

PREA AUDIT REPORT
 Interim Final
ADULT PRISONS & JAILS

Date of Report: December 18, 2015

Auditor Information			
Auditor name: Eric S. Pierson			
Address: P.O. Box 552 Richmond, Texas 77406			
Email: epierson12@outlook.com			
Telephone number: 713-380-1865			
Date of facility visit: November 17-19 2015			
Facility Information			
Facility name: Pennsylvania State Correctional Institution-Laurel Highlands			
Facility physical address: 5706 Glades Pike, Somerset, Pennsylvania 15501-0631			
Facility mailing address: (if different from above) P. O. Box 631 Somerset, Pennsylvania 15501-0631			
Facility telephone number: 814-445-6501			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Jamey A. Luther, Superintendent			
Number of staff assigned to the facility in the last 12 months: 20			
Designed facility capacity: 1571			
Current population of facility: 1365			
Facility security levels/inmate custody levels: Levels 2, 3, 4, 5 (Minimum through Maximum)			
Age range of the population: 20-89			
Name of PREA Compliance Manager: Michelle Houser		Title: Corrections Classification Program Mgr.	
Email address: mihouser@pa.gov		Telephone number: 814-445-6501	
Agency Information			
Name of agency: Pennsylvania Department of Corrections			
Governing authority or parent agency: (if applicable) Commonwealth of Pennsylvania			
Physical address: 1920 Technology Parkway, Mechanicsburg, Pennsylvania 17050.			
Mailing address: (if different from above)			
Telephone number: 717-728-2573			
Agency Chief Executive Officer			
Name: John E. Wetzel		Title: Secretary of Corrections	
Agency-Wide PREA Coordinator			
Name: Jennifer Feicht		Title: PREA Coordinator	
Email address: jfeicht@pa.gov		Telephone number: 724-662-1837	

AUDIT INDINGS

NARRATIVE:

A Prison Rape Elimination Act Audit of the Pennsylvania State Correctional Institution at Laurel Highlands was conducted from November 17, 2015 to November 19, 2015. The purpose of the audit was to determine facility compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012.

An entrance meeting was held the morning of the onsite audit on November 17, 2015. The following staff were in attendance:

Jamey Luther-Superintendent
Michelle Houser-Corrections Classification Program Manager (PREA Compliance Manager)
William Mailman-Deputy Superintendent Centralized Services
Leo Glass-Deputy Superintendent Facilities Management
Jennifer Feicht-Pennsylvania DOC PREA Coordinator
Thomas Kinley-Major of the Guard
Michael Kubek-Facility Maintenance Manager
Michael Tsiklas-Security Captain (Investigations)

Following the entrance meeting, the auditor was given a tour of all areas of the facility, including; all general population housing units, restrictive housing unit, visitation, medical/infirmery, intake, dining, food service, commissary, maintenance, laundry, program services, chapel, library, classrooms, barber shop, recreation area, auto shop, electric shop, weld shop, and an empty secured office building. All areas where inmates may have access were visited by the auditor. During the tour, several informal interviews were conducted with inmates and staff throughout the facility.

A total of 19 staff were interviewed. At least one staff member was interviewed from each of the PREA interview categories with the exception of the interviews for non-medical staff involved in cross-gender searches (these interview types were not applicable to this facility). Staff interviews were conducted on all three shifts. Several staff were interviewed who belonged in multiple categories. For example medical staff also conduct risk screening at the facility. Included in the staff interviews was one (1) contractor and two (20) volunteers. On the last day of the audit, the auditor arrived at the facility at 5:30 AM to conduct interviews with staff on 3rd shift.

A total of 14 inmates were interviewed with at least one inmate interviewed from each interview category. The exception were interviews related to youthful inmates and interviews related to inmates placed in segregated housing for risk of sexual victimization (these interview types were not applicable to this facility). Several inmates were in multiple categories. A telephone interview was conducted with the SAFE SANE staff.

Throughout the pre-audit and onsite audit, open and positive communication was established between the auditor and facility staff. Superintendent Jamey Luther and PREA Compliance Manager Michelle Houser were extremely cooperative and promptly addressed any concerns. Through a coordinated effort by these key staff members as well as other staff, all issues were addressed and corrected to the satisfaction of the auditor prior to the completion of the Final Report.

When the audit was completed, the auditor conducted an exit briefing on November 17, 2015. The auditor gave an overview of the audit and thanked the staff for all their hard work and commitment to the Prison Rape Elimination Act.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Pennsylvania State Correctional Institution at Laurel Highlands is located in Somerset County, in Somerset Township, Pennsylvania approximately one mile from the Borough of Somerset. The facility opened July 1, 1996, as a Security Level 2 facility for adult male inmates. The facility occupies the former Somerset State Hospital property which was owned by the Department of Public Welfare, and which officially closed June 1996. The property was transferred from the Department of Public Welfare to the Department of Corrections on July 1, 1996.

The facility is comprised of brick and concrete structures of three and four levels, the majority of which are designed for inmate housing and programs. The buildings are laid out campus style. Total acreage inside the perimeter is 52 acres. Total acreage outside of the perimeter is 81 acres. There are 16 buildings inside the perimeter and there are 19 buildings outside the perimeter. Fifty-two acres are contained within a secure perimeter comprised of a (14) fourteen-foot high outer fence and a (10) ten-foot high "Israeli Taut Wire" detection fence. The exterior fence is equipped with a vibration/movement detection alarm and a system of 52 perimeter surveillance cameras that automatically display and record the area of a fence alarm. There are no towers installed at the facility

SCI-Laurel Highlands has dormitory style housing with the exception of H Unit which consists of hard cells. The housing units are as follows

- A Unit Capacity: 115 skilled care
- B Unit Capacity: 332 general population
- C Unit Capacity: 360 general population
- D Unit Capacity: 212 personal care and general population
- E Unit Capacity: 48 skilled care or personal care
- F Unit Capacity: 35 administrative and disciplinary segregation
- G Unit Capacity: 150 general population
- H Unit Capacity: 252 general population
- I Unit Capacity: 150 general population

The facility operates under Unit Management with each Unit Management team consisting of a Unit Manager, Corrections Counselors, Corrections Officers and clerical staff.

SCI-Laurel Highlands serves as the provider to Pennsylvania Department of Corrections inmates with special needs including long-term care, personal care, wheelchair, dialysis and geriatric inmates, as well as general population inmates. The Medical Department provides a complete range of medical services. The Skilled Care Unit is designed to provide long-term medical treatment and nursing care to inmates unable to function in General Population. The Personal Care Unit houses inmates with minimal nursing care needs and/or inmates confined to a wheelchair. A medical step-down unit provides care at both the skilled and personal care levels. Dialysis Units serve 68 inmates. Dental care is available for all inmates.

The facility has a total of 113 medical staff including five RN Supervisors, twenty-seven RNs, forty-two LPN's, and thirty CNAs. Routine medical services are provided to the General Population. The Dialysis Units are contracted through Wexford. Off-site consults and diagnostic tests are scheduled as needed through Somerset Hospital as the primary provider. SCI Laurel Highlands added a Hospice Unit in 2011. Medical staff provide end of life services, to the terminally ill population.

The Psychology Department is supervised by a licensed Chief Psychologist and has four Psychological Services Specialists who conduct psychological evaluations and treatment services. Groups include:

Sex Offender Programming, Life Skills, and Mental Health issues. Psychology staff members make time available, on a regularly scheduled basis, for appointments with inmates who request them. Treatment offerings include group therapy and group and individual counseling. Crisis intervention services are available on an as-needed basis to assist disturbed inmates. Group counseling for the sex offender program occurs on a weekly basis. The facility has a written suicide prevention plan. The plan includes staff and offender critical incident debriefing that covers the management of suicidal incidents, suicide watch, assaults, prolonged threats, and death of an offender or staff member. Inmates may receive referrals to the psychiatrist. Psychiatric services are subcontracted. Mental health rounds on the RHU occur on a daily basis.

The Education Department provides computerized GED tests to eligible students or the opportunity to earn an Adult Secondary Commonwealth Diploma (ASCD) for students that dropped out of high school and were not able to earn their high school diploma. Basic education classes, Remedial classes, and English as a Second Language classes are also offered through the education department for mandatory and voluntary students. These programs provide inmates the opportunity for educational services therefore increasing their potential of securing employment upon release. An opportunity exists for inmates interested in obtaining a post-secondary degree from an institution of Higher Education. These inmates enroll in a correspondence course leading to a post-secondary degree and an Education department faculty member monitors inmates in the correspondence course. A complete Library/Law Library is available. Vocational training programs include Barber Manager (must have an active barber license), Business Education, Custodial Maintenance, Electronics Repair, and Fiber Optics. Vocational programs are located in the Education Department of both B and C Units

SCI Laurel Highlands offers a complete range of religious services. Addiction programming includes 4 Therapeutic Communities. The facility has a gymnasium and outside recreation area. Standard inmate services such as commissary, visitation, and laundry are provided.

