

PREA Agency Audit Report: Final

Name of Agency: Pennsylvania Department of Corrections

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 08/10/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Brian Sutherland	Date of Signature: 08/10/ 2023

AUDITOR INFORMATION	
Auditor name:	Sutherland, Brian
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Start Date of On-Site Audit:	
End Date of On-Site Audit:	

AGENCY INFORMATION	
Name of agency:	Pennsylvania Department of Corrections
Governing authority or parent agency (if applicable):	
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Agency Chief Executive Officer Information:	
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Agency-Wide PREA Coordinator Information			
Name:	Dave Radziewicz	Email Address:	dradziewicz@pa.gov

Agency AUDIT FINDINGS	
Summary of Audit Findings	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
1	<ul style="list-style-type: none"> 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
Number of standards met:	
8	
Number of standards not met:	

	0	
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Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Standard 115.11 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Pennsylvania Department of Corrections Pre-Audit Questionnaire responses 2. DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual 3. Department of Corrections Secretary’s Office: Areas of Responsibility Document, March 7, 2023 4. Agency PREA Coordinator Position Description, September 21, 2021

Interviews:

1. PREA Coordinator

Site Review Observations:

1. Reviewed the test version of the new agency risk screening process
2. Reviewed the agency data collection improvement process
3. Reviewed the agency contract monitoring process

Findings (By Provision):

115.11 (b) - Policy DC-ADM 008, Section 1A, pages 1-2, explains the agency employs an upper-level, agency wide PREA Coordinator and designates a PREA Compliance Manager for each facility. The PREA Coordinator position reports directly to the Chief of Standards, Audits, Assessments, and Compliance, and this position is documented in the agency organizational chart as an upper-level Chief position. The auditor reviewed a signed position description by the Statewide PREA Coordinator, and this document was certified on September 21, 2021. The position description emphasized the importance of regulated duties and requirements. The interview with the PREA Coordinator indicated sufficient time and authority to develop, implement, and oversee efforts to comply with the PREA Standards. The PREA Coordinator explained the duties and responsibilities associated with the position, direct communication with leadership staff, and confirmed the agency support toward improving the sexual safety of the facilities. There is a total of 34 agency wide PREA Compliance Managers that communicate with the agency wide PREA Coordinator for support and PREA audit compliance. There are three total staff that provide support for the Agency PREA Compliance Unit.

Conclusion: The interview conducted with the PREA Coordinator confirmed sufficient time and authority to develop, implement, and oversee the efforts toward PREA compliance. Communication between this auditor and the PREA Coordinator was professional, timely, and truly knowledgeable. The interview with the PREA Coordinator indicated knowledge regarding the agency zero tolerance policy toward all forms of sexual abuse and sexual harassment. The PREA Coordinator was always accessible throughout the auditing process, responded to emails and phone calls immediately, and provided adequate responses during the on-site review. The auditor confirmed an agency policy mandating zero tolerance of all forms of sexual abuse and sexual harassment. The agency has a documented implementation plan outlining the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The agency PREA Coordinator continues to enhance efforts toward PREA compliance by attending collaborative meetings with other states, obtaining grant funding for additional data collection options, creating innovative

	<p>options for the confined persons such as bookmarks and cards, and continuously developing new methods of documentation and electronic processing for data collection. Based on the evidence provided the auditor has determined the agency exceeds this standard and no corrective action is required.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.12 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Pennsylvania Department of Corrections Pre-Audit Questionnaire responses 2. DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual 3. Statement of Work-Residential Housing and Treatment Initiation to Qualify (ITQ) Contract enacted June 28, 2018 4. PREA Contract Compliance Monitoring Report, pages 1-3, April 22, 2019 5. PREA Contract Compliance Monitoring Worksheet, pages 1-3, PREA Policy, and PREA Audit Final Report 6. PDOC, PREA Contract Compliance Monitoring report, pages 1-3, Columbia County Prison, and Butler County Prison, October 21, 2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Contract Administrator 2. Agency PREA Coordinator <p>Findings by Provision:</p> <p>115.12 (a-b) Agency policy DC-ADM 008, Section 2, page 1 describes, the Department shall include in any new contract or contract renewal for the housing of a reentrant</p>

with a private entity or other entities, including other government agencies, the entity's obligation to adopt and comply with the Prison Rape Elimination Act (PREA) Standards and the Department's policies related to PREA compliance. The agency PREA Coordinator serves as the agency contract administrator and the interview indicated all community confinement contracts renewed on April 1, 2019, will remain in effect until January 31, 2024. The auditor confirmed this statement during the Agency's Contract Administrator interview. The PADOc facilities do not have any responsibility, separate from that on the agency level, to enter into or maintain contracts for confinement of reentrants with other agencies or jurisdictions. This process is performed on the Pennsylvania Department of Corrections agency level.

