

Brady J. Hall (ISB No. 7873)

brady@melawfirm.net

Marisa S. Crecelius (ISB No. 8011)

marisa@melawfirm.net

Moore Elia Kraft & Hall, LLP

Post Office Box 6756

Boise, Idaho 83707

Telephone: (208) 336-6900

Facsimile: (208) 336-7031

Attorneys for Defendants Idaho Department of Corrections, Henry Atencio, Jeff Zmuda, Howard Keith Yordy, Richard Craig, and Rona Siegert

IN THE UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF IDAHO

ADREE EDMO,

Plaintiffs,

vs.

IDAHO DEPARTMENT OF
CORRECTION; HENRY ATENCIO, in
his official capacity; JEFF ZMUDA, in
his official capacity; HOWARD KEITH
YORDY, in his official and individual
capacities; CORIZON, INC.; SCOTT
ELIASON; MURRAY YOUNG;
RICHARD CRAIG; RONA SIEGERT;
CATHERINE WHINNERY; AND
DOES 1-15;

Defendants.

) Case No. 1:17-cv-151-BLW
)
) **DECLARATION OF DANA**
) **MAYBON**

I, Dana Maybon, hereby declare under penalty of perjury that the foregoing is true and correct:

1. I am over the age of eighteen and am competent to testify to the matters herein. I make this declaration based upon my own personal knowledge.

2. I am currently employed with the Idaho Department of Corrections (“IDOC”) as the Grievance Coordinator and Administrative Assistant to the Deputy Warden of the Idaho State Correctional Institution (“ISCI”).

3. Through my employment with IDOC in general, and more specifically through my duties as the Grievance Coordinator, I have become personally familiar with the IDOC Grievance Process set forth in IDOC Policy 316 (“Grievance Process: Offender”) and Standard Operating Procedure (SOP) 316.02.01.001 (“Grievance and Informal Resolution Procedure for Offenders”). True and correct copies of Policy 316 and SOP 316.02.01.001 are attached hereto as **Exhibit A** and **Exhibit B**, respectively. Both Policy 316 and SOP 316.02.01.001 have been in effect at all times since 2013.

4. Both Policy 316 and SOP 316.02.01.001 are publicly available on the IDOC’s website and are available to all offenders housed at the ISCI. All offenders housed at the ISCI undergo orientation upon their incarceration during which offenders are provided both written and verbal instructions regarding the IDOC Grievance Process as contained in Policy 316 and SOP 316.02.01.001. All offenders are instructed as to the process they must follow in order to comply with the Grievance Process, including all applicable forms and mandatory deadlines. Further, all offenders at ISCI are provided with a handout titled “Grievance and Informal Resolution Process for Offenders,” which explains the process and deadlines for completing the Grievance Process.

5. The IDOC Grievance Process consists of three easy steps. Offenders must complete each of the three steps within all applicable deadlines. Only upon timely completion of all three steps does the offender complete the Grievance Process and exhaust his/her administrative remedies. The three steps of the IDOC Grievance Process are as follows:

6. First, offenders must seek an informal resolution of the matter or incident by completing an Offender Concern Form. The Offender Concern Form must be addressed to the staff member most capable of responding to, and if appropriate, resolving the issue. The staff member should respond within seven days of receiving the Offender Concern Form. If the staff member to whom the Offender Concern Form is sent does not respond within the seven-day period, then the offender need not wait any longer and can proceed to the second step by filing a Grievance using the Grievance/Appeal Form.

7. Second, offenders are required under the Grievance Process to file a Grievance within thirty days of the incident or problem that is the basis for the Grievance. For example, if an offender has property confiscated, is physically or sexually attacked by another inmate, and/or sustains a personal injury of any kind, then the offender must ensure that a Grievance is filed within 30 days of the date that the alleged incident occurred. In addition to including specific information in the Grievance, including the nature of the incident, the date, the location, and the names of those involved, the offender must also suggest a solution or proposed remedy (e.g., return of property, investigation, change in housing, monetary damages). Offenders can only raise one specific issue per Grievance.

8. All Grievances are provided to the Grievance Coordinator of the facility or institution where the offender is housed. Upon receipt of the Grievance, the Grievance Coordinator logs the Grievance into the Offender Grievance Listing for the grieving offender using the computer-based Corrections Integrated System (CIS). The Grievance Coordinator then provides the Grievance to a level one responder for an initial response. The level one responder enters a response and then provides the Grievance back to the Grievance Coordinator who then provides the Grievance to a level two responder for a reviewing authority response. When the

level two responder enters a response, the Grievance Coordinator then provides the offender with a copy of the Grievance containing the responses from both the level one and level two responders.

9. The third step in the Grievance Process requires the offender to submit an appeal to the Grievance Coordinator within 14 days of the date the level two responder provided his/her reviewing authority response. Upon receipt of the appeal, the Grievance Coordinator provides the appeal to the appellate authority who is typically the Warden of the facility. However, Grievances involving a medical or healthcare issue are provided to the Health Services Director of the IDOC. The designated appellate authority is required to draft a response within 14 days of receipt of the Grievance appeal and then return it to the Grievance Coordinator who will then log the response into the Offender Grievance Listing and forward it to the offender.

10. As Grievance Coordinator for the ISCI, I am the custodian of the Grievances and appeals filed by offenders housed at the ISCI. I am familiar with, and have access, to the Grievances filed by each offender housed at ISCI as well as the CIS Offender Grievance Listing showing all of those Grievances filed by an offender whether or not the Grievances were timely or appealed. Offender Mason Dean (“Adree”) Edmo, #94691, is currently incarcerated at ISCI and has been housed at ISCI continuously since February 2014. Attached hereto as **Exhibit C** is a true and correct copy of Offender Edmo’s Offender Grievance Listing for the time period between August 12, 2014 and August 29, 2017.

11. I understand that Offender Edmo commenced this lawsuit on April 6, 2017 by filing a Civil Rights Complaint. Highlighted on **Exhibit C** are eleven Grievances that Offender Edmo filed and appealed in the two years prior to April 6, 2017. The non-highlighted Grievances were either filed prior to April 6, 2015, after April 6, 2017, and/or were not properly completed

or appealed by Offender Edmo pursuant to IDOC's Grievance Process. Attached hereto as **Exhibit D** are true and correct copies of the eleven highlighted Grievances that Offender Edmo filed and appealed between April 6, 2015 and April 6, 2017.

12. Although Offender Edmo did not timely file Grievance 160001274 (filed December 12, 2016) within 30 days of the alleged sexual assault that purportedly occurred on August 10, 2016 as required pursuant to SOP 316.02.01.001, a note contained in the CIS system indicates that a deputy warden nonetheless "authorized the grievance to be processed". The level one responder's response indicates that Offender Edmo was permitted to file a Grievance despite the 30 day deadline having expired. Pursuant to SOP 316.02.01.001, the "review authority may extend the 30-day time limit" for an offender to file an initial Grievance. Accordingly, Offender Edmo did complete the IDOC Grievance Process as to the alleged August 10, 2016 sexual assault and request for compensation for personal injury.

13. I understand that Offender Edmo seeks money damages in this lawsuit related to a self-castration attempt that occurred on or about September 29, 2015. In reviewing Offender Edmo's Offender Grievance Listing, I did not locate any appealed Grievance that had been filed within 30 days of September 29, 2015 in which Offender Edmo raised the issue of alleged personal injuries and/or requested monetary damages or other relief as a result of any personal injuries. I did locate Grievance 150001166 in which Offender Edmo sought compensation for a blue blanket that staff allegedly misplaced after Offender Edmo's housing was changed following the September 29, 2015 self-castration attempt. Accordingly, Offender Edmo did not complete the IDOC Grievance Process as to the claim for personal injuries and/or monetary damages allegedly sustained as a result of the September 29, 2015 self-castration attempt.

14. I understand that Offender Edmo also seeks money damages in this lawsuit

related to a second self-castration attempt that occurred on or about December 31, 2016. In reviewing Offender Edmo's Offender Grievance Listing, I did not locate any Grievances that were filed within the 30 days after December 31, 2016. Nor did I locate any Grievance that Offender Edmo file related to the December 31, 2016 self-castration attempt. Accordingly, Offender Edmo did not complete the IDOC Grievance Process as to the December 31, 2016 self-castration attempt.

15. I understand that Offender Edmo may also be requesting in this lawsuit damages and/or a change in policy related to IDOC policy prohibiting Offender Edmo from possessing or wearing women's makeup, obtaining a legal name change, and/or being transferred to a women's correctional institution. In reviewing Offender Edmo's Offender Grievance Listing, I did not locate any Grievances regarding those matters that were filed and appealed timely between April 6, 2015 and April 6, 2017. Accordingly, Offender Edmo did not complete the IDOC Grievance Process as to the aforementioned makeup, name change, or housing issues.

DATED this 31st day of October, 2017.

/s/ Dana Maybon

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 1st day of November, 2017, I filed the foregoing electronically through the CM/ECF system, which caused the following parties or counsel to be served by electronic means, as more fully reflected on the Notice of Electronic Filing:

Dylan Eaton
deaton@parsonsbehle.com

J. Kevin West
kwest@parsonsbehle.com

Brady Hall
brady@melawfirm.net

Lori Rifkin
lrifkin@hadsellstormer.com

Dan Stormer
dstormer@hadsellstormer.com

Craig Durham
chd@fergusondurham.com

Deborah Ferguson
daf@fergusondurham.com

Amy Whelan
awhelan@nclrights.org

/s/Brady J. Hall

| | | | | |
|---|---------------|--|------------------------|---|
| Idaho Department of Correction  | Policy | Control Number: 316 | Version: 2.5 | Page Number: 1 of 2 |
| | | Title: Grievance Process: Offender | | Adopted: 8-17-1990 Reviewed: 2-3-2012 Next Review: 2-3-2014 |

This document was approved by Brent Reinke, director of the Idaho Department of Correction, on 2/3/12 (signature on file).

Open to the general public: Yes No

If no, is there a redacted version available: Yes No

BOARD OF CORRECTION IDAPA RULE NUMBER

[None](#)

POLICY STATEMENT

It is the policy of the Idaho Board of Correction that the Idaho Department of Correction (IDOC) and its contractors provide a process that enables each offender to resolve problems and find answers to questions concerning the operation of the IDOC as it relates to offenders.

PURPOSE

The purpose of this policy is to communicate the Board's management philosophy regarding the offender grievance process.

SCOPE

This policy applies to all procedures created under the authority of this policy and to IDOC facilities, assigned staff, and offenders under the jurisdiction of the IDOC.

RESPONSIBILITY

The director of the IDOC and the chief of the Operations Division are responsible for overseeing the development, implementation, and monitoring of standard operating procedures (SOPs) that provide guidance on or establishes, at a minimum, the following:

- Methods for informal resolution of problems and complaints;
- Guidelines that help offenders understand how to use the offender grievance process;
- Methods of monitoring the number of offender grievances, the operational area being grieved, and the administrative decisions;
- Guidelines that prohibit retaliation against offenders for participating in the offender grievance process;
- Guidelines to ensure timely resolution of issues;

| | | | |
|-------------------------------|------------------------|--|-------------------------------|
| Control Number: 316 | Version: 2.5 | Title: Grievance Process: Offender | Page Number: 2 of 2 |
|-------------------------------|------------------------|--|-------------------------------|

- Guidelines that allow offenders to use the offender grievance process to resolve issues that are only within the IDOC's control;
- Instructions to ensure that issues specific to the offender disciplinary system are handled using the offender disciplinary appeal process;
- Processes to ensure that offenders entering the IDOC are made aware of offender grievance procedures;
- Guidelines that provide offenders access to offender grievance SOPs and related forms;
- Methods that promote a clear understanding of the offender's complaint; and
- Guidelines that promote a proposed solution from the offender.

REFERENCES

None

– End of Document –

COPY

| | | | | |
|---|---|---|------------------------|--|
| Idaho Department of Correction  | Standard Operating Procedure Division of Prisons Offender Management | Control Number: 316.02.01.001 | Version: 3.9 | Page Number: 1 of 19 |
| | | Title: Grievance and Informal Resolution Procedure for Offenders | | Adopted: 9-1-1995 Reviewed: 02-28-2013 Next Review: 02-28-2015 |

This document was approved by Jeff Zmuda, deputy chief of the Prisons Bureau, on 2/28/13 (signature on file).

Open to the general public: Yes No

If no, is there a redacted version available: Yes No

BOARD OF CORRECTION IDAPA RULE NUMBER

[None](#)

POLICY CONTROL NUMBER 316

[Grievance Process: Offender](#)

DEFINITIONS

[Standardized Terms and Definitions List](#)

Contract Medical Provider: A private company or other entity that is under contract with the Idaho Department of Correction (IDOC) to provide comprehensive medical, dental, and/or mental health services to the IDOC's incarcerated offender population.

Facility Health Authority: The contract medical provider employee who is primarily responsible for overseeing the delivery of medical services in an Idaho Department of Correction (IDOC) facility.

Health Authority: The Idaho Department of Correction (IDOC) employee who is primarily responsible for overseeing or managing the IDOC's medical services. The health authority is commonly referred to as the health services director.

Medical Contract Regional Manager: The contract medical provider employee who is responsible for overseeing contract medical provider operations in Idaho Department of Correction (IDOC) facilities.