On the November 17th SCI Laurel Highlands had a total count of 1344 in house. On November 19th the facility had a total count of 1365

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded:	4
Number of standards met:	37
Number of standards not met:	0
Not Applicable:	2

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

Pennsylvania Department of Corrections Policy DC-ADM008 Prison Rape Elimination Act (PREA) effective 7/25/15 states that “It is the policy of the Department to prohibit any form of sexual abuse and/or sexual harassment of an inmate. The Department has zero tolerance for sexual abuse or sexual harassment of any individual under the supervision of the Department.” This Policy provides an outline of the Agency Policy toward preventing, detecting and responding to such conduct

In accordance with PREA Standards, the Pennsylvania Department of Corrections has designated a statewide PREA Coordinator to develop, implement and oversee the Department’s efforts to comply with the National PREA Standards across all facilities. This was confirmed by the Department Organizational Chart. The PA DOC statewide PREA Coordinator was on-site on the first date of the audit at SCI-Laurel Highlands and participated in the tour. She confirmed that she reports directly to the Executive Deputy Secretary/designee of the Department. There are 27 PREA Compliance Managers in the PA DOC that report to the PREA Coordinator. The PREA Coordinator communicates with the PREA Compliance Managers on a routine basis via telephone and email, and conducts regular site visits at the facilities. During the onsite audit, the auditor was advised the agency sent the PREA Coordinator as well as other staff members to the Department of Justice Auditor Training. This practice exceeds PREA Standards requirements.

The Corrections Classification and Program Manager (CCPM) at SCI-Laurel Highlands has been designated as the PREA Compliance Manager (PCM) and has been given sufficient time and authority to coordinate the facility compliance with PA DOC Policy and Federal PREA Standards. The PREA Compliance Manager reports to the Deputy of Centralized Services. Interviews with the SCI-Laurel PREA Coordinator confirmed she is allotted sufficient time, appropriate resources, time, and authority to oversee efforts to ensure PREA compliance.

§115.12 - Contracting with other entities for the confinement of inmates

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

Pennsylvania DC-ADM008 Prison Rape Elimination Act (PREA) states that “the Department shall include in any new contract or contract renewal for the housing of an inmate (on or after the effective date of this procedure) with

a private entity or other entity, including other government agencies, the entity’s obligation to adopt and comply with the PREA Standards and the Department’s Policies related to PREA compliance.”

Documentation provided by the PA DOC indicates that there have been three contracts for the confinement of inmates entered into or renewed by the Agency with private entities or other government agencies on or after August 20, 2012. The contracted facilities include: Lackawanna County, Columbia County, and York County.

These agreements include specific language requiring the counties to agree to adopt and comply with all PREA regulations. These agreements also include the Department’s right to inspect the facility at any reasonable time. The agency has existing contracts with approximately 16 other facilities.

Through interviews with the PREA Coordinator, it was discovered when these contracts come up for renewal, they will include language specific to PREA requirements. Interviews with the Agency Contract Administrator indicates facilities the agency contracts with for the confinement of its inmates would be audited annually. In addition, monthly site visits would be conducted on the facility and investigations would be monitored to ensure compliance with the standards.

§115.13 – Supervision and Monitoring

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

Pennsylvania Department of Corrections DC-ADM008 states that “the Department shall ensure that each facility develops, documents and makes its best efforts to comply on a regular basis, but no less than once a year, with a staffing plan. Department policy 6.3.1, Section 15 that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse.

PA DOC Department Policy 6.3.1, Section 15 includes the wording that in calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:

- 1) Generally accepted detention and correctional practices;
- 2) Any judicial findings of inadequacy;
- 3) Any findings of inadequacy from Federal investigative agencies;
- 4) Any findings of inadequacy from internal or external oversight bodies;
- 5) All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated);
- 6) The composition of the inmate population;
- 7) The number and placement of supervisory staff;
- 8) Facility programs occurring on a particular shift;
- 9) Any applicable State or local laws, regulations, or standards;
- 10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- 11) Any other relevant factors.

The Policy confirms that whenever necessary but no less frequently than once a year, each facility shall assess, determine and document whether adjustments are needed to: The facility’s deployment of video monitoring systems and other monitoring technologies; and the resources the facility has available to commit to ensure adherence to the staffing plan.” The annual reviews are conducted in consultation with the PREA Compliance Manager at that facility and the statewide PREA Coordinator.

Policy 6.3.1 states that “in circumstances of non-compliance with the staffing plan, the Facility Manager/designee shall document, in writing, and justify all deviations from the plan. This documentation will be forwarded to the Executive Deputy Secretary, Regional Deputy Secretary, and Central Office Security Major. Interviews with the Superintendent and Deputy Superintendent at SCI Laurel indicate that the facility has developed a staffing plan based on the requirements under PREA. The PREA Coordinator is consulted regarding assessments and/or adjustments to the staffing plan. SCI Laurel Highlands provided a 2014 Facility Staffing plan reviewed and approved by Central Office personnel. The plan summarized all approved staffing and posts. Facility Superintendent Jamey Luther advised that the DOC conducts a Manpower Review every 3 years and that reports from the facility are reviewed quarterly by the Central Office. In addition, she reviews staffing reports on a daily basis. During the 2015 audit cycle, there have not been any deviations from the staffing plan.

SCI Laurel Highlands maintains a comprehensive camera plan. All staffing reviews include discussions of cameras. The facility conducts a monthly security meeting that includes the PREA Compliance Manager. A discussion of cameras is included. Cameras are also included on the weekly rounds and on monthly PREA tours and monthly PREA Meetings.

In accordance with PREA Standard 115.13 and the DC-ADM 008, intermediate and higher level management staff at SCI Laurel Highlands conduct unannounced rounds specifically focusing on housing units and other areas accessible to inmates. On October 25, 2015 a memo was issued by the Superintendent instructing staff that they are not to alert other staff that these rounds are being conducted. Staff conducting these rounds are the Superintendent, Deputy Superintendents, CCPM, and Major, of the Guard, and Captains. The unannounced PREA compliance inspections are conducted and documented to identify and deter sexual abuse and sexual harassment. These inspections/rounds are specific to PREA compliance measures and are occurring once per month and must occur on all shifts. These inspections/rounds are documented utilizing the PREA Administrative Tour Documentation Form. Inspections occur in all areas of the facility where there could be a potential for inmates to become a victim of sexual abuse. Staff conducting PREA inspections are instructed that they should pay particular attention to the staff and video monitoring of the facility to detect areas that may need enhancement to ensure the sexual safety of the facility. Staff conducting PREA inspections talk with staff and inquire about any perceived areas of concern related to PREA or relating to any problem inmates may have related to PREA. During the pre-audit, the auditor was provided with documentation of PREA Administrative Tour Forms and Monthly PREA Meetings.

§115.14 – Youthful Inmates

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

DC-ADM 008 PREA Procedures Manual Section 2 states a youthful inmate (under the age of 18) shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters.

SCI Laurel Highlands does not house youthful offenders.

§115.15 – Limits to Cross-Gender Viewing and Searches

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

PA DOC policy 6.3.1 Facility Security Procedures Manual Section 30-Searches states that “female staff members may search female, male, transgender, or intersex inmates. Male staff members may search male, transgender, or intersex inmates housed in a male facility. Absent exigent circumstances, male staff members shall not search female, transgender, or intersex inmates housed in a female facility.”

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states all cross-gender strip searches shall be documented on the Cross-Gender Strip Search Validation Form. Beginning August 20, 2015, all cross-gender pat searches of female inmates shall be documented on the Cross-Gender Pat Search Validation Form.

SCI Laurel Highlands does not house female inmates; therefore, PREA standards pertaining to searches of female inmates are not applicable. In the past 12 months, there have not been any cross-gender strip or cross-gender visual body cavity searches of inmates. In addition the facility reported that they have never had a Transgender or Intersex inmate at the facility.

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states inmates shall be able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. This limitation not only applies to in-person viewing, but also to all forms of remote viewing.

DC-ADM 0008 PREA Procedures Manual Section 9- Working with Transgender/Intersex Inmates states that “the facility shall not search or physically examine a transgender/intersex inmate for the sole purpose of determining the inmate’s status. If the inmate’s genital status is unknown, it may be determined by conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.”