The Pennsylvania Department of Corrections currently has 13 contracts for confinement of its reentrants with 24 community confinement facilities. These contracts include: Gaudenzia (multiple sites), GEO Group (multiple sites), Kintock Inc., Self Help Movement Inc., Transitional Living Centers (multiple sites), Firetree (multiple sites), Hogar Crea (multiple sites), Keystone Correctional Services, Lehigh County Work Release (has not been utilized since March of 2020), Luzerne County Work Release (has not be utilized since March of 2020), Gateway (also known as CTC) (multiple sites) Renewal Inc. (multiple sites), and Tomorrow's Hope Inc.

The Pennsylvania Department of Corrections entered into a contract with the Columbia County and Butler County Prison systems for temporary housing of parole violators. The auditor reviewed the PREA Contract Compliance Monitoring Report for both agencies and confirmed PREA compliance is required within the contract. The document indicated both facilities have been audited during the previous audit cycle. The Auditor reviewed the PREA Contract Compliance Monitoring Report and Monitoring Worksheet of each agency. The contract monitoring activity was conducted within the dates required by agency policy. The agency performs status checks regarding the contract policy toward PREA and the current PREA Audit Report. The PREA Coordinator explained all contracts require agency monitoring and are currently completed twice per year. Once in the form of document reviews in the Fall of the year. Starting in the spring of 2023, the agency's PREA Compliance Division began conducting onsite inspections of contracted sites. The agency contract monitoring process is very impressive, and the requirements are documented in agency policy DC-ADM 008.

Conclusion: Based upon the review and analysis of all evidence provided, the auditor has determined that the agency is fully compliant with this standard. The agency level does require all contract participants to comply with the PREA standards. The agency level of compliance monitoring meets the overall expectations of the standard as the agency has developed policy, procedure, and practice documentation and forms. The PAQ documentation provided an extensive amount of contract monitoring as the agency includes the PREA Audit Report, contract policies, and a biannual monitoring practice toward compliance. No corrective action is required for this standard.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.17 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Pennsylvania Department of Corrections Pre-Audit Questionnaire responses
2. Policy 1.1.4 Centralized Clearances Procedure Manual, Section 4, Centralized Clearance Check Procedures
3. 31 Random Staff Personnel Files
4. 4.1.1 Human Resources and Labor Relations Procedure Manual, Section 41, Employment of Job Applicants having Prior Adverse Contacts with Criminal Justice Agencies (CJA)
5. DC-ADM 008, Section 20, page 4, PREA Procedures Manual, Data Collection and Retention
6. 4.1.1 Human Resources and Labor Relations Procedure Manual, Section 40, pages 1-3, Conducting Pre-Employment Background Investigations
7. 4.1.1 Employee Arrests - Felony, Misdemeanor, and Summary Offenses, Section 3, page 1

Interviews:

1. Agency Human Resource Staff
2. PREA Coordinator
3. Background Investigation Staff

Site Review Observations:

1. 31 Random Staff Personnel Files - One File from Each Facility - Two Community Corrections Centers did not have new hires for the past 12-months.

2. Biometric Screening Equipment and Identification

3. 33 Contractor Background Screenings Confirmed

Findings by Provision:

115.17 (a) Policy 1.1.4, Section 4, page 3 prohibits hiring or promoting anyone who may have contact with confined persons and prohibits enlisting the services of any contractor who may have contact with confined persons who has engaged in, been convicted of, or civilly/administratively adjudicated in sexual abuse in a prison, jail, lockup, community confinement facility, or other institution. This was confirmed during the interview with one agency Human Resource staff member. Each staff member must provide responses to specific questions relative to PREA during the submission of the application. A background questionnaire form is completed authorizing the facility to conduct a background screening. The auditor reviewed 31 agency staff personnel files that indicated a response to these PREA related questions. This included one facility staff person file from each facility - Two Community Corrections Centers did not have new hires for the past 12-months.