PURPOSE

The purpose of this standard operating procedure (SOP) is to increase the safety and security of Idaho Department of Correction (IDOC) correctional facilities by providing offenders a process to voice complaints about policies, division directives, SOPs, field memorandums, conditions of confinement, employee actions, actions of other offenders, healthcare, and other incidents occurring within the jurisdiction of the IDOC unless otherwise noted in this SOP.

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 2 of 19 |
|---|------------------------|---|--------------------------------|

SCOPE

This SOP applies to all IDOC correctional facilities (inclusive of community work centers [CWCs]), assigned staff, and offenders.

Note: Offender concerns and grievances directed to the deputy attorney generals (DAGs) do not fall within the scope of this SOP. See [section 5](#) for further details.

RESPONSIBILITY

Facility heads (or designees) are responsible for:

- Implementing this SOP;
- Creating field memorandums (if necessary) to describe facility-specific processes that are not described in this SOP;
- Ensuring staff members practice the requirements contained herein; and
- Appointing a staff member to serve as the facility’s grievance coordinator.

Table of Contents

1. Grievance and Informal Resolution Process Overview 3
Staff Responsibilities 3

2. Notifying Offenders of Grievance and Informal Resolution Procedures 4

3. Non-grievable Issues and Exceptions 4
Issues that Cannot be Grievated..... 4
Sentence 4
Parole..... 4
Previously Grievated Issues 4
Outside Problems..... 4
Disciplinary..... 5

4. Grievance Categories..... 5

5. Offender Concern Forms and Grievance/Appeal Forms 6
Offender Concern Forms 7
Offender Responsibilities..... 7
Grievance/Appeal Forms 8

6. Protections against Reprisal or Retaliation..... 9

7. Procedure for Filing an Offender Grievance.....10
Table 7-1: Filing Grievances for Issues Involving the Current Housing Facility10
Table 7-2: Filing Grievances for Issues Involving the Previous Housing Facility14

8. Procedure for Filing an Offender Appeal15
Table 8-1: Filing an Appeal for Issues Involving the Current Housing Facility15

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 3 of 19 |
|---|------------------------|---|--------------------------------|

Table 8-2: Filing appeals for Issues Involving the Previous Housing Facility17

9. Review and Appellate Authorities18

For Prison and CWC Issues18

For Healthcare or Contract Medical Provider Issues18

10. Review and Appellate Authority Options: Grant, Modify, or Deny18

11. Documentation18

12. Filing Lawsuits against the IDOC19

REFERENCES..... 19

GENERAL REQUIREMENTS

1. Grievance and Informal Resolution Process Overview

An effective grievance and informal resolution process gives offenders the ability to voice concerns; help IDOC staff increase adherence to policy and procedure; and aid in the discovery of unworkable, impractical, or inconsistent practices.

The grievance and informal resolution process has three (3) components:

- Concerns (Using appendix A, *Offender Concern Form*)
- Grievances (Using appendix B, *Grievance/Appeal Form*)
- Appeals (Using appendix B, *Grievance/Appeal Form*)

The grievance and informal resolution process begins with the offender making an attempt to discuss with a staff member a problem or action that affects either the offender **or** the offender population as a whole. If unable to resolve the issue, the offender may then submit an *Offender Concern Form*. If the problem cannot be solved by submitting an *Offender Concern Form*, the offender can then submit a grievance using the *Grievance/Appeal Form*. (Also see [section 12.](#))

Staff Responsibilities

Staff members should try to solve problems with offenders at the lowest, appropriate level.

When staff members recognize that a problem exists, but it is beyond the scope of their authority, they should work through their chain of command to achieve a solution.

A staff member should respond to an *Offender Concern Form* within seven (7) days of the ‘collected/received’ date indicated on the form. If a staff member does not respond within seven (7) days, the offender can elect to submit another *Offender Concern Form* to another staff member **or** use the grievance process (see the subsection below ‘[Grievance/Appeal Forms](#)’ and [section 7](#)). If the offender decides to use the grievance process, he must write ‘no response’ in the ‘staff section’ of the offender’s copy (pink) of the form **and** attach it to the *Grievance/Appeal Form* (appendix B).

Note: The responding staff member shall sign, provide his associate ID number, and date the *Offender Concern Form*.

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 4 of 19 |
|---|------------------------|---|--------------------------------|

2. Notifying Offenders of Grievance and Informal Resolution Procedures

Facility heads will ensure that this SOP is readily available to all offenders housed in their facility.

Within 10 days after arriving at an IDOC Reception and Diagnostic Unit (RDU), each offender will receive both written (appendix C, *Grievance and Informal Resolution Process for Offenders Offender Handout*) and verbal instructions regarding the grievance procedure, including a question and answer period. Appropriate provisions will be made for those speaking other languages and for the disabled or those requiring special accommodations.

If staff learns that an offender is having difficulty understanding the informal resolution and grievance process, the offender should be given a copy of the *Grievance and Informal Resolution Process for Offenders Offender Handout*. If the offender is illiterate, a staff member can explain the procedures, read, or have the *Grievance and Informal Resolution Process for Offenders Offender Handout* read to the offender.

3. Non-grievable Issues and Exceptions

Issues that Cannot be Grievated

This list provides a description of issues that cannot be grieved in accordance with this SOP.

Sentence

The length of an offender's sentence is determined by the court and is not within the IDOC's control.

Exception: An offender may use the grievance and informal resolution process (see [section 1](#)) to resolve issues with how the IDOC calculated the sentence.

Parole

To resolve parole issues, the offender must contact the Idaho Commission of Pardons and Parole.

Previously Grievated Issues

After an issue has been reviewed at the appellate level and all administrative review process remedies exhausted, a new *Offender Concern Form* (appendix A) **or** *Grievance/Appeal Form* (appendix B) that addresses the same issue will be rejected. This includes any issue that is written so that it appears to be a new issue.

Exceptions:

- When a specific issue was not addressed in a previous grievance even though the issue was based on the same incident;
- When a policy, SOP, field memorandum, or other process or procedure has changed since the last grievance was filed regarding that same issue; and
- When time has elapsed that might affect the issue (e.g., one year has passed since a grievance regarding a reclassification issue was filed).

Outside Problems

Problems that are beyond the IDOC's control.

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 5 of 19 |
|---|------------------------|---|--------------------------------|

Disciplinary

Offenders cannot submit a *Grievance* for issues specific to the offender disciplinary system such as behavioral interventions and/or sanctions, infraction reports, disciplinary offense reports (DORs), actions, and hearing officer, review authority, and appellate authority decisions. Further information can be found in SOP [318.02.01.001](#).

Exceptions:

Issues related to a disciplinary action that are not specific to the appeal process may be grieved. See the following examples.

Example #1 –Written or verbal warnings documented in the **Corrections Integrated System (CIS)**.

Example #2 – An offender claims his placement resulted in a fight for which he received a DOR. An appeal to the DOR itself, the offender must use the DOR appeal process. The offender could file a grievance regarding placement.

Example #3 – An offender can use the grievance process to address classification issues arising because of custody affected by DOR points.

4. Grievance Categories

The following table provides a list of grievance categories and descriptions. The categories are used for administrative tracking purposes and are not for determining inclusion or exclusion criteria.

Note: Staff shall use their best judgment to categorize the grievance in accordance with the following table.

| Grievance Category | Grievance Description |
|--------------------------------------|---|
| Access to Courts | Anything related to access to court issues. |
| Administration | Any administrative decision or action that is not covered in another category. For example, a sentencing calculation made by IDOC staff. |
| Classification | Any issue related to classification. |
| Commissary | Any issue related to commissary items or purchases. |
| Complaints Against Staff | Any complaint regarding an employee's action or behavior. |
| Conditions of Confinement | <ul style="list-style-type: none"> • Issues related to confinement such as access to dayroom, recreation, and library. • Issues related to physical plant such as temperature, lighting, and ventilation. • Issues related to supplies such as toilet paper, soap, and indigent items. |
| Education | Any issue related to education. |
| Food | Any issue related to food or food service. |
| Institutional Job Assignments | Any issue related to an institutional job, including pay. |
| Laundry | Any issue related to laundry service, bedding, State of Idaho-issued clothing, etc. |
| Mail | Any issue related to incoming or outgoing mail. |

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 6 of 19 |
|---|------------------------|---|--------------------------------|

| Grievance Category | Grievance Description |
|---|---|
| Medical/Healthcare | Any issue related to healthcare. |
| | Note: If a grievance related to a healthcare issue is filed, the facility grievance coordinator must assign the grievance to an appropriate contract medical provider staff member (e.g., facility health authority, physician, or nurse). |
| Offender Trust Account | Any issue related to the offender's trust account to include processing, purchasing, and errors. |
| Policy or SOP | Any issue related to or addressing a specific written guidance such as a policy, SOP, division directive, or field memorandum. |
| Prison Rape Elimination Act (PREA) | Any issue related to PREA. |
| | Note: In accordance with SOP 325.02.01.001 , <i>Prison Rape Elimination</i> , the grievance coordinator will immediately notify the shift commander and facility PREA coordinator. |
| Programs | Any issue related to programs or treatment that is not a complaint against staff. |
| Property | Any issue related to personal property. |
| Religion | <ul style="list-style-type: none"> Any issue related to the access or practice of a religion. Any issue related to religious property. |
| | Note: If a grievance related to religion is filed, facility staff must first determine if the issue raised has been addressed by the facility's Religious Activities Oversight Committee (RAOC). If the facility RAOC did address the issue, the facility RAOC's response must be used to answer the grievance. If the facility RAOC did not address the issue, the facility must contact the facility volunteer and religion coordinator (VRC) for further instruction. In most cases, the facility will forward the grievance to the facility RAOC if the issue was not previously addressed with the facility RAOC. |
| Security | Any issue related to a security practice such as the use of restraints or transports for movement, counts, searches, etc. that is not a complaint against staff. |
| Telephones | Any issue related to offender telephones, including billing and/or charges. |
| Visiting | Any issue related to visiting rules, applications, or schedules. |
| Vocational Work Projects | Any issue related to vocational work projects that is not a complaint against staff or a payment issue. |

5. Offender Concern Forms and Grievance/Appeal Forms

Each facility will provide a lockbox for offenders to place offender grievance/appeal forms and concern forms considered confidential).

Note: Lockboxes in facilities with restrictive housing units must be identified in field memorandum and may include mobile lockboxes and lockboxes near recreation areas, showers, etc.

The *Offender Concern Form* (appendix A) **and** *Grievance/Appeal Form* (appendix B) must be completed by the offender in his own handwriting. However, if the offender is unable to

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 7 of 19 |
|---|------------------------|---|--------------------------------|

write the concern or grievance due to illiteracy (i.e., the offender cannot read or write English) **or** due to a physical disability (e.g., the offender is unable to use his writing hand or arm for noted healthcare reasons), he shall be allowed to have another offender write the concern or grievance for him. In addition, if the facility grievance coordinator receives a concern or grievance form that is not legible or understandable **and** has attempted to correct the error with the offender, the facility head may assign another offender (such as an offender who has an education or administration institutional job) to write the concern or grievance for the submitting offender, using the submitting offender's own words.

Offenders must also refrain from using concern and grievance forms to harass or intimidate a staff member. If the language used in a concern or grievance form could constitute harassment or intimidation, the concern or grievance form will be returned unanswered to the offender along with a note indicating that the form can be resubmitted if written respectfully and/or appropriately. When a concern or grievance form is returned for any of these stated reasons, the return itself shall not constitute the offender using a 'no response' action as described in the below subsections to begin the grievance process.

Note: The DAGs who represent the IDOC are not a part of the offender concern or grievance process, and offenders must not be allowed to submit an *Offender Concern Form* or a *Grievance/Appeal Form* to the DAGs. Staff may (a) return the form to the offender citing the appropriate person to address the form to, or (b) forward the form to the appropriate person for a response.

Offender Concern Forms

The *Offender Concern Form* (appendix A) will be a half (½) sheet printed on three (3)-part 'no carbon required' (NCR) paper using the following colors:

- **White** — This is the original and must be filed (see [section 11](#)).
- **Pink** — This copy is returned to the offender after a staff member signs it. It is the offender's proof that the staff member took receipt of the form.
- **Yellow** — This copy contains the responding staff member's response, signature, associate ID number, date, **and** is returned to the offender.

Note: NCR paper or carbonless copy paper is used to make a copy of the original document by handwriting on the top document.

Offender Responsibilities

Offenders are responsible to address their concern forms to the appropriate staff member and to use the concern/grievance system in a responsible manner.

A description of the problem must be written within the appropriate area on one *Offender Concern Form* **and** there must not be any attachments included with the form. Offender concern forms must be handwritten and legible. An *Offender Concern Form* that is difficult to read or understand may be returned to the offender with instruction to make it legible or clearly explain the issue. If staff decides it is necessary to obtain more information, a staff member may interview the offender **or** request additional explanation.

Vague issues/complaints, offender personal attacks on staff (e.g., the use of profanity or name-calling), or harassment of staff will be cause for staff to not accept the *Offender Concern Form*. (Also, see the main [section 5](#).)

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 8 of 19 |
|---|------------------------|---|--------------------------------|

Offenders must address the *Offender Concern Form* to the appropriate staff member. For example, sending the form to a facility head **or** deputy warden when it should have gone to the property officer will only delay the process.