The auditor was provided with a PowerPoint presentation of the facility training for offender searches. Interviews with random staff indicated that they were aware of the prohibition of conducting strip searches on transgender inmates for the sole purpose of determining their genital status

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states that staff of the opposite gender shall announce their presence when entering an inmate housing unit in accordance with the following:

- 1) When the status quo of the gender supervision on a housing unit changes from exclusively same gender, to mixed- or cross-gender supervision, the opposite gender staff is required to verbally announce their arrival on the unit. The announcement is required for both custody and non-custody staff, and may include, for example, a clinician or case worker who spends time on the unit, or senior staff making supervisory rounds.
- 2) When an opposite gender staff member is entering a housing unit and it is unknown to him/her whether any other opposite gender staff are present, the entering staff member will announce their presence; and
- 3) This announcement may be made by the officer working the control desk via the intercom system; and
- 4) This announcement may also be made via a specific tone system that is utilized only for the purpose of announcing a member of the opposite gender entering the housing unit. Inmates will be educated on the tone system utilization.

During the facility tour loud buzzer sounded each time that a female staff person entered a housing unit. This buzzer was activated by a Correctional officer at the desk. In situations where the Officer was away from the desk, female staff themselves made a verbal announcement. Interviews with both staff and inmates confirmed that this buzzer system is consistently used when female staff enter the units.

During the tour, the auditor observed that showers had either curtain or partial doors to prevent inmates the viewing of naked inmates by female staff, or other inmates. All housing units had areas where inmates could dress in private. There was one dormitory where staff expressed a concern about inmates in the back row being observed undressing on camera. The auditor suggested that a notice be posted advising all inmates that they may dress in the restroom or shower area. This notice was posted during the audit and is to be added into the next handbook revision

As a medical facility with inmates in need of skilled care there frequently are situations where female nursing staff are required assist patients with bathing and dressing. This is consistent with their licensure as an RN or LPN and is not contrary to PREA.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

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

DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Manual Section 1-General Procedures, DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Manual Section 2- Accommodations, DC-

ADM 818 Automated Inmate Telephone System, and DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Manual Section 3- Specific Disabilities outlines the agencies approach to providing services to inmates with disabilities. DC-ADM 0008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states:

- 1) Pursuant to Department policy DC-ADM 006, “Reasonable Accommodations for Inmates with Disabilities,” the Department shall ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.
- 2) Written materials will either be delivered in alternative formats that accommodate the inmate’s disability or the information will be delivered through alternative methods, such as reading it to the inmate or communicating through an interpreter, which ensures the understanding of the PREA related material.
- 3) The Department shall take reasonable steps to ensure meaningful access to all aspects of the Department’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide qualified interpreters. The PREA Compliance Manager will ensure that only staff members or qualified contractors who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, provide translation for inmates. If a multi-lingual staff member is not available, then the “AT&T Language Line” or equivalent service must be utilized.
- 4) The Department shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate’s safety, the performance of first response duties under PREA Standard, or the investigation of the inmate’s allegations. Justification for any use of an inmate assistant shall be documented accordingly.

In the past 12 months, there have been no instances where inmate interpreters, readers, or other types of inmate assistants have been used. During the pre-audit, the auditor was provided with a copy of a contract with Propio Language Services. This contract shows to be valid from September 1, 2014 to June 30, 2016.

During the onsite audit, the auditor observed PREA posters posted in the housing units that contained information in both English and Spanish. The staff at SCI-Laurel Highlands were unable to identify any inmates at the facility who spoke only Spanish or another language exclusively. The auditor spoke with one bi-lingual inmate who confirmed that he does not have an issue reading the Spanish literature. All staff interviewed stated that they were aware that they should not to use inmate interpreters unless it was an extreme emergency.

The facility has access to the TTY phone for the hearing impaired, a language line service for non-English speaking inmates, and provides handouts and inmate handbooks in both English and Spanish. In addition, the agency has recently used one of its facilities to transcribe text into braille for the vision impaired.

SCI-Laurel Highlands is a medical facility with a large number of inmates who rely on wheelchairs and and/or are bedridden. The auditor spoke with one inmate who is confined to a wheelchair and another who is unable to get out of bed. Both stated the facility provides them an opportunity to access staff and services.

§115.17 – Hiring and Promotion Decisions

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

PA DOC Human Resources and Labor Relations Manual Section 41- Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies states that: “Consist with the Prison Rape Elimination Act (PREA), the Department shall not hire or promote anyone who:

- a. has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, or other correctional institution;
- b. 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;
- c. has been civilly or administratively adjudicated to have engaged in the activity described above; and/or
- d. The Department will consider any incidents of sexual harassment in determining whether to hire or promote anyone.

The DOC application requires employees to take an oath sworn before a Notary Public that this application and any attachments contain no misrepresentations, falsifications, omissions, or concealment of material fact.

Centralized Clearances 1.1.4 states prior employment of contractors will be further investigated to ensure that the Department does not enlist the services of any contractor(s) who may have contact with inmates who:

- a. have engaged in sexual abuse in a prison, jail, lockup, community facility, juvenile facility, or other institution (as defined as 42 U.S.C. 1997); and/or
- b. have been convicted or civilly or administratively adjudicated for 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.

The PA DOC policy is that the Department shall consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates. The PREA Current/Prior Employer Letter is used to solicit specific information from prior employers regarding the applicant’s previous misconduct.

The PA DOC policy is that the Department shall consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates. The PREA Current/Prior Employer Letter is used to solicit specific information from prior employers regarding the applicant’s previous misconduct. The auditor interviewed the SCI Laurel Human Resources Officer who confirmed that criminal checks on potential volunteers are done through the facility security office and not by HR.

4.1.1 Human Resources and Labor Relations Manual Section 40- Conducting Employee Background Investigations states that Human Resources Offices are responsible for ensuring the PREA Annual Employee Compliance Verification Form is completed in conjunction with each employee’s annual Employee Performance Review.

Interviews with the Human Resources staff indicate criminal background checks are conducted on all newly hired employees. Through interviews with Administrative Staff, it was discovered the Agency utilizes “JNET,” which notifies them immediately, anytime a staff member is arrested. This system is real-time; therefore, documented background checks for employees every 5 years is not necessary.

SCI Laurel Highlands shares Human Resources staff with nearby SCI-Somerset.

§115.18 – Upgrades to Facilities and Technology

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

DC-ADM008 PREA Procedures Manual Section 2 states that: “When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the Department shall consider the effect of the design, acquisition, expansion or modification upon the Department’s ability to protect inmates from sexual abuse. The Policy further states that “When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the Department shall consider how such technology may enhance the Department’s ability to protect inmates from sexual abuse.”

SCI Laurel Highlands was acquired from the PA Department of Public Welfare. Many of the buildings are 1950s construction. Although the facility had been originally built as a mental hospital, the design does not exclude blind spots and rooms that can be out of view from staff. Many of these issues were resolved in the 1996 renovations. There have not been any renovations since that time.

To compensate for some of the architectural deficiencies, SCI Laurel Highlands has an aggressive camera placement program. The auditor was provided with a list that shows that the facility currently has 718 separate cameras providing views covering the inside and outside of the facility. Staff made it clear that camera technology is not used to replace staff; however, it is used as a tool to supplement them and maximize visual contact throughout the facility with the goal of eliminating blind spots.

§115.21 – Evidence Protocol and Forensic Medical Examinations

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

SCI Laurel Highlands is responsible for conducting only administrative investigations. Criminal investigations are conducted by the Pennsylvania State Police.

DC-ADM 008 PREA Procedures Manual Section 5- Investigating Allegations of Sexual Harassment and/or Sexual Abuse states to the extent the Department is responsible for investigating allegations of sexual abuse, the Department shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions, in accordance with the Response to Allegation of Sexual Abuse Checklists (Shift Commander Cover Sheet [refer to Attachment 4-A], Initial Response – Victim [refer to Attachment 4-B], Initial Response – Abuser [refer to Attachment 4-C], the Instructions for PREA Evidence Retention [refer to Attachment 4-E], and as well as Department policy 6.3.1, “Facility Security,” Section 15.

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states that “treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”

SCI Laurel Highlands maintains a documented MOU with Somerset Hospital. The MOU states that Somerset Hospital will conduct forensic examinations on victims of sexual abuse for acts allegedly committed in a state correctional institution. These examinations would be conducted by SANEs. The MOU was signed on September 30, 2015. In addition, the facility established a second MOU with Conemaugh Hospital. This MOU contains similar language to the MOU established with Somerset Hospital and is dated October 26, 2015.

The auditor conducted a phone interview with a SANE Nurse at Somerset Hospital. She advised that Somerset Hospital has two qualified SANEs that are available to conduct forensic exams on inmates from SCI Laurel-Highlands, and another staff member in the process of getting trained. In the event that one of their SANE certified staff was unavailable, the exam would be conducted by a trained medical professional in their emergency room, or the inmate would be transferred to Conemaugh Hospital where forensic examiners are on site. SCI Laurel Highlands reports that within the past 12 months there have not been any forensic evaluations requested by the facility.

