency officials.

A memo was provided from the Correctional Records Program Administrator that states WADOC does not detain persons solely for civil immigration purposes; therefore this portion of the standard is not applicable to WADOC.

Every offender interviewed was aware of at least one way to report and/or stated that they felt safe reporting to staff at the facility. Staff interviewed knew and understood that regardless of how a report of sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities is received, it must be reported and investigated.

Eleanor Chase Work Release established a procedure that requires an affirmative responsibility to report PREA concerns privately. The auditor was concerned that this process did not include notifying the on shift supervisor or facility leadership. Staff have been directed to either directly contact the appointing authority or the on shift duty officer. Neither is present at the facility. While confidentiality is an important element of this standard, the auditor believes the state's response limits the on shift supervisor to respond appropriately and ensure that victim and aggressors are separated and evidence is protected.

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.

Eleanor Chase Work Release is exempt from this standard. A memo from Deputy Director Pacholke, dated October 2014, states that WADOC does not process PREA related allegations through the internal offender grievance program. Instead grievances regarding PREA will be immediately forwarded to the appointing authority and investigated the same as any PREA allegation.

He indicates an internal process has been established whereby any investigation that has been open for a period of 90 days or more is reviewed for status and issues that need to be resolved by the agency PREA Coordinator and responsible appointing authority. This allows for oversight of the investigation without restricting the investigation.

WADOC's process makes this standard not applicable.

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.

Eleanor Chase 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 offenders 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 indicates that OCVA will provide services to survivors of sexual abuse by ensuring 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 that were located throughout all common areas and offices where inmates may be met with. During interviews some inmates were aware of this service and some were not. The information is also available to inmates during the orientation process.

The PREA Policy outlines the process to obtain advocacy, stating calls are toll free, will not be monitored or recorded and an IPIN will not be required.

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.

Eleanor Chase Work Release had 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. It describes what is PREA, how to report Sexual Misconduct, How DOC Offenders 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 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.

There are multiple methods that can be utilized for third party reporting, which are provided in inmate orientation.

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. Staff has been 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.

During staff interviews, all were aware 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. In fact, staff is directed to report directly to the appointing authority or duty officer only.

There are no on site Medical or Mental Health staff. All health services are provided in the community at the offender's expense.

All offenders housed at Eleanor Chase Work Release are adults who are within six months of release to the community. The agency does have a policy that would require notification to Adult Protective Services if an alleged victim is classified as a vulnerable adult and was the victim of sexual abuse.

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.

Eleanor Chase Work Release has demonstrated compliance with all elements of this standard. The facility complies with the Agency Protection Duties that outlines staff responsibilities related to keeping an offender safe when it is learned that they may be at substantial risk of imminent sexual abuse. 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.

The PREA Risk Assessment Policy 490.820 requires information from the risk screening to be considered. The PREA Response Policy 490.850 requires immediate action to protect inmates from sexual abuse. When a staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, the staff member is required to take immediate action to protect the inmate.

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.

Eleanor Chase Work Release meets all the elements of this standard. The PREA Response Policy 490.850 indicates the responsibility to report to other confinement facilities appointing authority or facility administrator within 72 hours after receiving an allegation of sexual abuse with confined at another facility.

A memo from Laura Jense, Community Corrections Supervisor, indicates that Eleanor Chase Work Release did not receive any allegations of sexual abuse from or about an offender while housed at a different facility; therefore, there were no documents available to show compliance with this standard.

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.

Eleanor Chase 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 included to separate the alleged victim and abuser and what steps to take to protect and preserve evidence. Additionally, all staff interviewed knew of their responsibility to report and the requirement to maintain confidentiality by only sharing information with those with the direct need to know.

In a memorandum from Laura Jense, Community Corrections Supervisor, she states that there were 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.

Eleanor Chase Work Release has demonstrated compliance with all elements of this standard. The PREA Response Policy 490.850 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 PREA Response Plan should consist of 4 sections composed of documents listed in the PREA Response Plan Contents (Attachment 6 of the policy) and the plan is maintained by the PREA Liaison/designee in the shift commander’s office in each prison.

Eleanor Chase Work Release has a Facility PREA Response Plan in accordance with the policy titled Eleanor Chase Work Release Procedure describing the direction for staff in the initial and follow up response regarding offenders when allegations of sexual misconduct is made. The plan demonstrated a coordinated response to an incident of sexual abuse among first responders, medical and mental health practitioner, investigators, and facility leadership.