If the issue is not confidential to the offender, the offender must deliver the *Offender Concern Form* to the unit officer. The unit officer shall acknowledge receipt of the form by signing and dating the form. The unit officer shall then give the offender the pink copy of the form.

If the issue is is confidential to the offender, the issue can be reported directly to the facility head by sealing the *Offender Concern Form* in an envelope **and** placing the envelope in the designated lockbox. The offender must place his name **and** living unit information in the upper left-hand corner of the envelope.

Note: If the facility head determines the issue is not confidential, he may (a) return the *Offender Concern Form* to the offender citing the appropriate person to address the form to, or (b) forward the form to the appropriate person for a response.

Note: If the issue pertains to PREA, additional reporting options can be found in SOP [325.02.01.001](#), *Prison Rape Elimination*.

Note: Because offenders may only submit one *Offender Concern Form* (concerning a specific issue) to one staff member at a time, if the offender addresses the form to the incorrect staff member and the staff member directs the offender to address the form to another appropriate staff member, the offender shall be allowed to resubmit the form and not have it considered a duplicate or multiple submission.

Grievance/Appeal Forms

All offenders can use the grievance process regardless of their classification or housing status.

Offenders must avoid using grievances for problems that should be resolved informally (see [section 1](#)). Overloading the grievance system slows the process and reduces staff members' ability to consider the problems being grieved. To ensure that all offenders have timely access to the grievance process and that the grievance system is not overwhelmed and grievances can be processed within allotted timeframes, the following guidelines must be followed, or the *Grievance/Appeal Form* (appendix B) will not be accepted.

Note: The deputy chief of the Prisons Bureau, chief of the Operations Division, or director of the IDOC may waive any of these guidelines and order that the grievance be accepted and processed.

- Grievances must be submitted within 30 days of the incident, **and** appeals must be submitted within 14 days of the review authority's decision. The review authority may extend the 30-day time limit, and the appellant authority may extend the 14-day time limit.
- For grievances, the offender must include a copy of the processed offender concern forms (appendix A, yellow copy) that shows the responding staff member's response. If staff did not respond within the allotted time (see the subsection above '[Offender Concern Forms](#)'), the offender must write 'no

| | | | |
|---|------------------------|---|--------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 9 of 19 |
|---|------------------------|---|--------------------------------|

response' in the staff section of his pink copy of the form **and** attach it to the *Grievance/Appeal Form*.

- The offender must not have more than three (3) open/active grievances (including appeals) in the system at any time. For the purpose of this SOP only, 'open' means awaiting a response from the review or appellate authority. Facility heads can waive the three (3) open/active grievance limit when, in the facility head's opinion, delaying the grievance will make it difficult to resolve the issue. In addition, the review authority may extend the three (3) open/active grievance limit if the limit itself will prevent the offender from filing a grievance within the allotted timeframes described in this section.
- The offender must not raise more than one specific issue per grievance, **and** the grievance must be limited to one page of the *Grievance/Appeal Form* (i.e., multiple pages of the form will not be accepted).
- Grievance/appeal forms must be handwritten and legible. A *Grievance/Appeal Form* that is difficult to read **or** understand may be returned to the offender with instruction to make it legible **or** clearly explain the issue. As applicable, the grievance and/or appeal must (a) contain a reasonable and clear description of the problem **and** (b) contain specific information such as dates, places, and names. The description of the problem must be (a) written within the appropriate area of the *Grievance/Appeal Form*, **and** (b) civil, concise, understandable, and to the point. Vague issues/complaints, offender personal attacks on staff (e.g., the use of profanity or name-calling), or harassment of staff will be cause for staff to not accept the grievance. (Also see the main [section 5](#).) If staff decides it is necessary to obtain more information, a staff member may interview the offender **or** request additional written explanation.
- The offender must suggest a solution to the issue.
- The offender submitting the *Grievance/Appeal Form* must sign the form.

Note: Offender grievances shall be treated as confidential and only those staff members who have a need to know may view them.

Returning a Grievance/Appeal Form to an Offender

Grievance coordinators may return grievances that do not meet the above guidelines; however, grievance coordinators must consult with the review **or** appellate authority anytime there is a question regarding the rejection of a grievance. (See process steps in [section 7](#) or [section 8](#), as applicable.)

Note: Grievance responses should be returned to the offender in a sealed envelope or folded and secured.

6. Protections Against Reprisal or Retaliation

Staff members are prohibited from reprisal or retaliation against any offender who discusses an issue with staff, submits an *Offender Concern Form* (appendix A) **or** *Grievance/Appeal Form* (appendix B), **or** participates in the grievance process. An offender can submit a concern or grievance form (as applicable) against any staff member who uses reprisal or retaliation against him. However, if an investigation or staff observation (that is independent of the filed concern or grievance) determines that the offender violated IDOC rules, the

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 10 of 19 |
|---|------------------------|---|---------------------------------|

offender can be held accountable in accordance with SOP [318.02.01.001](#), *Disciplinary Procedures: Offender*.

7. Procedure for Filing an Offender Grievance

Occasionally, because of the nature of the decision, it may not be necessary for a grievance to have three (3) levels of response (responding staff member, review authority, and appellate authority). For example, if the decision was solely that of the facility head (appellate authority) then the facility head may elect to respond without the grievance receiving a 'level 1' (responding staff member) or 'level 2' (review authority) response.

Table 7-1: Filing Grievances for Issues Involving the Current Housing Facility

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|---------------------------------------|------|--|
| Offender | 1 | If informal problem solving is unsuccessful, ensure that all of the requirements described in section 5 of this SOP are met, <u>and</u> within 30 days of the incident, do the following: <ul style="list-style-type: none"> Obtain appendix B, <i>Grievance/Appeal Form</i>, check the box next to 'grievance', <u>and</u> complete only the top section of the form. Do not complete the bottom 'appeal' section of the form. Attach all offender concern forms that were used in an attempt to resolve the issue <u>and</u> supporting documentation such as copies of property inventories. (Refer to section 5 for additional details.) After completing the <i>Grievance/Appeal Form</i>, place it in the lockbox the facility has designated for grievances, appeals, etc. |
| | | <u>Note:</u> The review authority may agree to extend the deadline when there is proof that you have made a reasonable, ongoing attempt to resolve the issue. |
| Designated Staff | 2 | Collect the grievance/appeal forms from the lockbox <u>and</u> submit them to grievance coordinator. |
| | | <u>Note:</u> The forms should be collected (at a minimum) Monday through Friday, except for State of Idaho-observed holidays. |
| Grievance Coordinator | 3 | <u>Note:</u> Steps 3 through 8 must be completed within five (5) business days of receiving the completed <i>Grievance/Appeal Form</i> . |
| | | In the Corrections Integrated System (CIS), locate the 'grievance detail' screen, <u>and</u> make selections from the 'category' and 'grievance location' drop-down boxes. |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 11 of 19 |
|---|------------------------|---|---------------------------------|

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|--|-------------|--|
| Grievance Coordinator | 4 | Determine if the <i>Grievance/Appeal Form</i> is completed correctly (see section 3 , section 4 , and section 5 of this SOP). <ul style="list-style-type: none"> If the form is not completed correctly, proceed to step 5. If the form is completed correctly <u>or</u> after a previously incomplete form is corrected, proceed to step 6. |
| Grievance Coordinator | 5 | If the <i>Grievance/Appeal Form</i> is not completed correctly, do the following: <ul style="list-style-type: none"> In the CIS, ‘grievance detail’ screen, locate the ‘comments’ field; note that the grievance was returned to the offender <u>and</u> state the reason why as indicated on appendix D, <i>Grievance Transmittal Form</i>; and from the ‘grievance status’ drop-down box, select ‘returned w/o action’. Forward the completed <i>Grievance Transmittal Form</i> <u>and</u> return the <i>Grievance/Appeal Form</i> to the offender. <p>Note: The process ends here until the <i>Grievance/Appeal Form</i> is properly completed.</p> |
| Grievance Coordinator | 6 | If the <i>Grievance/Appeal Form</i> is completed correctly <u>or</u> after a previously incomplete form is corrected, do the following: <ul style="list-style-type: none"> In the CIS, ‘grievance detail’ screen, type the offender’s written statements in the appropriate fields. From the ‘grievance status’ drop-down box, select ‘pending’. <p>Note: The offender’s statement must be typed verbatim. You are not allowed to correct spelling, grammar, word choice, or punctuation. However, to make the statement easier to read, correct upper and lower case as appropriate.</p> |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 12 of 19 |
|---|------------------------|---|---------------------------------|

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|--|-------------|---|
| Grievance Coordinator | 7 | In the CIS, 'grievance detail' screen, select the appropriate response level radio button, and complete all applicable fields. |
| | | <p><u>Note:</u> Assign the grievance to a staff member that is most capable of responding to and, if appropriate, resolving the issue (which could be the offender's previous housing facility). Examples: visiting issues go to visiting supervisor, property issues go to property supervisor, food service issues go to food service supervisor. You should discuss the assignment with the review authority as needed.</p> <p><u>Note:</u> Grievances involving healthcare issues must be assigned to the appropriate contract medical provider staff member (e.g., facility health authority, physician, or nurse).</p> |
| Grievance Coordinator | 8 | Attach a portable document format (PDF) version of the grievance to an email, <u>and</u> send the email to the staff member assigned to respond to the grievance (notifying him of the assignment). |
| Assigned Staff Member | 9 | <p><u>Note:</u> Within 14 days of being notified of the assignment, complete step 9. If step 9 cannot be completed within the time limit, notify the grievance coordinator so that another staff member can be assigned (if appropriate) <u>and</u> a delay notification slip (see appendix E) can be sent to the offender.</p> <ul style="list-style-type: none"> Review the issue described in the PDF version of the grievance, <u>and</u> determine whether policies, SOPs, division directives, field memorandums, and best correctional practices were followed. Reply to the grievance coordinator's email by including a clear and professional response to the PDF version of the grievance. |
| | | <p><u>Note:</u> The response must be in a format that will allow the grievance coordinator to copy and paste your comments into the CIS.</p> |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 13 of 19 |
|---|------------------------|---|---------------------------------|

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|---|------|--|
| Grievance Coordinator | 10 | <p>Within three (3) working days of receiving the staff member's response:</p> <ul style="list-style-type: none"> • Copy and paste the staff member's response into the CIS, 'grievance detail' screen in the appropriate field. • Select the appropriate response level radio button, and complete all applicable fields. • If appropriate, notify (via email) the review authority of the grievance assignment. |
| | | <p>Note: The staff member's response shall be copied and pasted as written. You are not allowed to correct spelling, grammar, word choice, or punctuation. However, to make the statement easier to read, correct upper and lower case as appropriate.</p> <p>Note: Placing the cursor in the 'returned from' and 'sent to' fields will auto-fill those fields with a date. Ensure the correct dates are reflected.</p> <p>Note: Based on the information provided at the beginning of section 7 of this SOP, it may be appropriate for step 11 to be performed by someone other than the deputy warden or second-in-command. See section 9 of this SOP.</p> |
| Review Authority (See section 9 of this SOP) | 11 | <p>Note: If step 11 cannot be completed within the time limit, notify the grievance coordinator so that a delay notification slip (see appendix E) can be sent to the offender.</p> <p>Within 16 days of receiving the staff member's response:</p> <ul style="list-style-type: none"> • Enter the CIS <u>and</u> review the grievance, the staff response <u>and</u>, as needed, any applicable rules, policies, SOPs, etc. • Select the appropriate response level radio button, <u>and</u> complete all applicable fields. (See section 10 for decision options.) • Notify (via email) the grievance coordinator that your review has been completed. |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 14 of 19 |
|---|------------------------|---|---------------------------------|

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|---------------------------------------|------|--|
| Grievance Coordinator | 12 | <p>In the CIS, 'grievance detail' screen:</p> <ul style="list-style-type: none"> • Select the appropriate response level radio button, and complete all applicable fields. (Also see section 5 of this SOP to ensure all requirements have been met.) • Print two (2) copies of the grievance, and forward one copy of the printed grievance and the offender's original <i>Grievance/Appeal Form</i> and attachments to the offender; and • File one copy of the printed grievance and copies of the offender's original <i>Grievance/Appeal Form</i> and attachments in the facility administration area. (See section 11 of this SOP.) |
| | | <p>Note: Placing the cursor in the 'returned from' and 'sent to' fields will auto-fill those fields with a date. Ensure the correct dates are reflected.</p> |

For further assistance with CIS, see your designated CIS super user.

Table 7-2: Filing Grievances for Issues Involving the Previous Housing Facility

| Functional Roles and Responsibilities | Step | Tasks |
|--|------|--|
| Offender | 1 | Complete step 1 as described in table 7-1. |
| Grievance Coordinator (at the offender's current housing facility) | 2 | Complete steps 3 through 7 as described in table 7-1. |
| Grievance Coordinator (at the offender's previous housing facility) | 3 | Complete step 8 as described in table 7-1. |
| Assigned Staff Member (at the offender's previous housing facility) | 4 | Complete step 9 as described in table 7-1. |
| Grievance Coordinator (at the offender's previous housing facility) | 5 | Complete step 10 as described in table 7-1. |
| Review Authority (at the offender's previous housing facility) (See section 9 of this SOP) | 6 | <ul style="list-style-type: none"> • Complete step 11 as described in table 7-1; and • Notify (via email) your facility's grievance coordinator that your review has been completed. |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 15 of 19 |
|---|------------------------|---|---------------------------------|

| Functional Roles and Responsibilities | Step | Tasks |
|--|------|--|
| Grievance Coordinator (at the offender's previous housing facility) | 7 | Notify (via email) the grievance coordinator at the offender's current housing facility that the review authority's review has been completed. |
| Grievance Coordinator (at the offender's current housing facility) | 8 | Complete step 12 as described in table 7-1. |

8. Procedure for Filing an Offender Appeal

If the offender is not satisfied with the review authority's grievance decision, the offender may appeal the decision using the following process steps.