The auditor was provided with a documented MOU dated 6/25/14 for victim advocate services with a group called Victim Services Inc. The agreement allows for representatives of Victim Services Inc. in Somerset County to be able to respond to SCI-Laurel Highlands following an allegation of sexual assault and “provide advocacy for and accompany the victim to the hospital or other location where a forensic examination is to be conducted.”

SCI-Laurel Highlands maintains an MOU between the Secretary of Corrections and the Pennsylvania State Police (PSP), dated September 24, 2013. The MOU from the PSP to the Agency states that the PSP will follow the PREA Standard 115.21.

§115.22 - Policies to Ensure Referrals of Allegations for Investigations

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

DC-ADM 008 PREA Procedures Manual Section 5- Investigation Allegations of Sexual Harassment and/or Sexual

Abuse states every report, complaint or allegation of sexual harassment/sexual abuse, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively.

During the past 12 months, there have been 9 allegations of sexual abuse and/or sexual harassment received at SCI Laurel Highlands. All 9 were investigated administratively and 2 were referred for criminal investigation.

During the audit the auditor spoke at length with the Security Captain who currently conducts administrative investigations at SCI-Laurel Highlands. The Captain demonstrated that he has received training to conduct these investigations and there is also a trained Lieutenant who assists. The Captain provided logs showing referrals to OSI and the State Police. All cases receive an OSI-I investigation number and are tracked outside of the facility as well as inside. All administrative investigations are reviewed by the OSI-I.

DC-ADM 008 PREA Procedures Manual Section 5- Investigation Allegations of Sexual Harassment and/or Sexual Abuse states sexual abuse/sexual harassment investigations are conducted by the Office of Special Intelligence and Investigations (OSII) and/or the Pennsylvania State Police (PSP).

The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. This policy is located on the Agency website.

Criminal Investigations are conducted by the Pennsylvania State Police (PSP) or the PA DOC Office of Special Intelligence and Investigations (OSII). Administrative Interviews are conducted by trained facility staff and/or the Office of Special Investigation and Intelligence (OSII).

§115.31 - Employee Training

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states the PREA Compliance Manager, in conjunction with the Training Coordinator at each facility, shall ensure that all staff members are: informed that sexual contact with an inmate is prohibited and that an inmate has a right to report if sexual contact occurs, through the basic PREA training. This training will include, at a minimum, the following information:

1. The zero tolerance policy against sexual abuse and sexual harassment within the Department;
2. How staff are to fulfill their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures as defined in this policy;
3. Inmates' right to be free from sexual abuse and sexual harassment;
4. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
5. The dynamics of sexual abuse and sexual harassment in confinement;

6. The common reactions of sexual abuse and sexual harassment victims;
7. How to detect and respond to signs of threatened and actual sexual abuse;
8. How to avoid inappropriate relationships with inmates;
9. How to communicate effectively and professionally with inmates, including LGBTI or gender nonconforming inmates; and
10. How to comply with relevant laws of Pennsylvania related to mandatory reporting of sexual abuse to outside authorities.

As documentation, the facility provided an array of materials including Power Point presentations, written materials, lesson plans and study guides that cover the topics required by the PREA Standard and PA Policy review of the 2015 PREA Course Lesson Plan indicates all topics above are covered during training. The training is tailored to the gender of the inmates at the facility.

Employees who are reassigned from facilities housing the opposite gender are given additional training. Between trainings the agency provides employees who may have contact with inmates with information about current policies regarding sexual abuse and sexual harassment. Policy updates are disseminated through management. Employees who may have contact with inmates receive refresher training on PREA requirements annually.

At the conclusion of the training, all staff, sign the PREA Training and Understanding Verification Form. The facility provided copies of rosters showing that all staff have completed PREA training. Random staff interviews confirmed that the required PREA training had taken place. The staff interviewed demonstrated knowledge and recall of training topics.

§115.32- Volunteer and Contractor Training

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states that “contractors and volunteers (to include interns, contract service providers, public visitors, or Non-Department Employees) will receive training on their responsibilities under the Department’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures”. The contractors are trained during orientation sessions and annual training reflective of the level of contact that they have with inmates.

All contractors and volunteers sign and acknowledge the PREA Training and Understanding Verification Form. The Volunteer Coordinator at each facility is responsible for documenting the PREA training that each volunteer has received and maintaining the documentation in the volunteer file. PREA Training and Understanding Verification Forms for all contractors are also maintained in a file.

The auditor interviewed 2 volunteers and 1 contractor. All confirmed that they have received this training and recalled the zero tolerance policy and reporting requirements

§115.33 – Inmate Education

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states that “each facility shall provide inmate education explaining the zero tolerance policy regarding sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse, sexual harassment or retaliation, and what to do if he/she is the victim of such. This information shall be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.”

During the intake process at SCI-Laurel Highlands, all inmates receive information explaining the zero tolerance policy regarding sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse, sexual harassment or retaliation, and what to do if he/she is the victim of sexual abuse, sexual harassment or retaliation. Medical staff who conduct the initial screening of new inmates provide a copy of the Sexual Abuse Awareness Informational Brochure to the inmate immediately upon intake and document.

Inmates are shown a video regarding their rights to be free from sexual abuse, sexual harassment, and retaliation. The PREA video, “PREA: What You Need to Know” is available for use. Each facility shall have access to this video in Spanish and English, with subtitles. An Intake Counselor remains in the room during the playing of the video to observe inmates, and facilitate the presentation and answer questions. The PREA video is played a minimum of two times each month over the inmate television channel.

The auditor was provided with an October 2015 Memorandum that details the process for disabled inmates at SCI-Laurel Highlands. As a medical facility this process is used quite often. According to the Health care Administrator “During the intake process at LAU, the PREA Pamphlet will be given to all inmates. Inmates with reading disabilities, vision disabilities, problems with comprehension due to medical issues, any and all disabilities that could affect the exchange of information, will have the pamphlet read to them. Staff will read the pamphlet and ask if they understand what it means and document their responses. Additionally, inmates being admitted to the skilled unit that are not alert, oriented, comatose, vented, etc. will still have the pamphlet read to them and documented along with their lack of comprehension due to whatever issue. These inmates are housed always on the skilled nursing units with 24/7 nursing observation, surveillance and assistance.”

Within a week following reception, new inmates at SCI-Laurel Highlands receive an additional Orientation with Unit Management Staff. At that time the inmate is provided with a copy of the PA DOC Inmate Handbook and the SCI-Laurel Highlands handbook. Each handbook contains sections on PREA and way that inmates can report sexual abuse and/or sexual harassment

All inmates at SCI-Laurel Highlands have received the initial PREA education. Any inmate that is transferred receives education upon transfer. Sexual abuse, sexual harassment and retaliation training is documented by the inmate signing the PREA Inmate Education Verification Form (Attachment 2-K). This form will be filed in the DC-

14. Provision of PREA Inmate Education shall be documented in an Inmate Cumulative Adjustment Record (ICAR) entry.

During the inmate's annual review, Counselors discuss issues related to sexual abuse in prison and offer the inmate an opportunity to discuss related concerns. The counselor may provide a Sexual Abuse Awareness Informational Brochure at the time of his/her annual review should the inmate need this information at that time.

During the tour the auditor observed that information about Agency PREA policies is visible throughout the facility. Posters in English and Spanish posters were noted in all housing units and other common areas. The auditor was provided with a copy of the inmate handbook, PREA inmate educational posters, and PREA staff educational posters. The material was in both English and Spanish.

During the tour of the Library, the Librarian noted that the facility has several notebooks containing PREA information that are available for inmates to view privately or check-out. The Librarians advised that these are used fairly by often by inmates at the facility.

§115.34 - Specialized Training: Investigations

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training Investigations - states that "In addition to the Basic PREA Training provided to all staff, any staff designated to conduct sexual abuse investigations shall receive additional training in accordance with PREA Standard 115.31 and Specialized training: Investigations. This specialized training will include, but is not limited to: interviewing sexual abuse victims, proper use of Miranda warnings, Garrity Rule, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral."

Documentation supplied by the facility indicated that training to investigators is based on training modules developed by the PREA Resource Center. Two facility investigators have received 20 hours of Specialized PREA Training for Investigations at the PA DOC training academy. During the audit the auditor spoke at length with the Security Captain who currently conducts administrative investigations at SCI-Laurel Highlands. The Captain demonstrated that he has received training to conduct these investigations and there is also a trained Lieutenant who assists. The investigators were knowledgeable that any case that appeared to be criminal would be referred for criminal prosecution. The Investigators also acknowledged using a preponderance of evidence as the standard of evidence used to substantiate allegations of sexual abuse and sexual harassment.