Auditor interview with the Appointing Authority, Facility Director, Community Corrections Supervisor/PCM, PREA Coordinator, Investigators demonstrated knowledge and practice which further supported compliance with this standard.

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.

Eleanor Chase Work Release has demonstrated compliance to all elements of this standard. Eleanor Chase Work Release provided the collective bargaining agreement for the Washington Federation of State Employees. The bargaining agreement does not restrict Eleanor Chase Work Release’s ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of where and what extent discipline is warranted. The WADOC Secretary also provided a memo indicating that interest only arbitration has no impact on the agency’s ability to remove alleged staff abusers from contact with any offender during the course of an investigation or upon determination of whether, and to what extent discipline is warranted.

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.

Eleanor Chase Work Release meets all the elements of this standard. The Agency has it in their PREA Investigations policy 490.860 that it protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates 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.

Eleanor Chase Work Release provided a memo from Ms. Jense, Community Corrections Supervisor that indicated no monitoring plans had conducted, because there had been no PREA related allegations made at the facility.

Interviews were conducted with the Director, Facility Director, Community Corrections Supervisor/PCM, PREA Coordinator and the regarding the agencies process to protect inmate from staff retaliation. All were well able to describe retaliation monitoring and what actions would be taken if indications of retaliation were observed.

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.

Eleanor Chase Work Release has demonstrated compliance with all the elements of this standard. WADOC conducts its own administrative investigations and an external agency conducts investigations that are criminal in nature. A memo from Tomas Fithian, Director of Security and Emergency Management, was supplied that states that all allegations that appear to be criminal in nature be 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.

Eleanor Chase Work Release had no reported PREA Allegations during the twelve months preceding the audit. During interviews with Mr. John Harris, Facility Director, and Ms. Jense, Community Corrections Supervisor they state that haven't had any PREA allegations in the preceding years and as such have not had any allegations that appeared to be criminal and referred for prosecution.

WADOC Policy on PREA Investigations indicated that investigations WADOC conducts will be done thoroughly, promptly and objectively.

The PREA Prevention and Reporting policy 490.800 states that PREA investigators will receive specialized training. Eleanor Chase Work Release provided documentation of training. As the primary investigator, training records for Ms. Jense were provided demonstrating that she had received additional training related to conducting PREA investigations in a confinement setting. 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.

A memo was provided by the Correctional Records Program Administrator outlining that all investigative reports will be 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.

Interviews conducted with Ms. Jense demonstrated that she was very knowledgeable and conveyed a good understanding of how an investigation is completed thoroughly and objectively.

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. The PREA Investigations Policy 490.860 states that there will not be a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The appointing authority makes this determination, and the training they receive supports this standard being met.

RCW 72.09.225 was supplied as documentation, which also spoke to the level of evidentiary standard when a determination is made of a staff allegation.

The findings in an investigation of sexual abuse and sexual harassment are based on a preponderance of evidence. Interviews were conducted with the PREA Coordinator and Ms. Jense, Facility PCM who is assigned as the primary administrative investigator; both understood that a preponderance was the evidentiary standard for administrative PREA investigations.

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.

Eleanor Chase Work Release demonstrated compliance in all the elements of this standard. Eleanor Chase Work Release has not had any allegations of sexual abuse or harassment within the audit period and as such has not had to make any notifications to offenders.

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 offender 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.

During interviews with the Appointing Authority, Facility Manager and Community Corrections Supervisor, all were aware of the requirements to notify an offender whether the allegation was substantiated, unsubstantiated or unfounded.

A memo was provided from Megan Allsen, PREA Research Analyst, states that WADOC headquarter PREA Unit maintains logs of offenders who have been names as the victim and suspect and is reviewed following receipt of information that a suspect offender has been indicated on or convicted of a charge of sexual abuse. The log is also regularly reviewed to update the jurisdictional status of all offenders. At this time, there have not been any instances involving a suspect indictment or conviction.

The standard states that the agency’s obligation to report under this standard shall terminate if the inmate is release from the agency’s custody, however policy states that if the offender has been released, the appointing authority will inform the offender of the finding in writing to the offender’s last known address as documented in the offender’s electronic file. This practice exceeds the requirement.

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.

Eleanor Chase Work Release has 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.

A memorandum was provided from WADOC Deputy Secretary Pacholke stating that although agency Human Resources policies do not specify termination as presumptive discipline in instances of sexual abuse, in accordance with 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 inmate, or (b) upon a guilty plea or conviction for any crime specified in chapter 9A.44 RCW when the victim was an inmate”.

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.