Table 8-1: Filing an Appeal for Issues Involving the Current Housing Facility

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|---------------------------------------|------|--|
| Offender | 1 | If you are not satisfied with the review authority's decision, ensure that all of the requirements described in section 5 of this SOP are met, <u>and</u> within 14 days of the review authority's decision, do the following: <ul style="list-style-type: none"> Using the previously submitted <i>Grievance/Appeal Form</i>, check the box next to 'appeal', <u>and</u> complete the remaining bottom section of the form. After completing the bottom section of the previously submitted <i>Grievance/Appeal Form</i>, place it in the lockbox the facility has designated for grievances, appeals, etc. |
| | | Note: The appellate authority may agree to extend the deadline for unforeseen circumstances that prevent you from filing within the 14-day time limit. |
| Designated Staff | 2 | Collect the grievance/appeal forms from the lockbox <u>and</u> submit them to grievance coordinator. |
| | | Note: The forms should be collected (at a minimum) Monday through Friday, except for State of Idaho-observed holidays. |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 16 of 19 |
|---|------------------------|---|---------------------------------|

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|--|------|---|
| Grievance Coordinator | 3 | <p><u>Note:</u> Step 3 must be completed within five (5) business days of receiving the completed <i>Grievance/Appeal Form</i>.</p> <ul style="list-style-type: none"> • In the Corrections Integrated System (CIS), locate the 'grievance detail' screen, <u>and</u> select the appropriate response level radio button. • From the 'grievance status' drop-down box, select 'pending'. • Type the offender's written statement in the appropriate field, <u>and</u> complete all other applicable fields. • If appropriate, notify (via email) the appellate authority of the appeal assignment. |
| | | <p><u>Note:</u> The offender's statement must be typed verbatim. You are not allowed to correct spelling, grammar, word choice, or punctuation. However, to make the statement easier to read, correct upper and lower case as appropriate.</p> <p><u>Note:</u> Placing the cursor in the 'returned from' and 'sent to' fields will auto-fill those fields with a date. Ensure the correct dates are reflected.</p> <p><u>Note:</u> Appeals involving healthcare issues must be assigned to the health authority.</p> |
| Appellate Authority (See section 9 of this SOP) | 4 | <p><u>Note:</u> If step 4 cannot be completed within the time limit, notify the grievance coordinator so that a delay notification slip (see appendix E) can be sent to the offender.</p> <p>Within 16 days of receiving the review authority's response:</p> <ul style="list-style-type: none"> • Enter the CIS <u>and</u> review the grievance, the staff response <u>and</u>, as needed, any applicable rules, policies, SOPs, etc. • Select the appropriate response level radio button, <u>and</u> complete all applicable fields. (See section 10 for decision options.) • Notify (via email) the grievance coordinator that your review has been completed. |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 17 of 19 |
|---|------------------------|---|---------------------------------|

| Functional Roles and Responsibilities | Step | Tasks CIS steps are in bold |
|---------------------------------------|------|---|
| Grievance Coordinator | 5 | <p>In the CIS, 'grievance detail' screen:</p> <ul style="list-style-type: none"> • Select the appropriate response level radio button, and complete all applicable fields. (Also see section 5 of this SOP to ensure all requirements have been met.) • Print two (2) copies of the grievance, and forward one copy of the printed grievance and the offender's original <i>Grievance/Appeal Form</i> to the offender; and • File one copy of the printed grievance and a copy of the offender's original <i>Grievance/Appeal Form</i> (the form that has the bottom section completed) in the facility administration area. (See section 11 of this SOP.) |
| | | <p>Note: Placing the cursor in the 'returned from' and 'sent to' fields will auto-fill those fields with a date. Ensure the correct dates are reflected.</p> |

For further assistance with CIS, see your designated CIS super user.

Table 8-2: Filing appeals for Issues Involving the Previous Housing Facility

| Functional Roles and Responsibilities | Step | Tasks |
|---|------|---|
| Offender | 1 | Complete step 1 as described in table 8-1. |
| Grievance Coordinator (at the offender's current housing facility) | 2 | <ul style="list-style-type: none"> • Complete step 3 as described in table 8-1; and • Notify the grievance coordinator at the offender's previous housing facility. |
| Grievance Coordinator (at the offender's previous housing facility) | 3 | Ensure the appellate authority at your facility is aware of the pending appeal. |
| Appellate Authority (at the offender's previous housing facility) (See section 9 of this SOP) | 4 | <ul style="list-style-type: none"> • Complete step 4 as described in table 8-1; and • Notify (via email) your facility's grievance coordinator that your review has been completed. |
| Grievance Coordinator (at the offender's previous housing facility) | 5 | Notify (via email) the grievance coordinator at the offender's current housing facility that the review authority's review has been completed. |
| Grievance Coordinator (at the offender's current housing facility) | 6 | Complete step 5 as described in table 8-1. |

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 18 of 19 |
|---|------------------------|---|---------------------------------|

9. Review and Appellate Authorities

The grievance process has two (2) decision-making authorities: review authority **and** appellate authority.

For Prison and CWC Issues

Review Authority: The deputy warden **or**, in facilities without a deputy warden, the second-in-command.

Appellate Authority: The facility head.

Note: The review **or** appellate authority will forward grievances that are beyond his control to a deputy chief of the Prisons Bureau. In addition, the review **or** appellate authority will notify the IDOC Office of Professional Standards of any issue that could result in OPS' involvement (e.g., staff misconduct).

For Healthcare or Contract Medical Provider Issues

Review Authority: The contract medical provider's healthcare services administrator (HAS).

Appellate Authority: The health authority.

Note: When the **review authority or appellate authority** makes his grievance decision, he must return the grievance and attachments (if any) to the facility grievance coordinator. The review authority or appellate authority must also forward a copy of the grievance and any pertinent documents (summaries, healthcare records, etc.) to the health authority.

10. Review and Appellate Authority Options: Grant, Modify, or Deny

Review and appellate authorities have three (3) options: grant, modify, or deny.

Grant: The review **or** appellate authority (as applicable) determined that a change or correction is needed and that the offender's suggested solution is being approved or granted.

Modify: The review **or** appellate authority (as applicable) determined that a change or correction is warranted but that the offender's solution will not work. A modified response could include such things as staff training, even if the issue cannot be corrected.

Deny: The review **or** appellate authority (as applicable) determined that no change is justified.

11. Documentation

The grievance coordinator will enter grievance information into the Corrections Integrated System (CIS).

The grievance coordinator will maintain hard copies of grievances for five (5) years, as identified in facility field memorandum.

| | | | |
|---|------------------------|---|---------------------------------|
| Control Number: 316.02.01.001 | Version: 3.9 | Title: Grievance and Informal Resolution Procedure for Offenders | Page Number: 19 of 19 |
|---|------------------------|---|---------------------------------|

12. Filing Lawsuits against the IDOC

In most cases, the grievance process must be exhausted before an offender can file a lawsuit against the IDOC. Therefore, offenders cannot be disciplined for using the grievance/concern process or for the content contained therein (see [section 6.](#))

REFERENCES

Appendix A, *Offender Concern Form*

Appendix B, *Grievance/Appeal Form*

Appendix C, *Grievance and Informal Resolution Process for Offenders Offender Handout*

Appendix D, *Grievance Transmittal Form*

Appendix E, *Delay Notification Form*

Standard Operating Procedure [318.02.01.001](#), *Disciplinary Procedures: Offender*

Standard Operating Procedure [325.02.01.001](#), *Prison Rape Elimination*

Standards for Adult Correctional Institutions, Fourth Edition, Standard 4-4284

– End of Document –

**IDAHO DEPARTMENT OF CORRECTION
Offender Concern Form**

Offender Name: _____ IDOC Number: _____

Institution, Housing Unit, & Cell: _____ Date: _____

To: _____

(Address to appropriate staff: Person most directly responsible for this issue or concern)

Issue/Concern: _____

(Description of the issue must be written only on the lines provided above.)

Offender signature: _____

Staff Section

(Signature of Staff Member Acknowledging Receipt) / Associate ID #

Collected/Received: _____
(Date collected or received)

Reply: _____

Responding Staff Signature: _____ Associate ID # : _____ Date: _____

Pink copy to offender (after receiving staff's signature),
Original and Yellow copy to responding staff (after completing the reply, yellow copy returned to offender)

This is an exact model and must be produced on three (3)-part NCR paper.

IDAHO DEPARTMENT OF CORRECTION
Grievance and Informal Resolution Process for Offenders Offender Handout



What if I have a problem while incarcerated?

Sometimes problems happen. If you have a problem, take the following steps.

Know the Rules

The first step is to know and follow the rules. Read standard operating procedure (SOP) 316.02.01.001, *Grievance and Informal Resolution Procedure for Offenders*. Just ask a staff member for the SOP on the grievance procedures for offenders.

In addition, the Idaho Department of Correction (IDOC) uses policies, directives, and standard operating procedures to manage offenders and staff. For now, let's just call them all rules. You can read most of the rules that affect you.

Talk to Staff

Second, talk to staff. Staff can show you the rules, answer your question, or tell you who can answer your question.

Write an Offender Concern Form

Write your problem on an *Offender Concern Form* and address it to the proper staff member. For example, send a property question to the property officer. Do not send multiple concern forms to different people because doing so only slows the process for everyone. Deliver the concern form to the unit officer. The unit officer will acknowledge receipt of the form by signing and dating the form. The unit officer will then give you the pink copy of the form. Keep the pink copy. (If the issue is confidential to you, you may place the concern form in a designated lockbox in accordance with the SOP 316.02.01.001.)

A staff member should respond within seven (7) days of the 'collected/received' date indicated on the form. If you think the response is wrong **or** if there is no response within the seven (7) day time limit, you can file a grievance.

File a Grievance

Grievances must be filed within 30 days of the incident. To file a grievance, fill out the top section of the *Grievance/Appeal Form*, and attach the *Offender Concern Form* that has the staff response. If you didn't get a response write 'no response' on the pink copy of the concern form that you were given when you filed it, and attach it to the grievance form. Put the forms in the designated lockbox.

File an Appeal

If you think the answer on the grievance is wrong, you can file an appeal. After you get the *Grievance/Appeal Form* back with an answer, you must file the appeal within 14 days of the review authority's decision. Write on the bottom section of the *Grievance/Appeal Form* (the one you were given when you filed it) why you think the answer is wrong. Put the form in the designated lockbox. This is the last step in the problem-solving process.

**IDAHO DEPARTMENT OF CORRECTION
Grievance Transmittal Form**

Facility: _____ Date: _____

To: Offender Name: _____ IDOC Number: _____

Institution, Housing Unit, & Cell: _____

From: _____ Grievance Coordinator Other

The attached form is being returned without action being taken because:

- You did not submit the grievance within 30 days of the incident.
- You did not submit the appeal within 14 days of the review authority's decision.
- The form is not handwritten (it cannot be typed).
- The form is not legible.
- You did not include with the grievance an answered or signed *Offender Concern Form(s)* that shows your attempts to resolve the issue informally with applicable staff.
- You have three (3) open/active grievances (including appeals) in the system, which is the maximum number you are allowed.
- You have raised more than one specific issue.
- The grievance does not contain a reasonable and clear description of the problem.
- The grievance does not describe how you tried to resolve the issue informally.
- The grievance does not contain specific information such as dates, places, and names.
- Your description of the problem is not written in or within the appropriate area on the form. (Written comments must not exceed the space designated for writing comments.)
- The grievance is not written in a civil, concise, or understandable language; or it is not to the point. (Grievances cannot contain vague issues/complaints, personal attacks, or harass staff members.)
- You did not suggest a solution.
- You did not sign the form.
- You cannot submit your appeal until the grievance decision is rendered.
- The issue was previously grieved under grievance number: _____.
- The issue/complaint is not grievable as indicated in standard operating procedure 316.02.01.001, *Grievance and Informal Resolution Procedures for Offenders*, and must be addressed as follows: _____

- You cannot grieve the length of your sentence or a decision that is under the jurisdiction of the court or Idaho Commission of Pardons and Parole.
- This problem is beyond the Idaho Department of Correction's (IDOC's) control.
- Other (must be approved by the review or appellate authority): _____

IDAHO DEPARTMENT OF CORRECTION
Delay Notification Slips

Note: Print and cut this form into three (3) Delay Notification Slips.

