

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

Name of facility:	State Correctional Institution at Pittsburgh (SCI Pittsburgh)		
Physical address:	3001 Beaver Avenue, Pittsburgh, PA 15233		
Date report submitted:	April 24, 2015		
Auditor Information			
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Date of facility visit:	June 30 –July 3, 2014		
Facility Information			
Facility mailing address: (if different from above)			
Telephone number:			
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
Name of PREA Compliance Manager:	Rene Adams-Kinzel	Title:	Corrections Classification Program Manager
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Agency Information			
Name of agency:	Department of Corrections		
Governing authority or parent agency: (if applicable)			
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Agency Chief Executive Officer			
Name:	John E. Wetzel	Title:	Secretary of Corrections

Agency-Wide PREA Coordinator			
Name:	Jennifer L. Feicht	Title:	PREA Coordinator
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AUDIT FINDINGS

NARRATIVE:

The first PREA audit in Pennsylvania Department of Corrections was conducted at SCI Pittsburgh on June 30 – July 3, 2014 by Mr. David Haasenritter (designated auditor) and Mr. Charles Kehoe (auditor). Additionally, Ms. Jenni Trovillion (Co-Director of the PREA Resource Center) participated in the audit as an observer. Approximately two weeks prior to the audit, the auditors received the PREA questionnaire with attached documents. The audit team contacted Just Detention International (JDI); Center for Victims (Rape Crisis Center who provides emotional support services); conducted interviews of the Secretary, and PREA Coordinator; and reviewed the Pennsylvania Department of Corrections website prior to the audit. JDI reported they had heard from an inmate who was raped in 2009. The auditor and the agency discussed additional documents required, recommended policy changes, and a tentative schedule. The night before the audit the facility provided an alpha listing of all inmates housed at the facility; lists of inmates for specific categories to be interviewed; and a list of all staff by duty position and shifts that were used to identify inmates and staff to be interviewed (random and specific category).

The audit team toured most of the facility on June 30, 2014, completing the tour over the following days. Following the tour, the audit team began the interviews. All required facility staff and inmates interviews were conducted on-site. Interviews included 36 inmates to include a minimum of one inmate from every housing area selected by the auditors from a list of all the inmates; and inmates who were identified as being in a designated group (e.g., disabled, limited English speaking ability, LGBTI, or who had reported sexual abuse). The auditors also conducted 41 staff interviews to include random selected staff from each staff and specialized staff including the Warden, PREA Compliance Manager, Investigator, first responders, health care providers, mental health professionals, contactors and volunteers. Investigative records, training records, and personnel records were reviewed. The audit team observed inmate PREA screenings, inmate PREA training, and tested the inmate phone system for reporting allegations.

The auditors reviewed 23 investigative files, 21 were investigated, one was reported to the other facility that the allegation occurred (did provide statement from the inmate); and one sexual harassment early in the audit cycle was not investigated. Of the 21: ten were staff-inmate sexual harassment (four unsubstantiated, six unfounded); three were staff-inmate sexual abuse (all unfounded); three inmate-inmate sexual harassment (one substantiated, two unsubstantiated; and five inmate-inmate sexual abuse (four unsubstantiated, one unfounded). Additionally four cases were still pending

investigation during the on-site audit. During the corrective action period three more investigative files were reviewed.

When the on-site audit was completed, the audit team conducted an exit meeting. While the auditors could not give the facility a final finding, the auditor did provide a preliminary status of his findings. The auditors thanked Pennsylvania Department of Corrections and SCI Pittsburgh staff for their hard work and commitment to the Prison Rape Elimination Act.

During the interim report writing period, the audit team reviewed modified policies; additional documents; and conducted phone interviews with staff and outside agencies.

During the corrective action period, the auditors reviewed new policy; additional documents; and conducted phone interviews with staff and outside agencies. Superintendent Mark Capozza; PREA Coordinator Ms. Jennifer L. Feicht; Ms. Carole Mattis, Staff Assistant to the Executive Deputy Secretary; and Ms. Rene Adams-Kinzel the PREA Compliance Manager were very helpful in coordinating all the phone interviews, and providing updated policies and additional documentation. The agency and facility modified policies and provided the auditors proofs of implementation and practices. For the agency, most policies were updated through "BULLETINS", which provides changes to policy and is incorporated when the policy is reviewed and updated. Bulletin DC-ADM-008-01 and Bulletin 4.4.1-1 were published. Additionally, the auditor received letters from inmates which they discussed with SCI Pittsburgh, responded to the inmates, and followed up with any actions.