§115.35 – Specialized training: Medical and Mental Health care

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training Medical/Mental Health Practitioners – states that “In addition to the Basic PREA Training, any staff providing medical/mental health services, whether on a full or part-time status, shall receive additional training on working with victims of sexual abuse and sexual harassment. For the purposes of this training requirement, Medical staff will include all licensed medical staff, as well as non-licensed contact medical staff such as dental assistants, CHCAs and contracted provider staff.”

DC-ADM 008 continues and states that “this specialized training will include, but is not limited to: how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.”

The auditor was provided with a Power Point presentation, participant guide and other material that is used for medical and mental health specialized training. Documentation including training rosters, and sign-in sheets showed that all medical staff including contract employee have received the required PREA Training. This was confirmed by interviews with the Nursing Supervisor, and two RNs

The auditor spoke with mental health staff who work regularly within the facility and they confirmed having received the training required by agency policy. This was supported by documentation provided to the auditor

Agency medical staff at this facility do not conduct forensic medical examinations. Such examinations are conducted at the Somerset Hospital.

§115.41 – Screening for Risk of Victimization and Abusiveness

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training provides the PA DOC directions on completing the PREA Risk Assessment Tool (PRAT). This is the risk screening tool used in all PA facilities. Section B states that

1. All inmates shall be assessed during the intake screening process, upon receipt into another facility, whenever

an inmate is involved in an incident of sexual abuse and at their annual review, for risk of being sexually abused by other inmates or sexually abusive toward other inmates. (§115.41[a])

2. Inmates currently in Department custody, not assessed through the above means, shall be administered the PREA Risk Assessment at the semi-annual or annual review, to ensure that all inmates are assigned a risk level within the first six months of implementation. Assigned counselors will be responsible for administering the PREA Risk Assessment Tool (PRAT) during the annual review as directed by Department policy 11.2.1.
3. The information received through the administration of the PRAT questions shall be used to inform housing, bed placement, work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. (§115.42[a]) The sensitive information collected through these tools shall be kept as confidential as possible so as not to be used to the inmate's detriment by staff or other inmates. (§115.41[i])
4. The PREA Risk Assessments shall be conducted utilizing the PRAT. The tool will be an objective instrument that shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization or abusiveness: (§115.41[c][d])
 - a. whether the inmate has a mental, physical, or developmental disability;
 - b. (§115.41[d][1])
 - c. the age of the inmate; (§115.41[d][2])
 - d. the physical build of the inmate; (§115.41[d][3])
 - e. whether the inmate has previously been incarcerated; (§115.41[d][4])
 - f. whether the inmate's criminal history is exclusively nonviolent; (§115.41[d][5])
 - g. whether the inmate has prior convictions for sex offenses against a child or an adult;

A reassessment will be conducted between day 20 and 30 of every inmate's arrival in the system or receipt into another facility utilizing the PRAT. Additionally, the Counselor will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility staff since the intake screening. An inmate's risk level will be reassessed by the PCM when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of victimization or abusiveness utilizing the PRAT.

Inmates shall not be disciplined for refusing to answer, or for not disclosing, complete information in response to the questions regarding prior victimization, disabilities, their perception of vulnerability or their sexual orientation.

The information received through the administration of the PRAT questions is used to inform housing, bed placement, and work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. The sensitive information collected through these tools shall be kept as confidential as possible so as not to be used to the inmate's detriment by staff or other inmates

There were 923 inmates entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility. This same number received a timely reassessment.

While onsite, the auditor reviewed a random sample of PRATs. The majority of the initial assessments occurred within 72 hours of intake and the majority of the 30 day reassessments occurred within 20-30 days of intake. The

initial screening in almost all cases are completed on the date of arrival. The existing inmate population is being screened on their annual and bi-annual reviews. The auditor was advised the facility anticipates all inmates to be screened before the end of the year. The auditor was provided with documentation that indicated that 35 inmates who were at the facility had overdue PRAT Reassessments. The PRAT system was implemented in June 2015. These reassessments are scheduled to be completed prior to the end of calendar year 2015

During the pre-audit, the auditor was provided with a copy of the PRAT. A review of the instrument shows all the required questions are being asked and the tool is an objective point based screening instrument.

§115.42 – Use of Screening Information

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states that “the information received through the administration of the PRAT questions shall be used to inform housing, bed placement, work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. The sensitive information collected through these tools shall be kept as confidential as possible so as not to be used to the inmate’s detriment by staff or other inmates. The Department shall make individualized determinations about how to ensure the safety of each inmate.”

DC-ADM 008 PREA Procedures Manual Section 9- Working with Transgender/Intersex Inmates states that “in deciding whether to assign a transgender/intersex inmate to a facility for male/female inmates, and in making other housing and programming assignments, the Department shall consider, on a case-by-case basis, whether a placement would ensure the inmate’s health and safety, other inmates’ health and safety, and whether the placement would present management or security problems. A transgender/intersex inmate’s own views, with respect to his/her own safety shall be given serious consideration.”

The auditor was provided with a PREA Risk Tracking Memo and Instructions which was sent to the PA DOC Superintendents on February 18, 2015. This information discusses how to properly use the screening instrument. Interviews with staff indicate the screening instrument is being used to keep any inmate that scores to be a potential victim from inmates that score to be a potential predator. According to the memo all PRAT assessments conducted on offenders are completed in accordance with the PRAT user guide.

Once completed, offenders identified as high risk for abusiveness or victimization will be entered into the Unit Management System under Security Concerns. Comments are entered to indicate rationale and PRAT risk level (low/medium/high). This information subsequently appears as "Housing Concerns" and will also populate the corresponding reports for Institutional Sexual Predator and/or Potential Sexual Assault Victim.

These reports should then be utilized to assist in informing placement decisions in accordance with PREA standards. While on the tour the auditor had staff in the Segregation Unit and General Population housing demonstrate the access and found that this information has been entered.

Transgender inmates at SCI-Laurel Highlands would be housed in general population unless they were in need of some of the skilled medical care offered by the facility. According to the Superintendent and PREA Compliance Manager, the facility has never had a transgender or Intersex inmate. Should one be received they would be afforded the opportunity to shower separately. The facility has doors and/or curtains on all showers.

During the audit, the auditor suggested that identification of potential abusers and victims be included in the list of criteria used by staff to make job assignments inside and outside. This would help insure that potential victims and suspected predators are not assigned to the same work assignment or work area. The PREA Compliance Manager responded that they would incorporate this into the process.

§115.43 – Protective Custody

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states Inmates at a high risk for sexual victimization or inmates that have alleged abuse shall not be placed involuntarily in Administrative Custody (AC) as a means of protection unless an assessment of all available alternatives has been made by Psychology and Security staff in conjunction with the PREA Compliance Manager, and a determination has been made that there is no other available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the inmate in involuntary AC for less than 24 hours while completing the assessment.

Within the last 12 months, there have not been any inmates placed in involuntary segregated housing at SCI Laurel Highlands for risk of sexual victimization. Through staff interviews it was determined inmates at high risk of sexual victimization are not placed in involuntary segregated housing. The auditor was advised these inmates would be placed in other housing units, if at all possible.

In accordance with Department policy DC-ADM 802, Administrative Custody Procedures, at least every 30 days, the Program Review Committee (PRC) reviews each inmate to determine whether there is a continuing need for separation from the general population.

In the unlikely event that an inmate at high risk of sexual victimization was placed in involuntary segregated housing, the inmate would have access to privileges and programs when at all possible. If these privileges and programs had to be restricted, the facility would document the activities restricted and the reason for the restriction.

§115.51 – Inmate Reporting

- Exceeds Standard (substantially exceeds requirement of standard)**
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)**

Does Not Meet Standard (requires corrective action)

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states any inmate who is the victim of any of the following should report the abuse to a staff member as soon as possible:

- a. Sexual abuse;
- b. Sexual harassment;
- c. Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment;
- d. Staff neglect or violation of responsibilities that may have contributed to such incidents.

SCI- Laurel Highlands offers inmates the following methods for Reporting:

- Verbal or written report to any staff member-A report may be made to any staff member in the facility including, but not limited to, Medical staff, Psychology staff, Corrections Officers, and Counselors. Verbal reports to staff are immediately documented on the DC-121, Part 3, Employee Report of Incident.
- Submission of a DC-135A, Inmate Request to a Staff Member. Written DC-135A, Inmate Request to Staff Member regarding PREA allegations shall be retained in the appropriate investigative file. Reports are held in strict confidence and will precipitate the immediate commencement of an investigation.
- Incidents of sexual abuse, and sexual harassment and retaliation can be reported in writing by sending correspondence through the mail to: BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110.
- Submitting a report online at www.tipsubmit.com

Through staff and inmate interviews it was determined inmates and staff may make a private report to any supervisor or the PREA Compliance Manager. Inmates are also provided with the mailing address to the Pennsylvania State Police Bureau of Criminal Investigation and are permitted to make a report directly to this agency. The auditor was advised by random staff that all reports; including verbal, written, anonymous, and third-party reports would be investigated. Verbal reports would be documented by the staff immediately upon receipt of such information.