Delay Notification Slip

To: _____ No: _____ Housing Assignment _____

From: _____ Date: _____

- Grievance Grievance Appeal DOR Appeal

Has been received and logged as #_____. The response will be delayed because of the following:

- Staff away from institution (vacation/sick/training, etc.)
 Staff Shortage or grievance/appeal backlog
 Issue requires further investigation
 Other: _____

Delay Notification Slip

To: _____ No: _____ Housing Assignment _____

From: _____ Date: _____

- Grievance Grievance Appeal DOR Appeal

Has been received and logged as #_____. The response will be delayed because of the following:

- Staff away from institution (vacation/sick/training, etc.)
 Staff Shortage or grievance/appeal backlog
 Issue requires further investigation
 Other: _____

Delay Notification Slip

To: _____ No: _____ Housing Assignment _____

From: _____ Date: _____

- Grievance Grievance Appeal DOR Appeal

Has been received and logged as #_____. The response will be delayed because of the following:

- Staff away from institution (vacation/sick/training, etc.)
 Staff Shortage or grievance/appeal backlog
 Issue requires further investigation
 Other: _____

Offender Grievance Listing

Page 1 of 3

Name: EDMO, MASON DEAN**Housing Assignment:** ISCI UNIT 11 B 47 B**Status:** TERMER**Parole Eligibility Date:** 07/04/2014**Next Hearing Date:****Gender:** Male**Offender #:** 94691**Classification:** MEDIUM**Citizen:** YES**Full Term Release Date:** 07/03/2021**Tentative Parole Date:**

Offender Grievance Listing

| Grievance Number | Received Date | Category | Location | Level | Status |
|---|---------------|---------------------------|----------|-------|---------------------|
| II 170000899 | 08/29/2017 | ADMINISTRATION | ISCI | 3 | APPEALED |
| Description: I am requesting a facility move to a women's facility. I am a transsexual-woman under-going cross-sex hormonal therapy of SOP directive #401.06.03.501. A move to a women's facility would allow me a safer environment, and efficient management for IDOC security and programs | | | | | |
| II 170000858 | 08/14/2017 | POLICY OR SOP | ISCI | 3 | APPEALED |
| Description: I am a GD offender. The standards of care for GD ("WDATH") explain that a name change to reflect an individual name should be changed. This current policy is unconstitutional and further exacerbates my GD as being called by a male assigned name rather than a female name as I identify as female. | | | | | |
| II 170000845 | 08/14/2017 | MEDICAL/HEALTHCARE | ISCI | 3 | MODIFIED |
| Description: I am being given inferior medical care based on my status as an inmate with GD, and required to wait 5 months before seeing a GD doctor. All inmates with medical issues other than GD are provided medical care in a timely fashion, and not required to wait 5 months to see a MD for their worsening conditions. | | | | | |
| II 170000154 | 02/17/2017 | SECURITY | ISCI | 2 | GRANTED |
| Description: C/O Davis B269 inventoried my property on 01/09/2017 which included a ISCI library book called "Why We Do It", which C/O Davis pursuant to IDOC SOP should have turned this book into the ISCI library. I received notice from ISCI library 02/02/2017. C/O Davis has refused, and / or lost such book. | | | | | |
| II 160001274 | 12/12/2016 | PRISON RAPE ELIM ACT-PREA | ISCI | 3 | DENIED |
| Description: 08/10/2016 I was raped & suffer personal injury because ISCI Warden Yordy & Sgt. Meldrum failed to protect me by housing me; an extremely feminine appearing / diagnosed transsexual woman within unit 09; the only unit of ISCI without emergency call buttons within the cells for offender emergencies. | | | | | |
| II 160001247 | 12/05/2016 | PRISON RAPE ELIM ACT-PREA | ISCI | 1 | RETURNED W/O ACTION |
| Description: | | | | | |
| II 160000880 | 08/12/2016 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about wanting to marry Christopher Schultz will not be processed. This marriage issue was already grieved in II 150000271. | | | | | |
| II 160000633 | 06/13/2016 | CONDITIONS OF CONFINEMENT | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance not processed- housing issue being addressed in II 16000517 | | | | | |
| II 160000599 | 06/01/2016 | MEDICAL/HEALTHCARE | ISCI | 3 | DENIED |
| Description: I am being denied access to care by IDOC officials, specifically, ISCI warden Yordy, as he does not allow my medical/mental health providers to issue me a medical memo for panties for my psychological support of treating my GID. He allows me to have bras but denies panties; both are women's undergarments, this makes no sense at all, both are needed for treating my GID. | | | | | |
| II 160000517 | 05/09/2016 | CONDITIONS OF CONFINEMENT | ISCI | 3 | MODIFIED |
| Description: I am an being denied equal protection of the laws by C.S. Clark, Sgt. Nimmo, and MTC of SOP 401.06.03.501 by not being allowed to move out of BHU because of my status as an GID inmate of IDOC, and because of DOR history. This is a violation of my 14th amendment rights. | | | | | |
| II 160000439 | 04/15/2016 | CONDITIONS OF CONFINEMENT | ISCI | 1 | RETURNED W/O ACTION |
| Description: Inmate wants to be moved out of BHU. This grievance will not be processed as there are no concern forms attached that fall within the 30 day time frame. | | | | | |
| II 160000391 | 04/04/2016 | MEDICAL/HEALTHCARE | ISCI | 3 | MODIFIED |
| Description: I am not being provided timely adequate medical/mental health care, specifically a medical/mental health evaluation for the medical necessity pre-requisite of sex reassignment surgery by a qualified gender identity disorder evaluator pursuant to IDOC SOP 401.06.03.501 and NCHC MH-A-01 Access to care, and P.-G-02 special | | | | | |

Offender Grievance Listing

Page 2 of 3

| | | | | | | |
|--|--|------------|-------------------------|------|---|---------------------|
| | | needs. | | | | |
| | II 160000181 | 02/10/2016 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| | Description: Grievance about moving to PWCC will not be processed - inmate did not attempt to resolve issue with appropriate staff. He sent concern form to the chief psychologist. Edmo will be advised to start with case manager or facility move coordinator. | | | | | |
| | II 150001375 | 12/24/2015 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| | Description: Grievance about Warden not allowing him to buy bras from commissary since 2014 will not be processed. Inmate is past 30 day time line to grieve. However, Edmo is medically authorized to wear a bra and he will be advised he needs to get it from Laundry. | | | | | |
| | II 150001348 | 12/16/2015 | MEDICAL/HEALTHCARE | ISCI | 3 | DENIED |
| | Description: I submitted HSR #'s 784687 & 784637 on 11/22/15, concern form to IDOC / ISCI HSA on 12/06/15 asking about HSR's, no response on either. I am being denied an endocrinologist & medical treatment wpath standards. This is creating a substantial risk of future harm of autocastrating myself. I shouldn't have to wait for 30, 60, 90 days until next appt. | | | | | |
| | II 150001187 | 11/04/2015 | MEDICAL/HEALTHCARE | ISCI | 3 | DENIED |
| | Description: I am being denied adequate / appropriate medical care for my serious condition of GID. N.P.-C Paulson refuses to follow the WPATH standard of care in treating my GID; specifically of ordering laser hair removal electrolysis, or hair remover for my facial hair, or any further treatment on 10/20/15. | | | | | |
| | II 150001166 | 10/29/2015 | PROPERTY | ISCI | 3 | GRANTED |
| | Description: My property was rolled up on 09/29/15 by C/O Hunt because of my attempt to to self-castrate. 10/02/15 I recieved my property and no personal blue blanket was in my property. I spoke to C/O Hunt on or around 10/10/15 and she said she would send an I.R. so I can be reimbursed because she said she lost it on 09/29/15. | | | | | |
| | II 150001120 | 10/21/2015 | PROPERTY | ISCI | 1 | RETURNED W/O ACTION |
| | Description: Grievance about missing blue blanket will not be processed. Inmate attached receipt from 2013 but no current inventory. We need inventory showing he still had blanket prior to 9/29/15. | | | | | |
| | II 150001117 | 10/21/2015 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| | Description: 10/26/15 - grievance resubmitted with concern form addressed to Warden Yordy. He is making this a medical grievance so he needs to try to resolve issue with medical staff. Again this grievance will not be processed. Grievance about being denied cosmetics for his GID will not be processed - no concern form. He's trying to make it a medical issue. | | | | | |
| | II 150001080 | 10/13/2015 | POLICY OR SOP | ISCI | 1 | RETURNED W/O ACTION |
| | Description: Grievance not processed. He claims Dr. Craig disregarded his risks of future harm (he tried to castrate his testicles). His solution is to express his gender by wearing make up and Dr. Craig formulate a treatment plan that accommodates this. This make up issue was addressed in II 150000395. | | | | | |
| | II 150001090 | 10/07/2015 | POLICY OR SOP | ISCI | 1 | RETURNED W/O ACTION |
| | Description: Grievance about not getting clear answer not processed. He is trying to grieve II 150000271 and he is past time line. Issue about marrying other offenders was addressed in previous grievance. | | | | | |
| | II 150001091 | 10/07/2015 | ADMINISTRATION | ISCI | 2 | MODIFIED |
| | Description: Dr. Craig did not respond to my concern form about my mental health issues which has caused me to lose parole eligibility. | | | | | |
| | II 150001030 | 09/24/2015 | POLICY OR SOP | ISCI | 1 | RETURNED W/O ACTION |
| | Description: Grievance about "Grievance II 150000271 is unclear" will not be processed. He can't grieve a grievance. He is advised to review related policy and SOP. | | | | | |
| | II 150000749 | 07/15/2015 | COMPLAINT AGAINST STAFF | ISCI | 3 | MODIFIED |
| | Description: On 06-29-15 while at a property appt. with Sgt. Sidwell, Sidwell kept calling me "Mr. Edmo", "he", "his". I respectfully reminded Sgt. Sidwell of S.O.P. 401.06.03.501 - section 10 on gender pronouns of my GD. He said "whatever" in response. On 07-01-15, again, Sgt Sidwell continued to use "he" and Mr. Edmo. This is humiliating and offensive. | | | | | |
| | II 150000757 | 07/15/2015 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| | Description: Grievance about wanting to feminize will not be processed. Issues were addressed in II 140001365, II 150000191, and II 150000393. | | | | | |

Offender Grievance Listing

Page 1 of 2

Name: EDMO, MASON DEAN**Housing Assignment:** ISCI UNIT 11 B 47 B**Status:** TERMER**Parole Eligibility Date:** 07/04/2014**Next Hearing Date:****Gender:** Male**Offender #:** 94691**Classification:** MEDIUM**Citizen:** YES**Full Term Release Date:** 07/03/2021**Tentative Parole Date:**

Offender Grievance Listing

| Grievance Number | Received Date | Category | Location | Level | Status |
|---|---------------|-------------------------|----------|-------|---------------------|
| II 150000555 | 05/21/2015 | COMPLAINT AGAINST STAFF | ISCI | 3 | MODIFIED |
| Description: 05-13-15 Cpl. Plumer #0101 had kept calling me him, Mr., and he which is not allowed per SOP's 401.06.03.501 section 10, and SOP 207.07.02.11. | | | | | |
| II 150000525 | 05/18/2015 | COMPLAINT AGAINST STAFF | ISCI | 2 | MODIFIED |
| Description: On 04-22-15 Cpl Romriell keeps calling me Mr. Edmo, sir and he. Upon intake on 04-21-15 in unit 8, I told Cpl. Romriell I am a GD offender as explained in SOP 401.06.03.501, and SOP 207. (Concern form attached) | | | | | |
| II 150000413 | 04/22/2015 | COMPLAINT AGAINST STAFF | ISCI | 3 | MODIFIED |
| Description: Cpl. Elliot keeps calling / using gender pronouns when talking to me, he uses "Mr Edmo", "Sir" and "he". I've told him about policy 401.06.03.501 on 04-14-15, and on 04-15-15 and 04-16-15 he continues to disregard this policy, making me feel humiliated. Cpl. Elliot states he was told I am not in the GID program anymore - GID is not a program. | | | | | |
| II 150000396 | 04/14/2015 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about 'Sgt. Sidwell gave a vague response' will not be processed. Issue does not match the concern form. Also, solution about giving back his MP3 player does not match issue. Inmate is past 30 day time line to grieve MP3 player. | | | | | |
| II 150000395 | 04/13/2015 | POLICY OR SOP | ISCI | 3 | DENIED |
| Description: Warden Yordy uses IDOC PREA policy to harass me because of my gender dysphoria by responding to a concern form on 03-15-15 that it be "irresponsible to allow... make up and hairstyle as a women". | | | | | |
| II 150000367 | 04/07/2015 | POLICY OR SOP | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about PREA policy is subjective will not be processed. This is a vague complaint with no specifics. | | | | | |
| II 150000368 | 04/07/2015 | ACCESS TO COURTS | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about "In January 2015 I had been denied copies of qualified legal matters..." will not be processed. Inmate is past time line to grieve. | | | | | |
| II 150000298 | 03/19/2015 | PROPERTY | ISCI | 1 | RETURNED W/O ACTION |
| Description: 3/31/15 - another grievance about confiscated photos rec'd and not processed. Inmate is still past the 30 day time line to grieve. 3/26/15 - grievance about confiscated photos again submitted. He is still past the 30 day time line to grieve - grievance not processed. 3/19/15 Grievance about confiscated photo album not processed. Confiscated was done on 2/7/15 and inmate Edmo signed it on 2/7/15. Grievance is dated 3/17/15. Inmate is past 30 day time line to grieve th | | | | | |
| II 150000271 | 03/10/2015 | ADMINISTRATION | ISCI | 3 | DENIED |
| Description: I am being denied my constitutional right to marry in Idaho - IDOC by Jesse Trujillo and ISCI Warden Yordy. As of 03-05-15, both will not allow my marriage application to be submitted to IDOC administration for consideration for personal reasons / issues, and personal belief that Idaho does not allow same sex marriages. | | | | | |
| II 150000233 | 03/05/2015 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about not being allowed to express his religious expression of being a "two-spirited" individual will not be processed. Not enough specific information -- like name(s) and what specifically is being denied. Also -- his suggested solution is we allow him to have his nature women hairstyles. He has addressed his feminine hairstyles in other grievances, to include II 150000191. | | | | | |
| II 150000191 | 02/17/2015 | SECURITY | ISCI | 3 | DENIED |
| Description: On 02-07-15 Cpt. Schlenz authorized my placement into unit 8 because of feminem behaviors due to my gender dysphoria. Overall feminem appearance / effeminate hairstyle as noted to be a violation of IDOC policy #325, which is also a violation of my constitutional rights. | | | | | |