During the audit process Pennsylvania Department of Corrections and SCI Pittsburgh continued to improve its approach to preventing, detecting, and responding to sexual abuse and sexual harassment. One inmate's comments best state the changes that have occurred at SCI Pittsburgh in terms of sexual safety. The inmate was a transgender inmate who had previously been sexually assaulted at SCI Pittsburgh. She had been transferred to another facility and recently had been transferred back to SCI Pittsburgh. She stated she felt safe at SCI Pittsburgh today, but could not have said that previously.

DESCRIPTION OF FACILITY CHARACTERISTICS:

SCI Pittsburgh (historically known as the "Western Penitentiary" or the "West Pen") is a low-to-medium security correctional institution, operated by the Pennsylvania Department of Corrections, located about five miles west of Downtown Pittsburgh and within city limits. The facility is on the banks of the Ohio River, and is located on 21 acres of land (12 acres within the perimeter fence). It was the first prison west of the Atlantic Plain as well as a major Civil War prison in 1863–1864. The Pennsylvania Department of Corrections closed the prison in 2005 and reopened it in 2007 to address an unexpected increase in prisoners throughout the state system.

The population on the first day of the audit 1955 inmates with a capacity for 2105 inmates. The inmates live in 10 housing units (there are 11 housing units, but one is closed), 239 single cells, 923 two man cells, one open bay with 20 beds located in the infirmary. The majority of the prisoners are housed in general population. There are 224 cameras, numerous gates, and staff posts throughout the facility to assist with

security. There is also an adequate kitchen and dining area, health services area, commissary, chapel, educational classrooms, indoor/outdoor recreational areas, laundry, and administrative offices.

The mission of SCI Pittsburgh is to protect the public by confining prisoners in a safe, secure facility, and provide opportunities for inmates to acquire skills and values necessary to become productive law-abiding citizens; while respecting the rights of crime victims.

SUMMARY OF AUDIT FINDINGS:

On August 30 – July 3, 2014, the on site visit was completed. During the corrective action period 20 standards had corrective actions to be completed. On 23 January, 2015 SCI Pittsburgh was found to have met all applicable standards. The final results of SCI Pittsburgh PREA audit is listed below:

Number of standards exceeded: 0
Number of standards met: 42
Number of standards not met: 0
Non-applicable: 1

§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)

The Pennsylvania Department Corrections has a written policy, DC-ADM-008 Prison Rape Elimination Act (PREA) Procedures Manual (dated June 30, 2014), mandating zero tolerance towards all forms of sexual abuse and sexual harassment. Previous PREA manual was dated July 25, 2008. Policy does not completely cover every standard, but Agency policies and procedures outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Other agency policies such as 4.1.1 Human Resources and Labor Relations, 13.2.1 Access to Health care Procedures Manual, and DC-ADM 802 Administrative Custody Procedures, supplement the main PREA policies.

Ms. Jennifer L. Feicht is the full time PREA Coordinator. Previously she worked for Pennsylvania Coalition Against Rape (PCAR). She served as Prison Project Consultant and Contract Monitor at PCAR. This experience gives her a good background to implement PREA. She claimed to have enough time to perform her PREA duties to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. Ms. Feicht works directly for the Deputy Secretary of Corrections. Though she has no staff under her, she is assisted by Ms. Carole Mattis. Both are very knowledgeable of PREA and are certified PREA auditors. Ms. Feicht has 27 compliance managers reporting to her, and she is very active in assisting them implement PREA policy and procedures.

Ms. Rene Adams-Kinzel is the PREA Compliance Manager. In Pennsylvania Department of Corrections the Corrections Classification Program Manager also serves as the PREA Compliance Manager. She works directly for the Deputy Superintendent. She has the authority to coordinate the facility's efforts to comply with the PREA standards. She meets daily each morning with the Superintendent, the two deputies and the security major to discuss daily activities and events over the past 24 hours. She claimed to have enough time to perform her PREA duties. She believes the time spent on her PREA responsibilities will lessen as PREA becomes more engrained in the culture of the facility. She has been very active implementing PREA procedures since being assigned to perform PREA Compliance Manager duties. Inmates and staff know she is the PREA Compliance Manager.

During the interview of Secretary John Wetzel and Superintendent Mark Capozza, it was obvious they understood the PREA standards and was supportive to making change in policy and culture to ensure the safety of staff and inmates from sexual assault and harassment. Secretary Wetzel ensures Ms. Feicht has the authority and support to oversee PREA implementation and activities.

§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 Department of Corrections has renewed eight (8) contracted facility contracts. By policy new contracts and contract renewals shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. Those renewed does include the contractors obligation to adapt and comply with PREA standards. None of the contracts included language that Pennsylvania Department of Corrections shall provide contract monitoring to ensure that the contractor is complying with the PREA standards. Contracts did include a statement of general monitoring.