§115.52 – Exhaustion of Administrative Remedies

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

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states that “inmates shall not utilize the inmate grievance system to report sexual abuse by a staff member or inmate-on-inmate sexual contact, as defined in the Glossary. However, if an inmate files a grievance related to sexual abuse, the

Grievance Officer shall reject the grievance and forward to the facility Security Office for tracking and investigation. The inmate will be notified of this action.”

DC-ADM 004 Inmate Grievance System Procedures Manual Section 1- Grievances and Initial Review states a grievance regarding an allegation of a sexual nature (abuse/harassment) against a staff member or inmate-on-inmate sexual contact will not be addressed through the Inmate Grievance System and must be addressed through Department policy DC-ADM 008. These allegations are taken seriously by the Department and must and will be investigated to make sure that inmates are safe in the facilities. If a grievance is filed regarding an allegation of a sexual nature (abuse/harassment) against a staff member or inmate-on-inmate sexual contact, while it will not be addressed through the inmate Grievance System, the grievance will be immediately forwarded to the Security Department as well as PREA Compliance Manager in accordance with Department policy DC-ADM 008 to start an investigation.

According to the Superintendent at SCI-laurel Highlands the Superintendent’s Assistant collects all grievances. She confirmed that all sexual abuse allegations received as a grievance would immediately be forwarded to appropriate investigators.

§115.53 – Inmate Access to Outside Confidential Support Services

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

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse the Department works in collaboration with the Pennsylvania Coalition against Rape (PCAR) and its member centers. The facility PREA Compliance Manager, in conjunction with the statewide PREA Coordinator, has worked to establish mutual agreements with local rape crisis centers where all Department facilities are located. Copies of these agreements shall be maintained by the Department.

PA DOC Policy requires that supportive services may be provided via a variety of methods including in person, during a non-monitored phone call and/or in writing. The preferred service delivery method is in person in a confidential setting. An inmate will be offered the opportunity to talk with a victim advocate and receive continued care when they have been a victim of facility sexual abuse, no matter if they reported the facility sexual abuse immediately or made a delayed disclosure.

During the audit, the auditor was provided with a documented MOU for victim advocate services from Victim Services Inc. in Somerset County. They provide a 24 hot line number. The MOU also states that Victim Services Inc. provides confidential supportive services to the victim either by telephone, mail or in person will accompany the victim to court proceedings concerning the alleged sexual assault. They agree to maintain confidentiality as required by state standards for certified crisis counselors.

During non-working hours, the Shift Commander will be responsible to ensure the aforementioned support services. During the facility tour the auditor was shown what the facility calls “PREA Boxes” that contain checklists, evidence kits, and contact numbers including those for victim advocates.

Random inmate interviews as well as interviews with inmates who reported a sexual abuse, revealed that many of the inmates were familiar with the victim services that are available for victims of sexual abuse. Inmates acknowledged having access to mailing addresses through posters, posted in the housing units.

§115.54 – Third-Party Reporting

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

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states that the sexual abuse reporting address is an option for the general public to report an allegation of sexual contact.

A sexual abuse reporting address has been established for the general public, to anonymously report sexual abuse, sexual harassment, or retaliation to the Pennsylvania State Police. The address for making a written report is: BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110.

The reporting individual may choose to include their name and contact information, but it is not necessary in order to make the report.

Reports may also be submitted online at www.tipsubmit.com.

This information is posted on the Agency website.

§115.61 – Staff and Agency Reporting Duties

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

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states any staff member, contract service provider, volunteer or intern, shall immediately report to the Shift Commander if he/she has knowledge, suspicion, or information regarding any of the following:

1. Sexual abuse of an inmate;
2. Sexual harassment of an inmate that occurred in a facility;
3. Retaliation against inmates or staff who reported such an incident; and/or

4. Staff neglect or violation of responsibilities that may have contributed to an incident or retaliation

The incidents listed above may have occurred in any facility, whether or not it is affiliated with the Department.

A DC-121, Part 2, Report of Extraordinary Occurrence Report shall be filed in every case, apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in Department policy, to make treatment, investigation, and other security and management decisions, where sexual abuse with an inmate is reported in accordance with Department policy 6.3.1, Facility Security.

All staff have a duty to report any knowledge, suspicion, or information related to sexual abuse or sexual harassment. Staff are also required to report any retaliation towards any inmate or staff for reporting and any staff neglect that may have contributed to an incident or retaliation.

During staff interviews it was clear that the staff were aware of their duty to report.

§115.62 – Agency Protection Duties

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states that when Department staff learn that an inmate is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action will be taken to protect that inmate.

In the past 12 months, there have not been any instances where the agency determined an inmate was subject to substantial risk of imminent sexual abuse.

Through interviews with staff, it was determined staff take immediate action to separate the alleged victim and abuser whenever it is determined an inmate may be at risk for imminent sexual abuse. The alleged victim would be moved to the cell or bed closest to the officer’s desk so they can be better monitored.

§115.63 – Reporting to Other Confinement Facilities

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

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states: An inmate may file a report of sexual abuse, sexual harassment or retaliation sustained while confined at another facility.

It is the Facility Manager/designee's responsibility to notify the head of the facility in which the reported abuse, harassment or retaliation occurred. Notification must be provided as soon as possible, but no later than within 72 hours after receipt of information and documented on the Notification of Sexual Abuse/Harassment Allegation to Another Facility (Attachment 3-B). This document shall be maintained by the PREA Compliance Manager in an annual file for audit verification purposes.

A copy of the notification must also be sent to the facility PREA Compliance Manager and the statewide PREA Coordinator/designee for tracking purposes.

During the past 12 months, the SCI Laurel Highlands received one allegation that a current inmate was abused while previously confined at another facility. The auditor was provided with documentation showing that the SCI Laurel Highlands Superintendent notified the other facility Superintendent within 72 hours. An e-mail was kept as proof of receipt

According to the Superintendent, SCI laurel Highlands the facility has not received an allegation of sexual abuse from another facility indicating that an incident had occurred at Laurel Highlands. Staff advised that the policy would be to have the allegation assigned to an investigator for immediate investigation.

§115.64 – Staff First Responder Duties

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

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states that “Upon learning of an allegation that an inmate was sexually abused, the first staff member to respond shall follow the procedures as outlined below:

Security staff shall:

- a. Notify the facility's main control center;
- b. Immediately separate the alleged victim and alleged abuser; (§115.64[a][1])
- c. secure any reported crime scene until appropriate steps can be taken to collect evidence; and (§115.64[a][2])
- d. If the abuse occurred within the last 96 hours that still allows for the collection of physical evidence, request the alleged victim and ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. (§115.64[a] [3] [4]).

Non-Security staff shall:

- a. Immediately notify the facility's main control center/security staff; and (§115.64[b])
- b. If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence.

Upon notification of a report of sexual abuse, the Shift Commander/designated security staff shall

- a. Ensure that the alleged victim and alleged abuser are separated; (§115.64[a][1])determine the least traumatizing placement for the alleged victim, which may be the same or different general population unit;
- b. Secure any video, audio, or photographic evidence of the incident;
- c. Notify the Intelligence Gathering Captain, Deputy Superintendent for Internal Security (DSIS), or Security Lieutenant;

Through interviews with inmates and staff, it was determined staff have responded promptly to situations where sexual abuse was reported. Staff are aware of the procedures to separate the victim from the abuser as well as how to preserve evidence. The staff at SCI Laurel Highlands Staff have laminated cards attached to their ID Badges that provide first responder information. The facility has "PREA Boxes" in the Control center and other key locations that contain checklists to enable staff to follow policy, list of numbers for required contacts, and evidence gathering supplies. Staff are aware that information related to reports abuse/harassment should remain confidential and not disclosed to parties outside of the investigation.

Within the past 12 months SCI Laurel Highlands has had nine (9) reports of sexual abuse/harassment. None of these reports were in the time frame that required a response as noted in the above policy.

§115.65 – Coordinated Response

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

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states the facility shall develop a written facility plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. This policy outlines the facility's coordinated response plan. Through interviews with staff, it was determined the facility follows a statewide PA DOC coordinated response plan for allegations of sexual abuse that involves a checklist of responsibilities.

§115.66 – Preservation of ability to protect inmates from contact with abusers

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

The Pennsylvania Department of Department Corrections operates within the confines of collective bargaining agreements with ten (10) different unions. None of these collective bargaining agreements contain language that limit the ability to remove an alleged staff sexual abuser from contact with any inmates pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted. In addition, the collective bargaining agreements are silent regarding suspensions pending investigation.