115.17 (b) Policy 1.1.4, Section 4, page 4 requires the agency to consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with confined persons. This was confirmed during the interview with one Human Resource staff member. The auditor reviewed 31 staff personnel files indicating their signatures on the background release forms. All background checks were completed prior to offering employment.

115.17 (c) The Pennsylvania Department of Corrections agency policy 4.1.1, Section 40, pages 1-3 indicate a screening is required by law prior to hiring. This includes the following: employment history checks, criminal history checks, and the National Sex Offender Registry screenings. These checks are completed prior to hiring new employees who may have contact with confined persons, criminal background records checks and efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse, or any resignation during a pending investigation of an allegation of sexual abuse is completed. The auditor spoke with the PREA Coordinator and determined 3015 agency criminal background checks were completed in the past 12 months. These record checks were through the National Crime Information Center, and all current staff background checks are performed prior to employment. The background checks include the following: Biometric information, driving records, investigation files, licensure, military records, and drug related convictions. The Preaudit questionnaire explained the agency performed 3015 background checks in the past 12 months. The agency approved 1856 background checks for hiring purposes and this determined the agency hired 62% of the background checks completed in the past 12 months.

115.17 (d) The Pre-Audit questionnaire indicated 2194 background checks were completed for staff covered under contracts for services that may have contact with

confined persons. This number was confirmed during the PREA Coordinator interview. The auditor reviewed 33 background checks that were conducted for contracted services.

115.17 (e) Policy 1.1.4, Section 4, pages 1-8 indicate criminal background checks conducted on all current employees, volunteers, and contractors, at least every 2 years. This was confirmed during the human resource staff interview. This is captured within the agency reporting mechanism and discussed during the human resource interview. The system that captures this information is the Pennsylvania Justice Network (JNET). A centralized clearance check form is submitted, and the system consistently captures clearance information that includes driver license information, Pennsylvania rap sheets, Interstate Identification Rap Sheets, visitor tracking information, confined persons telephone calls, email and money transactions, and prior employment information.

115.17 (f) All applicants and employees, who may have contact with confined persons, will be asked about previous misconduct in all written applications, interviews for hiring or promotion, or during written evaluations. This was confirmed during the review and interview with the agency human resource staff member. The auditor reviewed 31 staff files and confirmed the signed document was present asking the specific questions relative to sexual abuse, sexual assault, and sexual misconduct.

115.17 (g) Employees must disclose all misconduct allegations and any material omission or false information regarding misconduct will be grounds for termination. The policy DC-ADM 008, Section 20, page 4 explains failure to report criminal charges and convictions may result in disciplinary action, demotion, and termination. In addition, 31 staff personnel files were reviewed, and no issues were determined regarding this practice.

115.17 (h) The agency tracking mechanism is documented on the applicant summary form and includes a criminal records check, valid driver's license, personal interview, proper documentation provided, social security number compliance, certification verification, correctional reference checks to include prior employers, resignations, and substantiated allegations. The PREA Coordinator provided documentation demonstrating a criminal history and a driver history inspection was previously conducted for staff. The PREA Coordinator confirmed a criminal background check is conducted prior to offering promotional opportunities and the auditor verified this process during the employee file reviews.

Conclusion: Based on the evidence reviewed by the auditor to include 31 staff personnel files, interviews with one agency human resource staff, agency policy, and 33 contractor reviews, the auditor finds no discrepancies within this standard required for corrective action. The steps considered by the agency to ensure the safety of the confined persons with qualified staff are impressive.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.42 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Pennsylvania Department of Corrections Pre-Audit Questionnaire responses
2. Agency Policy DC-ADM 008 Sexual Abuse/Sexual Assault Risk Screening
3. PREA Accommodation Committee Checklist (PAC)
4. PA DOC PREA Risk Assessment Tool (PRAT)
5. PREA Accommodation Committee Reassessment Checklist (PACR)
6. Agency Policy 13.8.1, Access to Mental Health Care Procedures Manual, Section 1, Psychological Services, pages 1-13
7. SCI Coal Township PREA Accommodation Committee Referral Packet
8. SCI Somerset PREA Accommodation Committee Referral Packet
9. SCI Greene PREA Accommodation Committee Referral Packet

Interviews:

1. PREA Coordinator
2. Transgender Review Committee Member

Site Review Observations:

1. Reviewed the PREA Risk Screening Process
2. Reviewed the PREA Risk Screening Reassessment Process
3. Reviewed Confined Person Files
4. Reviewed the PREA Accommodation Committee Checklist (PAC)