Offender Grievance Listing

Page 2 of 2

| | | | | | | | |
|---|--|--------------|------------|---------------------------|------|---|---------------------|
| | | II 150000085 | 01/22/2015 | PROPERTY | ISCI | 2 | GRANTED |
| Description: On 12-22-15 Sgt. Duthit (investigations) confiscated my typewriter for investigation reasons, on 01-07-15 I sent a concern form addressed to Sgt of Investigations to ask when I can expect my typewriter back. | | | | | | | |
| | | II 140001390 | 12/23/2014 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about 'I sent a concern form addressed to Jeff Zmuda' will not be processed. He does not state what the problem is - he just states he sent a concern to Zmuda about PREA problems and sex reassignment. | | | | | | | |
| | | II 140001365 | 12/17/2014 | MEDICAL/HEALTHCARE | ISCI | 3 | DENIED |
| Description: Not being allowed panties as a medically necessary undergarment approved by Dr. Whinnery, IDOC states, it does not allow for panties. | | | | | | | |
| | | II 140001364 | 12/17/2014 | ADMINISTRATION | ISCI | 3 | DENIED |
| Description: I have not been able to have a new IDOC offender ID badge made with a new picture and a gender change from male to female on the IDOC card. | | | | | | | |
| | | II 140001308 | 12/01/2014 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about wanting his sex changed on his inmate ID will not be processed. He did not attempt to resolve issue with ID officer. | | | | | | | |
| | | II 140001338 | 12/01/2014 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about changing his male gender marker to female will not be processed. This issue is beyond IDOC's control. | | | | | | | |
| | | II 140001297 | 12/01/2014 | MEDICAL/HEALTHCARE | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance not processed - very vague and there is no concern form. | | | | | | | |
| | | II 140001257 | 11/18/2014 | MEDICAL/HEALTHCARE | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about back pain not processed - no concern form attached. | | | | | | | |
| | | II 140001183 | 10/23/2014 | POLICY OR SOP | ISCI | 2 | MODIFIED |
| Description: I've sent Warden Yordy whether or not I am able to marry another offender? He has not given me a exact answer or what the current policys says. | | | | | | | |
| | | II 140001167 | 10/21/2014 | ADMINISTRATION | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about sending concern form to Warden about marriage for two male offenders will not be processed. I don't understand what he is grieving - he didn't state what the issue is. | | | | | | | |
| | | II 140001058 | 09/22/2014 | CONDITIONS OF CONFINEMENT | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about moving out of BHU will not be processed. This was addressed in II 140000614. | | | | | | | |
| | | II 140001012 | 09/02/2014 | ADMINISTRATION | ISCI | 3 | DENIED |
| Description: ACLU of Idaho sent a (CD) containing my medical records. On 08-01-14. Sgt. Seely confiscated my CD disk instructed by Amanda Weed-Admin, and Terrie Rosenthal - Admin. Sgt. Seely sent this to property. My medical records were exposed violating HUPPA'A. | | | | | | | |
| | | II 140001028 | 09/02/2014 | MEDICAL/HEALTHCARE | ISCI | 1 | RETURNED W/O ACTION |
| Description: Grievance about his gender identity disorder / proper dosage of estrogen not processed - no concern form. | | | | | | | |
| | | SI 140000178 | 08/12/2014 | PROPERTY | SICI | 3 | DENIED |
| Description: Bought books from Edward Hamilton books catalog specifically books from the social science section. Educating literature or transsexualism. Sgt Wright of the mail room denied me access of lthese books I bought and received on 07/31/14. | | | | | | | |

Record(s) displayed/found:26-50/95

Page (s): 1 2 3 4

[Back](#)[Preview Report](#)

Source File: /jsp/dio/offenderGrievanceList.jsp



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|---------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 150000395 |
| | | Category: | POLICY OR SOP |

| |
|---------------------------------------|
| Offender Grievance Information |
|---------------------------------------|

Date Received: 04/13/2015

The problem is:

Warden Yordy uses IDOC PREA policy to harass me because of my gender dysphoria by responding to a concern form on 03-15-15 that it be "irresponsible to allow... make up and hairstyle as a women".

I have tried to solve this problem informally by:

Submittinig up to 5 concern forms about my femininity; specifically concern form on 03/10/15.

Note: Only one concern form is attached to grievance - concern form dated 3/10/15.

I suggest the following solution for the problem:

Warden Yordy allow me & transgenders to express our gender and not using policy 325 to harrass me which violates policy 207.

| |
|-----------------------------------|
| Level 1 - Initial Response |
|-----------------------------------|

| | | | |
|-----------------|------------|----------------|------------|
| Date Forwarded: | 04/15/2015 | Date Returned: | 04/15/2015 |
|-----------------|------------|----------------|------------|

| | | |
|----------------|------------|--------------------|
| Date Due Back: | 04/29/2015 | Level 1 Responder: |
|----------------|------------|--------------------|

The response from the staff member or person in charge of the area/operation being grieved:

No level one response.

| |
|---|
| Level 2 - Reviewing Authority Response |
|---|

| | | | |
|-----------------|------------|------------------------|--------|
| Date Forwarded: | 04/15/2015 | Grievance Disposition: | DENIED |
|-----------------|------------|------------------------|--------|

| | | | |
|----------------|------------|--------------------|---------------|
| Date Due Back: | 05/01/2015 | Level 2 Responder: | YORDY, HOWARD |
|----------------|------------|--------------------|---------------|

| | | | |
|----------------|------------|----------------------------|------------|
| Date Returned: | 04/29/2015 | Response sent to offender: | 04/30/2015 |
|----------------|------------|----------------------------|------------|

Your grievance has been reviewed and I find:

Policy is specific in not allowing effeminate hairstyles or other behaviors that put offenders at increased risk. The facility has been enforcing this policy in an effort to keep Edmo as safe as possible. I don't believe it serves the safe and secure environment of a prison to allow offenders to express their gender in the fashion Edmo is wanting.

Warden Yordy

II 150000395

EDMO, MASON DEAN

94691

Offender Appeal

Offender Comments:

Yordy is partially right; a physiological transgender woman as I am, with innate feminine behaviors housed in a male facility, does not serve the safe and secure environment of a prison, especially a male prison as ISCI. This policy does state, however, the facility head will be determining authority. Yordy will not give an accurate description of what is a feminine hairstyle and what is not. I am a transgender woman taking female hormones (Estrogen), everything about me is feminine, I wear bras, issued by ISCI staff, I have substantial visible breast growth. Picking and choosing what's feminine and what's not about me is not fair. There needs to be clear cut guidelines of feminine hairstyles and behaviors.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|-----------------|
| Date Appealed: | 05/04/2015 | Grievance Disposition: | DENIED |
| Date Forwarded: | 05/04/2015 | Level 3 Responder: | CLUNEY, SHANNON |
| Date Due Back: | 05/20/2015 | Response sent to offender: | 05/04/2015 |
| Date Returned: | 05/04/2015 | | |

Your appeal has been reviewed and I find:

Warden Yordy is expected to continue to enforce the IDOC PREA policy in the spirit that it is intended.



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|-------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 150000413 |
| | | Category: | COMPLAINT AGAINST |

| |
|---------------------------------------|
| Offender Grievance Information |
|---------------------------------------|

Date Received: 04/22/2015

The problem is:

Cpl. Elliot keeps calling / using gender pronouns when talking to me, he uses "Mr Edmo", "Sir" and "he". I've told him about policy 401.06.03.501 on 04-14-15, and on 04-15-15 and 04-16-15 he continues to disregard this policy, making me feel humiliated. Cpl. Elliot states he was told I am not in the GID program anymore - GID is not a program.

I have tried to solve this problem informally by:

Talking to Cpl. Elliot on 04-14-15, writing concern to Elliot on 04-16-15 and talking to Lt. Clark on 04-16-15.

I suggest the following solution for the problem:

Cpl. Elliot be given reprimands for disregarding IDOC policy.

| |
|-----------------------------------|
| Level 1 - Initial Response |
|-----------------------------------|

| | | | |
|-----------------|------------|--------------------|------------|
| Date Forwarded: | 04/23/2015 | Date Returned: | 04/24/2015 |
| Date Due Back: | 05/07/2015 | Level 1 Responder: | MELDRUM, |

The response from the staff member or person in charge of the area/operation being grieved:

Offender Edmo-

While I respect your concern of Cpl. Elliot's comments, I remind you that ISCI has approximately 1600 male offenders so unfortunately, mistakes will happen. I will work with Cpl. Elliot to ensure that he is made aware of and follows policy 401.06.03.501.

II 150000413

EDMO, MASON DEAN

94691

Level 2 - Reviewing Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Forwarded: | 04/27/2015 | Grievance Disposition: | MODIFIED |
| Date Due Back: | 05/13/2015 | Level 2 Responder: | PENEKU, LEROY |
| Date Returned: | 04/28/2015 | Response sent to offender: | 04/30/2015 |

Your grievence has been reviewed and I find:

Inmate Edmo - Sgt Meldrum will remind his staff how to appropriately address inmates.

Offender Appeal

Offender Comments:

The incident involving Cpl. Elliott is not an isolated incident. This is a common, re-occurring problem with staff that I encounter about daily. It is very obvious I am trans and undergoing sex reassignment treatment per IDOC SOP 401.06.03.501. I believe in my circumstances it's not a mistake but a mere purposeful behavior directed towards me as a trans-woman. Sgt. Meldrums 1600 male offender excuse is an institutional excuse that is a generalization of not being accountable for staff behaviors. This causes me great humiliation, embarrassment and highly increases my gender dysphoria of my male genitalia. More effort and awareness is crucially needed.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 05/18/2015 | Grievance Disposition: | MODIFIED |
| Date Forwarded: | 05/19/2015 | Level 3 Responder: | YORDY, HOWARD |
| Date Due Back: | 06/05/2015 | Response sent to offender: | 06/09/2015 |
| Date Returned: | 06/08/2015 | | |

Your appeal has been reviewed and I find:

Supervisors are addressing the issue with staff. I can appreciate you wanting staff to follow the gender neutral guidelines you are entitled to but I don't think staff are doing it intentionally. This is a male facility and staff become accustomed to saying male identifiers. We will continually work on this issue.

Warden Yordy



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|-------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 150000555 |
| | | Category: | COMPLAINT AGAINST |

| |
|---------------------------------------|
| Offender Grievance Information |
|---------------------------------------|

Date Received: 05/21/2015

The problem is:

05-13-15 Cpl. Plumer #0101 had kept calling me him, Mr., and he which is not allowed per SOP 's 401.06.03.501 section 10, and SOP 207.07.02.11.

I have tried to solve this problem informally by:

Sending Plumer a concern form on 05-13-15, and reminding him that we have been through this before.

I suggest the following solution for the problem:

Cpl. Plumer be instructed to follow IDOC policies as instructed.

| |
|-----------------------------------|
| Level 1 - Initial Response |
|-----------------------------------|

| | | | |
|-----------------|------------|--------------------|--------------|
| Date Forwarded: | 05/21/2015 | Date Returned: | 05/21/2015 |
| Date Due Back: | 06/04/2015 | Level 1 Responder: | GOULD, DAVID |

The response from the staff member or person in charge of the area/operation being grieved:

Please understand that you are housed in an all male facility, and that staff address individuals housed here as Mr. or him all day long. I'm sure that it was not done in malice. I will remind Cpl. Plumer of this policy.

| |
|---|
| Level 2 - Reviewing Authority Response |
|---|

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Forwarded: | 05/21/2015 | Grievance Disposition: | GRANTED |
| Date Due Back: | 06/06/2015 | Level 2 Responder: | PENEKU, LEROY |
| Date Returned: | 05/21/2015 | Response sent to offender: | 05/21/2015 |

Your grievance has been reviewed and I find:

Inmate Edmo - Considering that this is a male correctional facility, staff become accustomed to addressing the population as such. I'm sure the Cpl meant no disrespect towards you. We will address your concern with Cpl. Plumer.