A memo from the Secretary of Corrections dated January 12, 2015, states the Department does not need to demonstrate that the employee committed the suspected offenses; but rather, that the “nature of the allegations” are such that there is just cause to remove the employee from the institution pending the outcome of the investigation. These agreements do not restrict the Agency from removing an alleged staff abuser from contact with inmates

§115.67 - Agency protection against retaliation

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states the agency will ensure retaliation monitoring of the following inmates:

- a. Those that have reported institutional sexual abuse or sexual harassment allegations;
- b. Those that have suffered sexual abuse; and/or
- c. Those that have expressed a fear of retaliation due to cooperation with an investigation of an incident related to this procedures manual.

The Corrections Classification and Program Manager (CCPM)/PREA Compliance Manager is responsible for monitoring reports of retaliation. The CCPM ensures that inmates reporting retaliation are provided with the opportunity to meet with a corrections counselor, and track this using the Department Retaliation Monitoring Form. The Counselor will report to the CCPM If the PCM determines that the initial monitoring indicates a continuing need, the periodic status checks will be extended beyond 90 days by the corrections counselor.

The CCPM will notify the Deputy Superintendent of Centralized Services (DSCS) when staff require monitoring due to report of sexual abuse, or because of an expressed fear of retaliation due to cooperation with an investigation of inmate sexual abuse or sexual harassment, per PREA Standard §115.67 [a][c][e]

During the past 12 months, there have been no incidents of retaliation reported.

Through various staff and inmate interviews, it was discovered multiple measures are taken to ensure against retaliation. In order to protect against retaliation, the PREA Compliance Manager would monitor retaliation of inmates and the Deputy for Centralized Services would monitor retaliation of staff. These two staff would speak with the inmates/staff being monitored and make sure they are being not experiencing retaliation.

Prior to the audit, the auditor received a complaint from an inmate at SCI Laurel Highlands. In the letter the inmate alleged that he had been subjected to verbal harassment for earlier complaints (sexual harassment and non PREA

issues) made against a correction officer(s). This inmate was interviewed by the auditor. The information provided during the interview as well as the letter were brought to the attention of the facility CCPM for appropriate follow up.

§115.68 – Post-Allegation Protective Custody

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states inmates at a high risk for sexual victimization or inmates that have alleged abuse shall not be placed involuntarily in Administrative Custody (AC) as a means of protection unless an assessment of all available alternatives has been made by Psychology and Security staff in conjunction with the PREA Compliance Manager, and a determination has been made that there is no other available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the inmate in involuntary AC for less than 24 hours while completing the assessment.

During the pre-audit, the auditor was provided with documentation stating the facility has not placed any inmates on involuntary AC status who were sexual abuse victims or complainants.

SCI laurel Highlands uses alternative housing in another general population housing unit. If an inmate were to be placed in involuntary segregated housing for these reasons, they would still have access to programs, privileges, education, and work opportunities to the extent possible. If any activities are restricted, the staff would document the opportunities limited, the duration of the limitation, and the reason for the limitation.

During the audit, the auditor interviewed an inmate who had made an allegation of sexual abuse in 2015. He confirmed that he had not been placed in the segregation unit to separate him from the alleged abuser

§115.71 – Criminal and Administrative Agency Investigations

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

DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 5 – Investigating Allegations of Sexual Harassment and/or Sexual Abuse- every report, complaint or allegation of sexual harassment/sexual abuse, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively.

Substantiated allegations of conduct that appear to be criminal are referred for prosecution. The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual assault or sexual

harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Investigative staff at SCI Laurel Highlands do not require victims to take a polygraph examination as a condition for proceeding with the investigation. Through staff interviews, it was determined that the Security Captain and PREA Compliance Manager, would be informed on the progress of any investigations conducted by the Pennsylvania State Police. They would receive this information by regular correspondence via phone and/or email.

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training Investigations - states that “In addition to the Basic PREA Training provided to all staff, any staff designated to conduct sexual abuse investigations shall receive additional training in accordance with PREA Standard 115.31 and Specialized training: Investigations. This specialized training will include, but is not limited to: interviewing sexual abuse victims, proper use of Miranda warnings, Garrity Rule, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.”

Documentation supplied by the facility indicated that training for investigators is based on training modules developed by the PREA Resource Center. Two facility investigators have received 20 hours of Specialized PREA Training for Investigations at the PA DOC training academy. During the audit the auditor spoke at length with the Security Captain who currently conducts administrative investigations at SCI-Laurel Highlands. The Captain demonstrated that he has received training to conduct these investigations and there is also a trained Lieutenant who assists. The investigators were knowledgeable that any case that appeared to be criminal would be referred for criminal prosecution. The Investigators also acknowledged using a preponderance of evidence as the standard of evidence used to substantiate allegations of sexual abuse and sexual harassment.

Investigations continue, even if the staff member terminates employment or the inmate transfers to another facility. Both administrative and criminal investigations would be documented in investigation reports. The Security Office provided the auditor with access to all records and notebooks containing investigations. Both administrative and criminal investigations are well documented and organized.

The auditor interviewed an inmate who had made an allegation of sexual abuse in 2015. The inmate remarked that the investigator from the facility handled his case in a very professional manner

§115.72 – Evidentiary Standard for Administrative Investigations

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

DC-ADM 008 PREA Procedures Manual Section 5- Investigating Allegations of Sexual Harassment and/or Sexual Abuse states in administrative investigations, the Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual harassment/sexual abuse are substantiated.

Interviews with investigative staff confirmed that a preponderance of evidence is used when determining whether to substantiate allegations of sexual abuse or sexual harassment.

§115.73 – Reporting to Inmate

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

DC-ADM 008 PREA Procedures Manual Section 5- Investigating Allegations of Sexual Harassment and/or Sexual Abuse states the PREA Compliance Manager will inform the subject(s) as to whether the investigation is found to be substantiated, unsubstantiated, or unfounded.

DC-ADM 008 PREA Procedures Manual Section 8- Notification of Inmates states that “following the investigation into an inmate’s allegation that he/she suffered sexual abuse or sexual harassment in a facility within the Department, the Prison Rape Elimination Act (PREA) Compliance Manager at the facility where the inmate is housed shall inform the inmate, in writing on the PREA Investigation – Inmate Notification Form (Attachment 8-A) as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.

DC-ADM 008 states that if another agency conducts the investigation, the PREA Compliance Manager shall request the relevant information from the investigative agency in order to inform the inmate. The facility provided documentation that reflects that information from another DOC facility was forwarded to the inmate.

Following an inmate’s allegation that a staff member has committed sexual abuse or sexual harassment against an inmate, the PREA Compliance Manager shall subsequently inform the inmate when any of the following occurs: the staff member is no longer posted within the inmate’s unit; the staff member is no longer employed at the facility; the Department learns that the staff member has been criminally charged related to sexual abuse within the facility; or the Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility.”

During the past 12 months, there were two (2) criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility. Of these investigations, both inmate victims were notified, of status changes and results of the investigation in accordance with PA Policy. In one case the allegation was unsubstantiated and in the other case the alleged victim refused to cooperate in the investigation and is no longer in the prison system.

§115.76 – Disciplinary sanctions for staff

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

DC-ADM 008 PREA Procedures Manual Section 7-Discipline Related to Sexual Abuse, Sexual Harassment, and

Retaliation states any employee who violates Department sexual abuse or sexual harassment policies by engaging in, failing to report, or knowingly condoning sexual abuse or sexual harassment of an inmate shall be subject to appropriate disciplinary or administrative action up to and including termination. When an allegation is made involving a staff member, contract service provider or volunteer this person will be removed from contact with the alleged victim until the conclusion of this investigation.

In the event that a staff member is terminated, or resigns in lieu of discharge, for violation of the this procedures manual, the Bureau of Human Resources (BHR) will notify the Office of Special Investigations and Intelligence (OSII) to determine if a potential criminal violation exists. If the violation meets criminal standards, OSII will refer the matter to the District Attorney’s Office that has jurisdiction over the affected facility.

Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

During the past 12 months, SCI Laurel Highlands has not had any staff from the facility who have violated agency sexual abuse or sexual harassment policies. As a result, there were no staff disciplinary actions or terminations

§115.77 - Corrective action for contractors and volunteers

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

DC-ADM 008 PREA Procedures Manual Section 7-Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation states: When an allegation is made involving a contractor or volunteer, this person will be removed from contact with the alleged victim until the conclusion of this investigation; Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates, and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

During the past 12 months, there have not been any contractors or volunteers at SCI Laurel Highlands who have reported to law enforcement for engaging in sexual abuse of inmates. Through staff interviews, it was determined that any contractor or volunteer suspected of sexual abuse or sexual harassment would be removed from the facility pending the outcome of the investigation.