Findings (By Provision):

115.42 (c) Agency policy DC-ADM 008, Section 9, page 4-5 indicates the agency utilizes the information collected from the risk screenings to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. This information was confirmed during the interview with the agency PREA Coordinator as the PREA Coordinator advised all agency risk screenings are objective, case by case evaluations of the confined person with their own perceptions and views being considered. The views of the confined person are recognized along with the tally provided by the staff on the risk assessment document. The PREA Coordinator interview indicated utilizing the risk screening instruments to ensure all bed assignments, work assignments, education, and program assignments are carefully reviewed to ensure potential abusers are not interacting with potential victims.

Agency policy DC-ADM 008, Section 9, page 5 indicates the agency will make individualized determinations on a case-by-case basis to ensure the residents health and safety and personal views are considered. Reassessments shall be conducted by the assigned counselor between calendar day 20 and 30 of every confined persons arrival in the system. Considerations for single cell housing or double cell housing will be determined using the risk assessment tool. The PREA Coordinator confirmed the Unit Management staff will review and recognize an imbalance of power within the cell assignment. This is performed during individual meetings, conversations, group activities, review of the disciplinary actions, and considerations based on the confined persons personal views.

The agency policy DC-ADM 008, Section 19, pages 1-9 explain the departments approach to working with transgender and intersex confined persons. Importantly, this policy explains the classification process and ensures the staff effectively interact professionally and respectfully with this specialized population. Each facility is required to develop a Plan of Action to prepare for reception and housing of transgender and intersex populations. The PREA Accommodation Committee (PAC) is utilized to measure the proper placement toward housing, security, programming, and other needs. The following methods of interaction are described within this policy: Reception and Classification, Prison Rape Elimination Act (PREA) Risk Assessment Tool (PRAT), Mental Health Referral Form, Access to Health Care Procedures Manual, PREA Accommodation Committee Checklist (PAC), PREA Accommodation Committee Review, Administrative PREA Accommodation Committee (APAC), Transfers, Case Management, Searches, Commissary, and Special Accommodations. Each confined person is considered on a case-by-case basis and the final determination is mandated by the Executive Staff as recommended by the Administrative PREA Accommodation Committee (APAC). The A-PAC consists of a representative from each of the following specialties: Psychology office, Bureau of Health Services, Security Division, and a representative from the Lesbian, Gay, Bisexual, Transgender, and Intersex (LGBTI) Subject Matter Expert community. The auditor reviewed five PREA Accommodation Committee Checklist (PAC) decisions submitted by the PREA Coordinator for three separate facilities. PAC meetings are

	<p>conducted every six months and the confined person will be reevaluated at that time.</p> <p>Conclusion: Based on the review and analysis of the following available evidence: agency policy governing the use of screening information, documentation of the use of screening, documentation of housing decisions, reassessments, and agency housing considerations for the special populations, the auditor has determined that the agency is fully compliant with this standard regarding the risk of victimization and abusiveness.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Standard 115.66 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Pennsylvania Department of Corrections Pre-Audit Questionnaire Responses 2. Policy - 4.1.1 Human Resources and Labor Relations, Section 5 pg. 1-3 3. Memorandum from the Secretary of Corrections 4. Pennsylvania Doctors Alliance Agreement 5. American Federation of State, County and Municipal Employees Agreement 6. Correctional Institution Vocational Education Association, Pennsylvania State Education 7. Association, National Education Association Agreement 8. Federation of State Cultural and Educational Professionals Agreement 9. Pennsylvania State Corrections Officers Association Agreement 10. OPEIU Healthcare Pennsylvania Memorandum of Understanding 11. SEIU Agreement 12. Service Employees International Union Healthcare Pennsylvania, CTW, CLC

Agreement

Interviews:

1. Agency Head
2. Agency PREA Coordinator

Site Review Observations:

1. Reviewed a memo provided by the PREA Coordinator discussing evidence supported by a previous audit.

Findings (By Provision):

115.66 (a-b) The Pennsylvania Department of Corrections has not entered into any agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with confined persons pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. In deciding to suspend an employee pending investigation, the Department must be able to demonstrate that the "nature of the allegations" is such that there is cause to remove the employee from the institution pending investigation and not that the employee committed the offenses. The FLSA regulations, for exempt employees, permit suspensions of less than a full work week for violations of written workplace policies applicable to all employees. This provision applies to applicable written work rules which prohibit serious workplace misconduct, which includes, but is not limited to, workplace violence, sexual abuse, sexual harassment, substance abuse, internet access policies, Code of Ethics violations, or violations of state or federal law.