During the corrective action period, Pennsylvania Department of Corrections began renewing those contracts with the stipulation that contract monitoring would be done for PREA compliance. The auditor was provided a copy of the first contract amended to include the agency's monitoring contract facilities to ensure that the contractor is complying with the PREA standards. The process to monitor was being refined before implementation. It was a system based on a three year cycle, two years of Pennsylvania Department of Corrections reviews and one year of a PREA audit by a DoJ certified auditor. Jails they contract with have begun to contract for PREA audits.

§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 ensures all facilities develop and document a staffing plan that is supplemented by video monitoring to protect inmates against sexual abuse. SCI Pittsburgh has developed a staffing plan and makes its best efforts to comply with the plan. The facility documents all deviations to the plan. Deviations included: unscheduled outside hospital posts; and youthful offender transports to SCI Pine Grove. Overtime is often used to mitigate staff shortages. When determining staffing levels and cameras for the staffing plan, consideration was given to: generally accepted correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the facility's physical plant; composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws,

regulations, or standards; prevalence of substantiated and unsubstantiated incidents of sexual abuse; and other relevant factors. The staffing plan is reviewed annually by the facility using the above considerations along with the facility's deployment of video monitoring systems; and the resources the facility has available to commit to ensure adherence to the staffing plan. Additionally, every three years an agency team conducts an on-site review of the staffing plan. Though the policy requires consultation and approval of the PREA Coordinator, none of the annual reviews of the staffing plans were coordinated with the PREA Coordinator (115.13 (c)). Over the years SCI Pittsburgh has greatly upgraded their camera systems and increased staffing requirements. At the time of the audit there were 204 cameras in the housing units, with recording capability ranging from 30 – 112 days. Unannounced rounds are documented in logs and an agency form that requires comments reference PREA related concerns and follow-up to correct areas of concern. Twelve forms and logs in various housing units were reviewed. Unannounced rounds are done randomly on all shifts by the Superintendents, Deputies, Major, Corrections Classification Program Manager/PREA Compliance Manager, Security Captains and Security Lieutenants. The agency has a policy that prohibits staff from alerting other staff members that supervisory staff rounds are occurring. Staff and inmate interviews confirmed the staffing plans, unannounced rounds by supervisors and the increase in cameras.

During the corrective action period the PREA Coordinator reviewed the most recent staffing plan (2014) from SCI Pittsburgh, and established a system to ensure all annual facility staffing plans are coordinated with her.

§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)

Pennsylvania Department of Corrections makes its best efforts for youthful inmates to not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters; and avoids placing youthful inmates in isolation to comply with PREA standard 115.14 through designating specific facilities to confine youthful offenders. This auditor has audited one of those facilities (SCI Muncy) that meets the standards. SCI Pittsburgh does not confine youthful inmates, and if discovered during inprocessing or prior to arrival, they are immediately transported to SCI Pine Grove. By SCI Pittsburgh policy (supplement to DC-ADM-008), a youthful inmate will be accompanied by a security staff member at all times. Reviewed documentation of coordination for such immediate transfers and documentation showing they were immediately transferred. These cases were coming from nearby county jails. Prior to January 2014, SCI Pittsburgh housed seven youthful offenders for approximately two weeks or less in the restricted housing unit.

§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)

Through review of policy and documentation, interviews and observation SCI Pittsburgh does not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners; nor does the staff search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Though it would document cross-gender strip searches and cross-gender visual body cavity searches, it has not done any during the audit cycle.

Policy and procedures are implemented to enable inmates to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks. This was verified through observation during the on-site audit and through interviews with inmates. Policy was recently implemented but not consistently announcing opposite gender when they enter the housing units. Some housing buildings have separate and distinct housing units; and female staff will announce when on the floor entering one housing area, but not as they enter into the other housing unit (A and B units). Per interviews and observations announcements were not always made. SCI-Pittsburgh immediately changed their procedures and implemented the practice during the on-site audit (observation). During the corrective action period verified through interviews the practice had continued, and the facility purchased tone announcement equipment and installed in one unit as a test to assist in meeting the standard (115.15 (d)). During interviews it was also confirmed monitors that can observe male inmates naked were not viewed by female staff, though female staff interviewed thought it was not fair they could no longer work those posts or that they had to announce when entering a male housing unit.

Through interviews of staff and reviewing training records it was determined staff was trained to conduct cross-gender pat-down searches, but not how to conduct pat-down searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The transgender inmate interviewed did not raise any issues with pat-down searches being conducted. There was no lesson plan, slides, or training roster demonstrating training was done (115.15 (f)). During the corrective action period, the audit team, Pennsylvania Department of Corrections, and SCI Pittsburgh developed training material on conducting pat down searches of transgender and intersex inmates. SCI Pittsburgh immediately trained all staff on how to conduct pat down searches of transgender and intersex inmates. The auditor reviewed training records that the training was conducted. Policies were established through a bulletin (DC-ADM-008-01) and implemented during the corrective action period. The training material was also provided to the Pennsylvania Training Academy to be incorporated into the basic training instruction for searches and contraband.