§115.78 – Disciplinary sanctions for inmates

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

DC-ADM 008 PREA Procedures Manual Section 7-Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation state that “inmates shall be subject to disciplinary sanctions pursuant to the formal disciplinary process, following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate- on-inmate sexual abuse. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.”

Inmates who have violated the agency’s sexual abuse and sexual harassment procedures go through a disciplinary hearing. If the allegations were criminal in nature, the Pennsylvania State Police may pursue criminal charges which may delay the internal disciplinary process.

The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed. The facility may discipline an inmate for sexual contact with staff only if it is substantiated that the staff member did not consent to such contact.

For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. A reporting inmate may only be subjected to discipline if the report is determined to be unfounded with proven malicious intent at the conclusion of a full investigation. The facility has not had any inmate receive discipline for false or malicious reporting.

The Department prohibits all sexual activity between inmates and may discipline inmates for such activity. The Department will not deem such activity to constitute sexual abuse if the Department through the investigative process determines that the activity is not coerced or forced.

During the audit the auditor interviewed an inmate in the Segregation Unit who had been found guilty of an offense related to sexual abuse. The inmate was the alleged abuser. He advised that this hearing was fair but that he is appealing the 30 day sentence that he received.

§115.81 – Medical and mental health screenings; history of sexual abuse

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

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states if the screening pursuant to PREA Standard 115.41 indicates that a prison or jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical and mental health practitioner within 14 days of the intake screening or sooner, if clinically indicated.

If the screening pursuant to PREA Standard 115.41 indicates that a prison or jail inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting.” Interviews with the SCI Laurel Highlands Mental Health staff, confirmed that inmate perpetrators of sexual abuse are referred for a mental health evaluation, and this evaluation is conducted within 14 days. Follow up care would be determined based on the initial evaluation; however, the inmate would be seen by the Mental Health staff anytime the inmate requested Mental Health services. In addition, when information becomes available relating to perpetration of inmate-on-inmate sexual abuse history, a mental health evaluation will be conducted on these abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Any information related to sexual victimization or abusiveness occurring in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans, security and management decisions, including housing, bed placement, work, education, and program assignments, or otherwise required by Federal, State, or local law.

During the past 12 months, all of the inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. During the past 12 months all of inmates who have previously perpetrated sexual abuse were offered a follow-up meeting with a mental health practitioner. During the audit, the auditor reviewed a sample of records of both inmates who disclosed prior victimization as well as inmates who have previously perpetrated sexual abuse. The inmates sampled had documentation of a mental health evaluation within 14 days.

Mental Health Staff interviewed at SCI Laurel Highlands confirmed that the 14 day time frame on referral is reached. The staff commented on the efficiency of medical staff conducting the initial screening in making notifications and referrals.

Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. The DC-484 (13.08.01 Delivery of Mental Health Services, Attachment 2-A) are used for this purpose.

If the inmate refuses to sign, it shall be noted on the DC-484 and signed by the witness and maintained in the medical record. Samples of signed consent forms were provided to the auditor.

§115.82 – Access to emergency medical and mental health services

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

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states: that “inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgement. The inmate victims of sexual abuse shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.”

Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility does not charge inmates for care or treatment

SCI Laurel Highlands maintains a documented MOU with Somerset Hospital. This hospital would be the primary provider of emergency care. The MOU states that Somerset Hospital will conduct forensic examinations on victims of sexual abuse for acts allegedly committed in a state correctional institution. These examinations would be conducted by SANEs. The MOU was signed on September 30, 2015. In addition, the facility established a second MOU with Conemaugh Hospital. This MOU contains similar language to the MOU established with Somerset Hospital and is dated October 26, 2015.

Through interviews with facility Medical staff and security personnel it was confirmed that inmate victims of sexual abuse receive timely and unimpeded access to emergency treatment and crisis intervention services. If the abuse occurred within 96 hours, the inmate is immediately taken to receive stabilization treatment and would then be transferred to the hospital. Inmates receive treatment based on the medical and/or mental health staff’s professional opinion. Victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

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

DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 4 – Responding to Reports of Sexual Abuse states that Continuity of Care Ongoing medical and mental health treatment shall be available for inmates who have been victimized by sexual abuse. This includes appropriate follow-up services and, when necessary, referrals for continued care following their transfer to other facilities and/or their release from the Department. The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. (§115.83[a])

Upon learning that an inmate has either perpetrated or been a victim of institutional sexual abuse, psychology staff monitor the inmate on a monthly basis for a minimum of 90 days to ensure the provision of treatment and support services, as necessary. This contact is documented on the DC-560, Mental Health Contact Note in accordance with Department policy 13.8.1. If the psychology staff determines that the initial monitoring indicates a continuing need, the periodic status checks will be extended beyond 90 days. The evaluation and treatment of such victims includes, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

All facilities shall provide alleged victims with medical and mental health services consistent with the community level of care. During interviews staff at SCI laurel Highlands all stated that they believed that the level of care provided by their facility exceeded the community level of care.

Inmate victims of sexual abuse are offered tests for sexually transmitted infections, as medically appropriate. SCI Laurel Highlands is an all-male facility; therefore, PREA Standards 115.83 (d)-1 and 115.83 (e) - 1 relating to female inmates are not applicable.

§115.86 – Sexual abuse incident reviews

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

DC-ADM 008 PREA Procedures Manual Section 6- Sexual Abuse Incident Review states each facility shall conduct a Sexual Abuse Incident Review at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated. No review will be conducted if the allegation has been determined to be unfounded. The review shall occur within 15 working days of the receipt of the notification from Office of Special Investigations and Intelligence (OSII) that the investigation was deemed satisfactory.

During the past 12 months, there has been one criminal and/administrative investigation of alleged sexual abuse completed at the facility that required a follow up by a Sexual Abuse Incident review within 30 days. The review was completed in a timely manner. In accordance with the PA Policy the PREA Compliance Manager chaired the Sexual Abuse Incident Review Committee. The composition of the committee included upper-level management officials, as well as line supervisors, investigators, and medical/mental health practitioners specified in PA Policy

The completed review submitted to the auditor indicated that the review team evaluates whether there are changes that need to be made to policy or procedures and considers and whether physical barriers may have enabled the abuse. Staffing levels are reviewed as well and whether monitoring technology should be deployed or augmented to supplement supervision by staff. At the conclusion of the facility incident review, the PREA Compliance Manager submits a report of the findings to the PREA Coordinator.

§115.87 – Data Collection

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

DC-ADM 008 PREA Procedures Manual Section 1- Data Collection and Retention states: the Bureau of Planning, Research and Statistics shall collect accurate, uniform data for every allegation of sexual abuse at facilities under

the Department's direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The agency aggregates the incident-based sexual abuse data annually.

The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinements of its inmates.

§115.88 – Data Review for Corrective Action

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

DC-ADM 008 PREA Procedures Manual Section 1- Data Collection and Retention states The Bureau of Planning, Research and Statistics shall review data collected and aggregated annually pursuant to PREA Auditing Standard in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training by: Identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its finding and corrective actions for each facility, as well as the Department as a whole.

The report includes a comparison of the current year's data and corrective actions taken to reduce the incident of sexual abuse, sexual harassment, and retaliation with those from prior years, and shall provide an assessment of the Department's progress in addressing sexual abuse.

The Annual PREA Report shall be approved by the Secretary and posted on the Department website by June 30 of each year. A link to the Department website can be found below:

[http://www.cor.pa.gov/Administration/PrisonRapeEliminationAct\(PREA\)/Pages/DOC- PREA- Statistics.aspx#.VfSLPa1RHIU](http://www.cor.pa.gov/Administration/PrisonRapeEliminationAct(PREA)/Pages/DOC- PREA- Statistics.aspx#.VfSLPa1RHIU)

Sexual abuse data is submitted to the agency monthly by the facility. If a problem or trend is noticed, a plan of action would be drafted to rectify the problem. Data is retained on secure servers that are backed up.

The 2014 review consists of data collected from 2012, 2013, and 2014. Annual reports attempt to identify trends and areas of concern. Annual reports are typically broad and are intended to capture statistical numbers. In addition, the review consists of future plans of corrective action to advance its effort and solid commitment to eradicate sexual abuse, sexual harassment, and retaliation for reporting such incidents. Inmate's names and specific information related to the allegations are redacted.

§§115.89 – Data Storage, Publication, and Destruction

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

DC-ADM 008 PREA Procedures Manual Section 1- Data Collection and Retention states each facility and Office of Special Investigations and Intelligence (OSII) shall be responsible to securely maintain such files. The Department shall make all aggregated sexual abuse data from facilities under its direct control and contracted facilities, readily available to the public through the Department website, at least annually.

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.

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.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Eric S. Pierson
Department of Justice Certified PREA Auditor

12/18/15
Date