Discipline for these infractions should be consistent with Section 6 of this procedure's manual. The Agency Head and the PREA Coordinator interviews explained all labor contracts expired on June 30, 2023, and remain in negotiations at this time. The current agreements will remain in effect until the new agreements are reached.

Conclusion: The auditor reviewed the evidence provided by the agency and found no evidence to deny satisfactory compliance toward this standard. These documents do not limit the agency's ability to remove alleged staff sexual abusers from contact with any confined persons pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The agency PREA Coordinator interview confirmed this process, and the Agency Head interview indicated disciplinary action will be followed by notification to the Pennsylvania State Police for criminal acts and certifying bodies for certification review.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.87 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Pennsylvania Department of Corrections Pre-Audit Questionnaire Responses
2. DC-ADM 008, Section 2, PREA Procedures Manual, Contracting
3. DC-ADM 008, Section 17, PREA Procedures Manual, Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation
4. DC-ADM 008, Section 18, PREA Procedures Manual, Investigating Allegations of Sexual Abuse, Sexual Harassment, and Retaliation
3. DC-ADM 008, Section 20, PREA Procedures Manual, Data Collection and Retention

Interviews:

1. Agency Head
2. Agency PREA Coordinator
3. Contract Administrator

Site Review Observations:

1. Discussed the Incident Review Team Process
2. Reviewed the PREA Tracking System
3. Reviewed six allegations documented in the PREA Tracking System from contracted facilities

Findings (By Provision):

115.87 (a-f) The auditor reviewed the agency uniform data for every allegation of sexual abuse/sexual harassment and compared the data to the most recent version of

the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The agency aggregates incident-based sexual abuse data annually and includes definitions as appropriate to the Survey of Sexual Violence. The auditor reviewed the data collected in 2017 to 2022 as the data is compiled for a one-year (calendar) period after December.

The agency operates facilities and contracts with other agencies for the confinement of its confined persons. The PREA Compliance Managers at each facility securely maintain all documentation used to compile the information and the Pennsylvania State Police maintains the investigative data and records. Approved data is posted on the Agency website and available upon request by the Department of Justice. The Agency Head interview confirmed the use of all facility data relative to this standard. Agency policy explains the Community Corrections facilities request a PREA tracking number through the BCC-Management Operation Center (MOC). This information is entered into the Department’s PREA Tracking System by the BCC PREA Captain/ designee for data collection purposes. The auditor reviewed six allegations documented in the PREA Tracking System from contracted facilities. The auditor reviewed agency data collection system improvements, contract monitoring procedures, the 2022 agency PREA annual report, and the test version of the new risk screening process during the onsite review.

Conclusion: The auditor reviewed the agency policies for collecting data on sexual abuse allegations, the instrument used for collecting the data, the set of definitions applied, the agency website, and a sample of the historical data used to determine the agency is fully compliant with the provisions of this standard. No corrective action is required.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.88 Analysis
	The following evidence was analyzed in making compliance determinations:
	Documents:
	1. Pennsylvania Department of Corrections Pre-Audit Questionnaire Responses
	2. DC-ADM 008, Section 2, PREA Procedures Manual, Contracting
	3. DC-ADM 008, Section 17, PREA Procedures Manual, Discipline Related to Sexual

	<p>Abuse, Sexual Harassment, and Retaliation</p> <p>4. DC-ADM 008, Section 18, PREA Procedures Manual, Investigating Allegations of Sexual Abuse, Sexual Harassment, and Retaliation</p> <p>5. DC-ADM 008, Section 20, PREA Procedures Manual, Data Collection and Retention</p> <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Head 2. Agency PREA Coordinator 3. Agency Contract Administrator <p>Findings (By Provision):</p> <p>115.88 (a-d) Agency policy requires each facility to review data collected and aggregated to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. This auditor reviewed the data posted on the agency website that includes the total number of substantiated, unsubstantiated, and unfounded allegations of sexual misconduct by confined persons and staff from 2017 to 2022. This information is approved by the Agency Secretary of Corrections and posted on the agency website for review. The agency PREA Coordinator explained this information is utilized to identify problem areas and initiate corrective action measures when appropriate. The Agency Head confirmed the use and data associated with this report during the interview. No facility data was redacted from the annual report for publication, and this was verified by the agency PREA Coordinator.</p> <p>Conclusion: The auditor reviewed evidence provided by the agency such as corrective action plans, an annual report of findings, website materials, and found the agency is fully compliant with the provisions of this standard. No further action is required.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Standard 115.89 Analysis
	The following evidence was analyzed in making compliance determinations:

Documents:

1. Pennsylvania Department of Corrections Pre-Audit Questionnaire Responses
2. DC-ADM 008, Section 2, PREA Procedures Manual, Contracting
3. DC-ADM 008, Section 17, PREA Procedures Manual, Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation
4. DC-ADM 008, Section 18, PREA Procedures Manual, Investigating Allegations of Sexual Abuse, Sexual Harassment, and Retaliation
5. DC-ADM 008, Section 20, PREA Procedures Manual, Data Collection and Retention

Interviews:

1. Agency Head
2. PREA Coordinator
3. Agency Contract Administrator

Findings (By Provision):

115.89 (a-d) Agency policy DC-ADM 008 Section 20, PREA Procedures Manual, Data Collection and Retention explains:

1. The Department shall make all aggregated sexual abuse data information from facilities under its direct control and contracted facilities, readily available to the public through the Department website, at least annually.
2. The Annual PREA Report shall be approved by the Secretary and posted on the Department's website by June 30 of each year.
3. The Department shall securely retain all aggregate PREA data, on the Department's secure servers, collected for a period of no less than ten years after the date of the initial collection unless federal, state, or local law requires otherwise.

Specific identifying information collected for reporting purposes shall be redacted so that no individual is identifiable. In addition, the Department may redact specific material from the reports when publication would present a clear and specific danger to a facility but must indicate the nature of the material redacted.

Agency policy is very specific regarding contracted facility contract monitoring. Each Contract Agency shall be responsible for site specific data collection required by this procedure's manual and the PREA Standards. Contract Agencies shall comply with

the reporting and publication requirements of aggregate data specific to the Contracted Agency. The Department collects aggregate data for Department-Funded Reentrants (DFR) at each of its contracted sites through its PREA Tracking System; however, requires aggregate data for incidents involving only Non-Department-Funded Reentrants (NDFR) at each site to fulfill its data collection obligations.

Examples include:

- a. NDFR is the alleged victim, and a Contract Employee is the alleged abuser; or
- b. NDFR is the alleged victim and a NDFR is the alleged abuser.

Each Contract Agency shall be responsible for reporting the information specified to the Department PREA Coordinator/designee for inclusion in the Department’s annual report within 15 business days of request.

The PREA Coordinator interview confirmed all documentation utilized for data collection is maintained by the facilities PREA Compliance Managers. The PREA Compliance Manager collects the data and maintains electronic files on a secure server. The data report is approved by the Agency Secretary of Corrections and the annual report is posted on the Agency website annually. The auditor reviewed the report and did not observe any personally identifying information. Agency policy requires the facility shall maintain sexual abuse data collected for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

Conclusion: Based on the auditor's review of the agency policy, agency website, interviews, and historical data, the Pennsylvania Department of Corrections is fully compliant with the provisions of this standard. No further action is required.

115.401	Frequency and scope of audits
	Auditor Overall Determination:
	Auditor Discussion
	<p>Standard 115.401 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents:</p> <ol style="list-style-type: none"> 1. Pennsylvania Department of Corrections Pre-Audit Questionnaire Responses 2. DC-ADM 008, Section 2, PREA Procedures Manual, Contracting

3. DC-ADM 008, Section 17, PREA Procedures Manual, Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation
4. DC-ADM 008, Section 18, PREA Procedures Manual, Investigating Allegations of Sexual Abuse, Sexual Harassment, and Retaliation
5. DC-ADM 008, Section 20, PREA Procedures Manual, Data Collection and Retention

Interviews:

1. Agency Head
2. PREA Coordinator
3. Agency Contract Administrator

Site Review Observations:

1. Reviewed the Agency Website and Facility Data
2. Reviewed the Agency PREA audit reports for the previous audit cycles

Findings (By Provision):

115.401(a-b) The Pennsylvania Department of Corrections ensured all agency PREA audits were conducted during the previous audit cycle PREA audit periods. The auditor verified all facility reports were posted on the agency website and the auditor reviewed audit reports for the following cycle periods:

Audit Cycle 4 - Year 1 - 2022/2023 - Erie CCC - Progress CCC - SCI Albion - SCI Cambridge Springs - SCI Greene - SCI Laurel Highlands - SCI Mercer - SCI Rockview - SCI Somerset - SCI Waymart - Scranton CCC

Audit Cycle 3 - 2022 - Johnstown CCC - SCI Fayette - SCI Houtzdale - SCI Huntingdon - SCI Pine Grove - SCI Quehanna Boot Camp - SCI Smithfield - Wernersville CCC

Audit Cycle 3 - 2021 - Harrisburg CCC - Philadelphia CCC - Pittsburgh CCC - SCI Camp Hill - SCI Chester - SCI Coal Township - SCI Dallas - SCI Forest - SCI Frackville - SCI Mahanoy - SCI Muncy - SCI Phoenix - York CCC

Audit Cycle 3 - 2020 - Progress CCC - SCI Cambridge Springs - SCI Greene - SCI Laurel Highlands - SCI Mercer - SCI Somerset

Audit Cycle 3 - 2019 - Erie CCC - SCI Albion - SCI Benner Township - SCI Rockview - SCI Waymart - Scranton CCC

Audit Cycle 2 - 2019 - Philadelphia CCC - Pittsburgh CCC - Progress CCC - SCI Camp

Hill - SCI Forest - SCI Muncy - SCI Phoenix - SCI Pine Grove - Sharon CCC - Wernersville CCC

Audit Cycle 2 – 2018 - Harrisburg CCC - Johnstown CCC - Philadelphia CCC - SCI Chester - SCI Dallas - SCI Retreat - SCI-Waymart - Scranton CCC - York CCC

Audit Cycle 2 – 2017 - Erie CCC - SCI Albion - SCI Benner Township - SCI Cambridge Springs - SCI Coal Township - SCI Fayette - SCI Frackville - SCI Greene - SCI Houtzdale - SCI Huntingdon - SCI Laurel Highlands - SCI Quehanna Boot Camp - SCI Rockview - SCI Smithfield - SCI Somerset

Audit Cycle 2 – 2016 - SCI Mahanoy - SCI Mercer

Audit Cycle 1 – 2016 Allentown CCC - Harrisburg CCC - Johnstown CCC - Pittsburgh CCC - Progress CCC - Quehanna Motivational Boot Camp - SCI Albion - SCI Benner Township - SCI Cambridge Springs - SCI Chester - SCI Forest - SCI Frackville - SCI Graterford - SCI Greene - SCI Waymart - Scranton CCC - York CCC

Audit Cycle 1 – 2015 - CCC2 - CCC4 - Erie CCC - Riverside CCC - SCI Camp Hill - SCI Coal Township - SCI Dallas - SCI Fayette - SCI Houtzdale - SCI Huntingdon - SCI Laurel Highlands - SCI Mahanoy - SCI Mercer - SCI Pine Grove - SCI Retreat - SCI Rockview - SCI Smithfield - SCI Somerset - Sharon CCC - Wernersville CCC

Audit Cycle 1 – 2014 - SCI Muncy

This data was confirmed by the agency PREA Coordinator during the on-site review. The auditor was authorized complete access to the entire agency and provided this access during the on-site review. No restrictions were placed on the auditor during the Pre-Audit, onsite review, and the post audit phases. The auditor received all documents requested and was provided electronic viewing upon request. The onsite review provided the auditor the opportunity to conduct private interviews with the PREA Coordinator, Contract Administrator, Human Resource Staff, Secretary of Corrections, Background Check Staff, and a member of the Transgender Committee Review Team. The agency PREA Coordinator provided photographic evidence regarding the posting of the PREA Audit Notification at the Pennsylvania Department of Corrections headquarters building. This posting provided the public and staff with a name and mailing address for the auditor. The auditor confirmed this posting during the onsite review as staff interviews validated the posting at least 6 weeks prior to the onsite review. The auditor did not receive correspondence from staff or the public. The interviews with staff indicated knowledge of the posting and the address to write to the auditor.