II 150000555

EDMO, MASON DEAN

94691

Offender Appeal

Offender Comments:

Policies 207 and 401.06.03.501 do not allow exceptions for staff in male correctional facilities to intentionally disregard policy. Cpl. Plumer is well versed about my status as an GID offender as Cpl. Plumer has worked in ISCI's BHU where GID offenders are usually housed - this "general" population statement cannot suffice justification. Cpl. Plumer must be clearly advised of these policies.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 06/04/2015 | Grievance Disposition: | MODIFIED |
| Date Forwarded: | 06/10/2015 | Level 3 Responder: | YORDY, HOWARD |
| Date Due Back: | 06/26/2015 | Response sent to offender: | 06/16/2015 |
| Date Returned: | 06/16/2015 | | |

Your appeal has been reviewed and I find:

Staff have addressed the issue with Corporal Plumer and he has been advised of the policy. I don't believe it was intentional but it is difficult for staff to remember to address GD offenders with non-gender identifiers.

Warden Yordy



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|-------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 150000749 |
| | | Category: | COMPLAINT AGAINST |

| |
|---------------------------------------|
| Offender Grievance Information |
|---------------------------------------|

Date Received: 07/15/2015

The problem is:

On 06-29-15 while at a property appt. with Sgt. Sidwell, Sidwell kept calling me "Mr. Edmo", "he", "his". I respectfully reminded Sgt. Sidwell of S.O.P. 401.06.03.501 - section 10 on gender pronouns of my GD. He said "whatever" in response. On 07-01-15, again, Sgt Sidwell continued to use "he" and Mr. Edmo. This is humiliating and offensive.

I have tried to solve this problem informally by:

Reminding Sgt. Sidwell respectfully of SOP 401.06.03.501, and sending concern form on 06-25-15 to Sgt. Sidwell. (Concern form attached).

I suggest the following solution for the problem:

Sgt. Sidwell instructed to follow IDOC policy 401.06.03.501 - GID and SOP 207 Respectful Workplace, specifically section 07-02-11. and the harmful effects this has on my mental health.

| |
|-----------------------------------|
| Level 1 - Initial Response |
|-----------------------------------|

| | | | |
|-----------------|------------|----------------|------------|
| Date Forwarded: | 07/16/2015 | Date Returned: | 07/20/2015 |
|-----------------|------------|----------------|------------|

| | | | |
|----------------|------------|--------------------|------------|
| Date Due Back: | 07/30/2015 | Level 1 Responder: | GREENLAND, |
|----------------|------------|--------------------|------------|

The response from the staff member or person in charge of the area/operation being grieved:

ISCI is a male facility and it is common placed and respectful to state something to the effect "Good morning sir how may I help you." I understand that this may offend you but it was not the intent. The staff member stated that you were upset about not being able to retain the items in the confiscation and had immediately threaten grievance before even explaining your status as a GID offender. I will talk to Sgt. Sidwell about this and I do believe that he will try to correct how he address you in the future. But understand this facility is a male facility and it may occur again. I would ask that before you threaten grievance attempt to explain to staff your issue first.

II 150000749

EDMO, MASON DEAN

94691

Level 2 - Reviewing Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Forwarded: | 07/20/2015 | Grievance Disposition: | MODIFIED |
| Date Due Back: | 08/05/2015 | Level 2 Responder: | PENEKU, LEROY |
| Date Returned: | 07/21/2015 | Response sent to offender: | 07/22/2015 |

Your grievance has been reviewed and I find:

Inmate Edmo - This is a male correctional facility, staff are accustomed to addressing the population as such. I'm sure the Sergeant meant no disrespect towards you, nor did he try to humiliate you. We will address your concern with Sergeant Sidwell.

Offender Appeal

Offender Comments:

Upon review of policies 401.06.03.501 (GID) and 207.07.02.11 (Respectful workplace - offenders) an excuse of whether this is a male institution or female institution does not excuse accountability. These policies do not allow for any staff member in either a male or a female institution to address a GID inmate, as myself, with gender specifiers, or pronouns. Sgt. Sidwell, as a Sgt. should be will aware of policy and procedures. These intentional unexcusable, humiliating, and offensive use of "mr", ("sir"), etc, masculine pronouns need to stop. This is the 3rd grievance against staff for such misconduct. It is a repetitive behavior. Staff must be able to modify behavior as a professional while at work as a correctional officer.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 08/11/2015 | Grievance Disposition: | MODIFIED |
| Date Forwarded: | 08/12/2015 | Level 3 Responder: | YORDY, HOWARD |
| Date Due Back: | 08/31/2015 | Response sent to offender: | 08/31/2015 |
| Date Returned: | 08/31/2015 | | |

Your appeal has been reviewed and I find:

The policy does state staff are to be gender neutral when addressing GID offenders. Although, I don't believe it was intentional, we need to make better awareness to our staff.

Warden Yordy



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|--------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 150001166 |
| | | Category: | PROPERTY |

Offender Grievance Information

Date Received: 10/29/2015

The problem is:

My property was rolled up on 09/29/15 by C/O Hunt because of my attempt to to self-castrate. 10/02/15 I recieved my property and no personal blue blanket was in my property. I spoke to C/O Hunt on or around 10/10/15 and she said she would send an I.R. so I can be reimbursed because she said she lost it on 09/29/15.

I have tried to solve this problem informally by:

Sending concern form to C/O Hunt dated 10/11/15 (*attached), and no response from C/O Hunt.

I suggest the following solution for the problem:

I want re-imbursed for my blue personal blanket (commissary) I have the reciept of purchase as well (*attached***)

Level 1 - Initial Response

| | | | |
|-----------------|------------|--------------------|--------------|
| Date Forwarded: | 10/29/2015 | Date Returned: | 12/08/2015 |
| Date Due Back: | 11/11/2015 | Level 1 Responder: | GOULD, DAVID |

The response from the staff member or person in charge of the area/operation being grieved:

I have not gotten a response from Officer Padour in regards to the situation. I have reviewed offender Edmos documentation and have searched his cell to determine the validity of his claim. It is recommended the Offender be reimbursed for his lost item.

Sgt. David Gould

II 150001166

EDMO, MASON DEAN

94691

Level 2 - Reviewing Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Forwarded: | 12/08/2015 | Grievance Disposition: | DENIED |
| Date Due Back: | 12/24/2015 | Level 2 Responder: | PENEKU, LEROY |
| Date Returned: | 12/18/2015 | Response sent to offender: | 12/18/2015 |

Your grievance has been reviewed and I find:

Inmate Edmo,

I have reviewed all the information regarding your grievance. You provided two property inventory sheets. The property sheets dated February 24, 2014, and April 21, 2015 both note a blanket. The property sheet from your property file dated September 29, 2015 does not include a blanket, yet you signed the property sheet acknowledging that you received your property. The discrepancy should have been addressed at the time you received your property and signed the property inventory sheet.

Officer Padour, the staff member who performed the property roll-up reports there was no blanket present during the inventory. I do not support reimbursement.

Offender Appeal

Offender Comments:

In response to Dep. Warden Peneku, of course my property receipt did not show a blanket, no blanket was rolled up into my property as it should of been by C/O Padour. I told C/O Loveland on 10/05/15 when I picked up my property, he said to concern C/O Padour about the issue as I have done. She did not responst. I've submitted all necessary paperwork including receipt of purchase for blanket, and Sgt. Gould had checked my cell for such blanket. I want reimbursed for negligence of my property by C/O Padour or IDOC.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 12/24/2015 | Grievance Disposition: | GRANTED |
| Date Forwarded: | 12/24/2015 | Level 3 Responder: | YORDY, HOWARD |
| Date Due Back: | 01/09/2016 | Response sent to offender: | 01/04/2016 |
| Date Returned: | 01/04/2016 | | |

Your appeal has been reviewed and I find:

You will be reimbursed for the blanket for the value paid, which is \$12.72.
Warden Yordy



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|--------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 150001187 |
| | | Category: | MEDICAL/HEALTHCARE |

| |
|---------------------------------------|
| Offender Grievance Information |
|---------------------------------------|

Date Received: 11/04/2015

The problem is:

I am being denied adequate / appropriate medical care for my serious condition of GID. N.P.-C Paulson refuses to follow the WPATH standard of care in treating my GID; specifically of ordering laser hair removal electrolysis, or hair remover for my facial hair, or any further treatment on 10/20/15.

I have tried to solve this problem informally by:

Sending concern form on 10/15/15 and submitting HSR # 784404 on 10/25/15. (Both attached)

I suggest the following solution for the problem:

I should be treated according to WPATH standards of care for my serious condition of GID.

| |
|-----------------------------------|
| Level 1 - Initial Response |
|-----------------------------------|

| | | | |
|-----------------|------------|--------------------|------------------|
| Date Forwarded: | 11/04/2015 | Date Returned: | 11/05/2015 |
| Date Due Back: | 11/18/2015 | Level 1 Responder: | WINGERT, WILLIAM |

The response from the staff member or person in charge of the area/operation being grieved:

Facial hair removal for Gender Dysphoria is not an IDOC policy, nor is it medically necessary.

| |
|---|
| Level 2 - Reviewing Authority Response |
|---|

| | | | |
|-----------------|------------|----------------------------|--------------|
| Date Forwarded: | 11/05/2015 | Grievance Disposition: | DENIED |
| Date Due Back: | 11/19/2015 | Level 2 Responder: | VALLEY, RYAN |
| Date Returned: | 11/06/2015 | Response sent to offender: | 11/06/2015 |

Your grievance has been reviewed and I find:

Edmo,
Hair removal is not part of our policy, nor is it medically necessary.

II 150001187

EDMO, MASON DEAN

94691

Offender Appeal

Offender Comments:

WPATH "SOC" PAS 171-72 explain the need for electrolysis for support in changes of gender expression in conjunction with hormone therapy. WPATH is the standard of care for treating GID. Corizon nor IDOC have any providers competent, or experienced in treating GID, including me. A competent experienced provider would note this facial hair removal medically necessary to alleviate my gender dysphoria, and help to prevent another attempt at autocastration, as I did on 09/29/15. Please refer me to a GID specialist to be evaluated by appropriate medical care of my GID. Denial based on policy or cursory health service evaluations is deliberate and indifference to my serious GID medical condition. Denial hinders my depression and ideation of autocastration.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 11/13/2015 | Grievance Disposition: | DENIED |
| Date Forwarded: | 11/13/2015 | Level 3 Responder: | SIEGERT, RONA |
| Date Due Back: | 11/29/2015 | Response sent to offender: | 11/16/2015 |
| Date Returned: | 11/16/2015 | | |

Your appeal has been reviewed and I find:

Offender Edmo:

Per WPATH, The Standards of Care, Version 7. Hair removal is listed as an option or alternative not a requirement for GD treatment.

Rona Siegert RN, CCHP-RN
IDOC Health Services Director



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|--------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 150001348 |
| | | Category: | MEDICAL/HEALTHCARE |

| |
|---------------------------------------|
| Offender Grievance Information |
|---------------------------------------|

Date Received: 12/16/2015

The problem is:

I submitted HSR #'s 784687 & 784637 on 11/22/15, concern form to IDOC / ISCI HSA on 12/06/15 asking about HSR's, no response on either. I am being denied an endocrinologist & medical treatment wpath standards. This is creating a substantial risk of future harm of autocastrating myself. I shouldn't have to wait for 30, 60, 90 days until next appt.

I have tried to solve this problem informally by:

Submitting HSR's #'s 784687, 784637 on 11/22/15 & concern form 12/06/015 to ISCI HSA, both no response. (attached)

I suggest the following solution for the problem:

I request an appt. with a licensed endochnologist and proper medical care treatment. According to wpath standards of care for GID individuals as myself.

| |
|-----------------------------------|
| Level 1 - Initial Response |
|-----------------------------------|

| | | | |
|-----------------|------------|--------------------|------------------|
| Date Forwarded: | 12/18/2015 | Date Returned: | 12/30/2015 |
| Date Due Back: | 01/01/2016 | Level 1 Responder: | WINGERT, WILLIAM |

The response from the staff member or person in charge of the area/operation being grieved:

HSR received 11-22-15. Edmo scheduled 12-7-15 and failed to show to appointment. Rescheduled 12-23-15. The Nurse Practitioner ordered that he be seen by an MD to discuss plan of care. That appointment is slated for his next scheduled appointment time.

| |
|---|
| Level 2 - Reviewing Authority Response |
|---|

| | | | |
|-----------------|------------|----------------------------|--------------|
| Date Forwarded: | 12/30/2015 | Grievance Disposition: | MODIFIED |
| Date Due Back: | 01/13/2016 | Level 2 Responder: | HOFER, AARON |
| Date Returned: | 12/31/2015 | Response sent to offender: | 12/31/2015 |

Your grievence has been reviewed and I find:

I am sorry for any inconvenience this has caused you. You will be scheduled with an MD to discuss plan of action and HSR's.

II 150001348

EDMO, MASON DEAN

94691

Offender Appeal

Offender Comments:

I believe that being in the chronic care health program of IDOC I should have seen by a MD physician. This is an ongoing struggle with Corizon, and IDOC to receive an adequate medical plan of action for my G.D. I've not seen a medical physician the entire year of 2015 and believe I should be afforded the opportunity to explain my medical concerns to such.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 01/11/2016 | Grievance Disposition: | DENIED |
| Date Forwarded: | 01/11/2016 | Level 3 Responder: | SIEGERT, RONA |
| Date Due Back: | 01/27/2016 | Response sent to offender: | 01/11/2016 |
| Date Returned: | 01/11/2016 | | |

Your appeal has been reviewed and I find:

Offender Edmo:

In your original grievance you are asking to be seen by an "endocrinologist", however, in your appeal you state that you feel that you should be seen in the chronic disease clinic by an MD. Per policy you cannot change or add issues at the appeal level. Therefore this appeal is denied.