Eleanor Chase Work Release states they did not have allegations of staff sexual misconduct abuse or harassment during the audit period, so they were unable to provide supporting documentation.

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard except the requirement to report sexual abuse to appropriate licensing bodies. RCW 72.09.225 that 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 inmates. 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 inmates should occur in cases of other violations of the agency's sexual misconduct policies.

In a memorandum from Laura Jense, Community Corrections Supervisor, she states that in the event that a case involved a contractor, during the investigation the individual would be placed on administrative leave to ensure no contact with residents, until the investigation was complete. If substantiated, the contractor and/or volunteer's services would be terminated.

WADOC Policy 490.860, Prison Rape Elimination Act (PREA) Investigation, section I.J. states for allegations against staff, the Appointing Authority/PREA Liaison or Human Resources will verbally notify the accused of the findings. If the allegation is substantiated, the notification may be provided during the pre-disciplinary process. When a substantiated allegation is criminal in nature, the Appointing Authority will notify.

More substantial language is being added to the policy during its next revision.

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.

Eleanor Chase Work Release meets all elements of this standard. Eleanor Chase Work Release stated in a memorandum that there have been 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 consent.

WADOC policy on Disciplinary Sanctions 320.150 outlines that offenders are subject to disciplinary actions if they are found in violation 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 inmate's mental disabilities/illness that contributed to his/her behavior when considering why type of sanction, if any, should be imposed. Offenders are disciplined for sexual contact with staff only upon finding that the staff member did not consent to such contact and inmates are not subject to discipline for a report of sexual abuse made in good faith.

Eleanor Chase Work Release reports that during the 12 month audit review period, there were no inmates found guilty of infractions related to PREA.

Eleanor Chase Work Release requires all offenders to be responsible for their own medical and mental health treatment which is provided in the community. In the event that an offender required ongoing counseling related to sexual abuse that could not be met in the community, would be returned to a secured facility.

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.

Eleanor Chase Work Release has 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 four local hospitals in the immediate area. Inmates who report sexual abuse are provided immediate access to medical care provided at no expense to the offender.

When 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 Spokane 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.

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.

Eleanor Chase Work Release has demonstrated compliance with all elements of this standard. During this audit period there has been no allegation of sexual abuse that warranted any referrals for non-emergent or on going medical or mental health services. Additionally, staff has not received any reports of sexual abuse.

All residents in work release are informed upon their arrival that they are responsible for their own medical, dental and mental health needs. They are given resource information about local facilities for non-emergent care as well as the local hospitals available in the event of an emergency. For sexual assault and abuse cases, the offenders would be provided 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 received tests for sexually transmitted diseases, hepatitis and offered any appropriate care.

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.

Eleanor Chase Work Release demonstrated compliance with all elements of this standard. In a memorandum from Laura Jense, Community Corrections Supervisor, she states that because there have been no reports of sexual abuse, no incident reviews have been convened.

During interviews with the Facility Director, Community Corrections Supervisor/PCM, and the Appointing Authority it was clear that they understood that upon conclusion of every sexual abuse investigation that has been substantiated or unsubstantiated, an incident review is required. They were able to describe the review process.

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.

Eleanor Chase Work Release has demonstrated compliance with all elements of this standard. In a memorandum from Ms. Beth Schubach, PREA Coordinator, she states the following: The Washington State Department of Corrections (WADOC) has established a PREA allegation, case and database within its Offender Management Network Information (OMNI) system. As of this writing, the system allows standardized collection data as required by the PREA Standard.

A copy of the Annual PREA Report was provided for review by the auditor. The latest report is available to the general public via the Agency's website.

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.

Eleanor Chase Work Release and WADOC has demonstrated compliance with all elements of this standard. The department has developed and 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 with previous years' data and an assessment regarding the agency's progress in addressing sexual abuse.

The Agency reviews collected data to assess and improve the effectiveness of its efforts to prevent, detect, and respond to PREA related concerns. The data is used to help identify problem areas and to determine what corrective action is needed. An annual report was published that has been reviewed and approved by Secretary Warner.

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.

Eleanor Chase Work Release and the Washington State Department of Corrections have demonstrated compliance with all elements of this standard. The Agency PREA Coordinator collects data and reports from all facilities and compiles a report annually of investigations of all allegations of sexual abuse and sexual harassment.

The Agency 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. The Agency PREA Coordinator will then submit the report to the WADOC Secretary for their review. Once the review is complete 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 the Prison Rape Elimination Act 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 inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Robert C. Real

October 29, 2015

Auditor Signature

Date