Conclusion: The auditor has determined based on the evidence provided by the agency and review of the agency website; the Pennsylvania Department of Corrections meets compliance with the provisions of this standard. No additional action is required.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Standard 115.403 Analysis

The following evidence was analyzed in making compliance determinations:

Documents:

1. Pennsylvania Department of Corrections Pre-Audit Questionnaire Responses
2. DC-ADM 008, Section 2, PREA Procedures Manual, Contracting
3. DC-ADM 008, Section 17, PREA Procedures Manual, Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation
4. DC-ADM 008, Section 18, PREA Procedures Manual, Investigating Allegations of Sexual Abuse, Sexual Harassment, and Retaliation
5. DC-ADM 008, Section 20, PREA Procedures Manual, Data Collection and Retention

Interviews:

1. Agency Head
2. PREA Coordinator
3. Agency Contract Administrator

Site Review Observations:

1. Reviewed the Agency Website and Facility Data

Findings (By Provision):

115.403 (a-f) The auditor verified that the final audit reports were published on the agency website, and the auditor reviewed all documentation and compliance efforts. The auditor attempted to confirm all prior recommendations were completed from the previous audit. The agency has received prior PREA audit reports and the auditor confirmed the audit reports are published on the agency website.

Audit Cycle 4 - Year 1 - 2022/2023 - Erie CCC - Progress CCC - SCI Albion - SCI

Cambridge Springs - SCI Greene - SCI Laurel Highlands - SCI Mercer - SCI Rockview - SCI Somerset - SCI Waymart - Scranton CCC

Audit Cycle 3 – 2022 - Johnstown CCC - SCI Fayette - SCI Houtzdale - SCI Huntingdon - SCI Pine Grove - SCI Quehanna Boot Camp - SCI Smithfield - Wernersville CCC

Audit Cycle 3 – 2021 - Harrisburg CCC - Philadelphia CCC - Pittsburgh CCC -SCI Camp Hill - SCI Chester - SCI Coal Township - SCI Dallas - SCI Forest - SCI Frackville - SCI Mahanoy - SCI Muncy - SCI Phoenix - York CCC

Audit Cycle 3 – 2020 - Progress CCC - SCI Cambridge Springs -SCI Greene - SCI Laurel Highlands - SCI Mercer - SCI Somerset

Audit Cycle 3 – 2019 - Erie CCC - SCI Albion - SCI Benner Township - SCI Rockview - SCI Waymart - Scranton CCC

Audit Cycle 2 – 2019 - Philadelphia CCC - Pittsburgh CCC - Progress CCC - SCI Camp Hill - SCI Forest - SCI Muncy - SCI Phoenix - SCI Pine Grove - Sharon CCC - Wernersville CCC

Audit Cycle 2 – 2018 - Harrisburg CCC - Johnstown CCC - Philadelphia CCC - SCI Chester - SCI Dallas - SCI Retreat - SCI-Waymart - Scranton CCC - York CCC

Audit Cycle 2 – 2017 - Erie CCC - SCI Albion - SCI Benner Township - SCI Cambridge Springs - SCI Coal Township - SCI Fayette - SCI Frackville - SCI Greene - SCI Houtzdale - SCI Huntingdon - SCI Laurel Highlands - SCI Quehanna Boot Camp - SCI Rockview - SCI Smithfield - SCI Somerset

Audit Cycle 2 – 2016 - SCI Mahanoy - SCI Mercer

Audit Cycle 1 – 2016 Allentown CCC - Harrisburg CCC - Johnstown CCC - Pittsburgh CCC - Progress CCC - Quehanna Motivational Boot Camp - SCI Albion - SCI Benner Township - SCI Cambridge Springs - SCI Chester - SCI Forest - SCI Frackville - SCI Graterford - SCI Greene - SCI Waymart - Scranton CCC - York CCC

Audit Cycle 1 – 2015 - CCC2 - CCC4 - Erie CCC - Riverside CCC - SCI Camp Hill - SCI Coal Township - SCI Dallas - SCI Fayette - SCI Houtzdale - SCI Huntingdon - SCI Laurel Highlands - SCI Mahanoy - SCI Mercer - SCI Pine Grove - SCI Retreat - SCI Rockview - SCI Smithfield - SCI Somerset - Sharon CCC - Wernersville CCC

Audit Cycle 1 – 2014 - SCI Muncy

Conclusion: Based on the evidence provided by the agency, the Pennsylvania Department of Corrections meets substantial compliance with the provisions of this standard, and no further action is required.

Appendix: Provision Findings		
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity	yes

	described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	

	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a	yes

	case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than	yes

	June 30? (N/A if DOJ has not requested agency data.)	
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it	yes

	contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final	yes

	Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	
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