Rona Siegert RN, CCHP-RN
IDOC Health Services Director



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|--------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 160000391 |
| | | Category: | MEDICAL/HEALTHCARE |

Offender Grievance Information

Date Received: 04/04/2016

The problem is:

I am not being provided timely adequate medical/mental health care, specifically a medical/mental health evaluation for the medical necessity pre-requisite of sex reassignment surgery by a qualified gender identity disorder evaluator pursuant to IDOC SOP 401.06.03.501 and NCCHC MH-A-01 Access to care, and P.-G-02 special needs.

I have tried to solve this problem informally by:

Sending concern forms to clinician Houser on 3/03/16, clinician Irvin on 2/22/16 and Dr. Scott Eliason on 3/16/16, and 3/25/16. (all attached)

I suggest the following solution for the problem:

I want to be scheduled immediately by a qualified gender identity disorder evaluator for a medical/mental health evaluation for sex reassignment surgery!

Level 1 - Initial Response

| | | | |
|-----------------|------------|--------------------|-------------|
| Date Forwarded: | 04/07/2016 | Date Returned: | 04/08/2016 |
| Date Due Back: | 04/21/2016 | Level 1 Responder: | BREWER, GEN |

The response from the staff member or person in charge of the area/operation being grieved:

Please submit a concern form to Dr. Eliason for this request.

Level 2 - Reviewing Authority Response

| | | | |
|-----------------|------------|----------------------------|--------------|
| Date Forwarded: | 04/08/2016 | Grievance Disposition: | MODIFIED |
| Date Due Back: | 04/22/2016 | Level 2 Responder: | HOFER, AARON |
| Date Returned: | 04/13/2016 | Response sent to offender: | 04/18/2016 |

Your grievance has been reviewed and I find:

Please address any and all GID questions/concerns to Dr. Eliason. Dr. Eliason is the expert and has the decision making ability in this area. Thank you.

II 160000391

EDMO, MASON DEAN

94691

Offender Appeal

Offender Comments:

Dr. Eliason is not an expert in GID, does not have any substantial treatment experience in treating persons w/ GID. Dr. Eliason is restricted, restrained, land / or denied from utilizing the standard of care typically used in treating GID/ GD; wpath, Dr. Eliason further delays and / or interferes with adequate medical care of my GID by stating he is a expert and / or specialist. I still am being denied timely and adequate medical treatment for my GID by a medical / mental health provider qualified to exercise judgment about my particular medical / mental health condition of GID.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 04/25/2016 | Grievance Disposition: | MODIFIED |
| Date Forwarded: | 04/29/2016 | Level 3 Responder: | SIEGERT, RONA |
| Date Due Back: | 05/17/2016 | Response sent to offender: | 05/19/2016 |
| Date Returned: | 05/17/2016 | | |

Your appeal has been reviewed and I find:

Offender Edmo:

Dr. Eliason is a board certified physician with a specialty in psychiatry. If Dr. Eliason feels that it is necessary for you to be evaluated by a "qualified gender identity disorder evaluator" he will provide that service to you. If you have further questions or concerns please follow up with Dr. Eliason.

Rona Siegert RN, CCHP-RN
Idaho Department of Correction

II 160000517

EDMO, MASON DEAN

94691

Level 2 - Reviewing Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Forwarded: | 05/12/2016 | Grievance Disposition: | MODIFIED |
| Date Due Back: | 05/28/2016 | Level 2 Responder: | CLARK, JEREMY |
| Date Returned: | 05/23/2016 | Response sent to offender: | 05/23/2016 |

Your grievance has been reviewed and I find:

Per Policy 401.06.03.501, the Management and Treatment Committee (MTC) is responsible for reviewing and determining housing placement for inmate who have Gender Dysphoria. The committee is aware of your desire to be moved out of Unit 16, and this will be reviewed in our next MTC meeting which is currently scheduled for June 1st, 2016. The decision of the committee will be given to you shortly after that meeting.

Offender Appeal

Offender Comments:

SOP # 401.03.501; MTC determines the placement for GID inmates, etc. Clinician Hahn had informed me that the MTC had determined my moving out of BHU would not be possible because of my behaviors, DOR's and risk in other units. I do not agree and believe these are pretext reasons to keep me in BHU because of my membership in a suspect class, namely, GID inmate a deliberate attempt to keep me uncomfortable and frustrated because I am a GID inmate. I previously lived within BHU but had an issue because of my medical provider's deliberate indifference to my medical needs and hormone monitoring. I've had more DOR's in BHU because of bias staff and because of unstable inmates. Please move me to General Population.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|----------------|
| Date Appealed: | 06/08/2016 | Grievance Disposition: | MODIFIED |
| Date Forwarded: | 06/10/2016 | Level 3 Responder: | DOWELL, ASHLEY |
| Date Due Back: | 06/26/2016 | Response sent to offender: | 06/29/2016 |
| Date Returned: | 06/29/2016 | | |

Your appeal has been reviewed and I find:

Thank you for outlining your concerns about your current housing and placement. As Clinical Supervisor Clark noted, the Management Treatment Committee (MTC) is responsible for reviewing and determining placement for inmates with Gender Dysphoria per Policy 401.06.03.501. You are correct in that the MTC recommended your continued placement in the Behavioral Health Unit on June 1, 2016. Per Policy 401.06.03.501, the Administrative Review Committee (ARC) reviews the Management and Placement Plan recommended by the MTC, consults with members of the MTC to address questions or concerns, and recommends approving or denying the plan. The Director of IDOC then chooses whether or not to accept the ARC's recommendation. As your request for placement is still in the review process, a final determination regarding housing and placement has not been made.

Ashley Dowell, LCPC, CCHP-MH
Deputy Chief- Prisons Division
Idaho Department of Correction



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|--------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 160000599 |
| | | Category: | MEDICAL/HEALTHCARE |

Offender Grievance Information

Date Received: 06/01/2016

The problem is:

I am being denied access to care by IDOC officials, specifically, ISCI warden Yordy, as he does not allow my medical/mental health providers to issue me a medical memo for panties for my psychological support of treating my GID. He allows me to have bras but denies panties; both are women's undergarments, this makes no sense at all, both are needed for treating my GID.

I have tried to solve this problem informally by:

submitting HSR # 845911 on 05/21/16, concern forms: Dr. Eliason on 05/20/16, ISCI warden Yordy on 06-24-15 (All Attached)

I suggest the following solution for the problem:

Be allowed to purchase, possess and wear female panties for the psychological improvement and as a medically necessary treatment for my GID as according to the World Professional Associations of Transgender Health ("WPATH").

Level 1 - Initial Response

| | | | |
|-----------------|------------|--------------------|----------------|
| Date Forwarded: | 06/01/2016 | Date Returned: | 06/09/2016 |
| Date Due Back: | 06/15/2016 | Level 1 Responder: | BENTON, AMANDA |

The response from the staff member or person in charge of the area/operation being grieved:

Bra memos are issued on an "as needed" basis to support development of breast tissue. Panties are not medically indicated or necessary at this time.

Level 2 - Reviewing Authority Response

| | | | |
|-----------------|------------|----------------------------|--------------|
| Date Forwarded: | 06/09/2016 | Grievance Disposition: | DENIED |
| Date Due Back: | 06/23/2016 | Level 2 Responder: | HOFER, AARON |
| Date Returned: | 06/10/2016 | Response sent to offender: | 06/13/2016 |

Your grievance has been reviewed and I find:

I am sorry for any inconvenience this has caused. Medical does not deal with panties. Please speak with Dr. Eliason for any and all information pertaining to G.I.D. Thank you

II 160000599

EDMO, MASON DEAN

94691

Offender Appeal

Offender Comments:

I've already talked to Dr. Eliason on (04/20/16) about the pantie issues and he has told me that ISCI Administrators/ISCI Warden Yordy will not allow Dr. Eliason to issue me a medical memo so that I may get panties from laundry or purchase on my own. This medical memo is necessary because allowing me to have panties support my mental health and help alleviate some of my gender dyshoria. I talked to a provider on (06/14/16) about this issue as well and he said he would issue a medical memo so that I can request panties from laundry (or SBWCC Laundry) or I be allowed to purchase my own. If I am denied it can be deliberate indifference to my serious medical need of appropriate undergarments for treating my gender dyshporia.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 06/22/2016 | Grievance Disposition: | DENIED |
| Date Forwarded: | 06/23/2016 | Level 3 Responder: | SIEGERT, RONA |
| Date Due Back: | 07/09/2016 | Response sent to offender: | 07/06/2016 |
| Date Returned: | 07/06/2016 | | |

Your appeal has been reviewed and I find:

Inmate Edmo:

Medical providers have determined that "panties" are not medically necessary. Please address your gender dysphoria issues with your assigned clinician.



Idaho Department of Correction Grievance Form

| | | | |
|------------------|------------------|-----------|-----------------------|
| Offender Name: | EDMO, MASON DEAN | Location: | ISCI |
| Offender Number: | 94691 | Number: | II 160001274 |
| | | Category: | PRISON RAPE ELIM ACT- |

Offender Grievance Information

Date Received: 12/12/2016

The problem is:

08/10/2016 I was raped & suffer personal injury because ISCI Warden Yordy & Sgt. Meldrum failed to protect me by housing me; an extremely feminine appearing / diagnosed transsexual woman within unit 09; the only unit of ISCI without emergency call buttons within the cells for offender emergencies.

I have tried to solve this problem informally by:

Informing Sgt. Meldrum on or around July 2015 about no emergency call buttons in 9, moved to unit 11; concern form to Cpl. Taylor for cell change on 08/13/16 (attached)

I suggest the following solution for the problem:

Compensation for personal injury; and a proposed date of when IDOC updates it PREA; notification that IDOC is in full compliance the the National PREA standards. (IDOC SOP 325 does not have time limit for rape to be grieved.)

Level 1 - Initial Response

| | | | |
|-----------------|------------|--------------------|-------------------|
| Date Forwarded: | 12/13/2016 | Date Returned: | 12/27/2016 |
| Date Due Back: | 12/27/2016 | Level I Responder: | STEFFEN, CATHY D. |

The response from the staff member or person in charge of the area/operation being grieved:

Offender Edmo,

Your PREA claim was found to be unsubstantiated Sep 30, 2016. You received a copy. This is Reference to the Aug 2016 allegations. You tried to file a grievance reference the PREA outcome and were denied from filing because it was over 30 days (Nov 2016). I met with you on 12/9/2016 to let you know about filing the deadlines per SOP. On 12/13/16 I told you could file a grievance. You told me you had sent a grievance and memo to the Warden on 12/12/2016.. This is the Grievance. Nothing has changed about the PREA findings.

When updates to IDOC PREA practices happen, you will be informed as would all offenders.

II 160001274

EDMO, MASON DEAN

94691

Level 2 - Reviewing Authority Response

| | | | |
|-----------------|------------|----------------------------|-----------------|
| Date Forwarded: | 12/29/2016 | Grievance Disposition: | MODIFIED |
| Date Due Back: | 01/14/2017 | Level 2 Responder: | COBURN, GARRETT |
| Date Returned: | 12/30/2016 | Response sent to offender: | 01/06/2017 |

Your grievance has been reviewed and I find:

Your request for compensation is denied. The updated PREA policy is in process. There is not a firm date as to when this will be completed, however I expect it to be completed in the next several months. It will take some time for IDOC to become fully compliant with all of the national PREA standards, however we are already taking measures to become compliant. All inmates will be notified of the changes as they are implemented. We allowed you to grieve your issue and this response is in line with your suggested solution. Finally, I will reiterate that after an investigation, your claim was deemed to be unsubstantiated.

Offender Appeal

Offender Comments:

Part of the compensation for injury I am requesting I to not be moved to unit 9 because of the cells not having emergency call buttons, and to be given preference of cell mates, if allowable. Unsubstantiated, simply means not enough facts to deem the incident happened and not enough facts to deem the incident did not happen, IDOC Dep. Warden Coburn is treating this PREA case as not happening. Also install call boxes in unit 8-9 for safety and security reasons.

Level 3 - Appellate Authority Response

| | | | |
|-----------------|------------|----------------------------|---------------|
| Date Appealed: | 02/07/2017 | Grievance Disposition: | DENIED |
| Date Forwarded: | 02/07/2017 | Level 3 Responder: | YORDY, HOWARD |
| Date Due Back: | 02/23/2017 | Response sent to offender: | 02/28/2017 |
| Date Returned: | 02/24/2017 | | |

Your appeal has been reviewed and I find:

As stated by DW Coburn, compensation will not be granted. Allowing inmates to pick their cellmate is not permitted by policy, that request is also denied.

DW Coburn followed PREA policy having the allegation investigated, by PREA guidelines, it was deemed unsubstantiated. Any and all reports are taken seriously and followed up with each report handled per the guidelines.

Safety of inmates is a major concern of the IDOC as well as staff here at ISCI. Be assured we are always looking at ways to improve safety within the facility.

Warden Yordy