SCI Pittsburgh is a male facility and thus is non-applicable to standard 115.15 (b) reference cross-gender pat-down searches of female inmates, absent exigent circumstances. Pennsylvania Department of Corrections policy does allow cross-gender pat-down searches of female inmates but will be changing the policy, and the female facility the auditor audited has reduced the number of cross-gender pat-down searches of female inmates by male staff per interviews with inmates at SCI Muncy.

§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)

The agency takes appropriate steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. PREA handouts and inmate handbooks are available in English and Spanish. The agency also has a contract for other language interpretations. The contracted language interpretation agency (Language Service Associates) was used during the audit for a Spanish speaking inmate interview. Language Service Associates is contacted using a toll free line. Staff who speak a foreign language or who signs has been identified. Both inmates and staff stated inmates are not used as interpreters, especially if it is an issue with sexual abuse and sexual harassment. Staff on shift during interviews knew which staff members could speak Spanish. Spanish speaking inmates said information is provided and understood. SCI Pittsburgh had no blind or deaf inmates at the time of the audit.

§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)

Through review of personnel records and interviews it was determined Pennsylvania Department of Corrections has established a system of conducting criminal background checks for new employees and contractors who may have contact with inmates to ensure they do not hire or promote anyone who had engaged in sexual abuse in a prison or other confinement setting; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, coercion, or if the victim

did not consent or was unable to consent or refuse; or had civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent.

Initial background checks use a number of systems to include NCIC files and local police checks. The agency uses a continuous system of background checks for employees that provides a notice whenever employee is involved with law enforcement using National Crime Information Center (NCIC)/Commonwealth Law Enforcement Assistance Network (CLEAN)/ and Pennsylvania Justice Network (JNET) systems in lieu of doing background checks every five years. Contractors go through background checks every five years.

Policy, personnel records, and interviews verified that the agency considers incidents of sexual harassment in hiring of staff, promotions do not consider incidents of sexual harassment. Pennsylvania Department of Corrections contacts previous employers to provide information which was verified by examples of requests and interviews. The agency imposes upon employees a continuing affirmative duty to disclose any misconduct to include sexual. HR staff acknowledged employees report before they receive the notice of law enforcement involvement is forwarded to the facility. Though no requests have been received, the facility and agency staff stated they would provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

During corrective action period, policy and practice for considerations of any incidents of sexual harassment in determining whether to promote anyone, who may have contact with inmates was completed. The agency also changed written annual evaluation forms to include a section asking employees each year to disclose any sexual misconduct covered under PREA. The form does include the requirements for employees to affirm each year during their written evaluations they have not engaged in any sexual abuse in a facility; engaged or attempted to engage in sexual activity by force; and has been administratively or civilly adjudicated of such activities.

§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)

By policy and interviews of the Pennsylvania Secretary of Corrections and PREA Coordinator; the agency considers the effect of the design, acquisition, expansion, or modification, and use of, installing, and modifications of monitoring technology upon the agency's ability to protect inmates from sexual abuse. There has not been any new facility in the last year.

SCI Pittsburgh has greatly upgraded their camera systems to provide greater security and enhance their ability to protect inmates from sexual abuse. SCI Pittsburgh is pending additional cameras based on recent camera plan submission. Through interviews, observation during tours and camera purchase documentation they have improved security and enhance their ability to protect inmates from sexual abuse through the use of technology in areas the Warden, PREA Compliance Manager and Security Chief determined best needed.

§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)

Policy and procedures outline evidence protocols that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions, and requirements for forensic medical exams. The Pennsylvania State Police conducts all criminal investigations. Pennsylvania Department of Corrections requested the Pennsylvania State Police to follow all PREA investigation and training requirements. There is a MOU between Pennsylvania State Police and the Pennsylvania Department of Corrections (September 2013) that outlines responsibilities for conducting criminal investigations of allegations of sexual crimes, which includes Pennsylvania State Police responsibility to keep the Pennsylvania Department of Corrections informed of the investigations. Office of Special Investigations and Intelligence (OSII) conducts investigations of allegations of misconduct by correctional staff not considered criminal, though they can refer back to the facility investigator. The facility is responsible for all administrative investigations.

The Pennsylvania Department of Corrections protocols were reviewed and found to be in line with DoJ's National Protocol for Sexual Assault Medical Forensic Examinations. SCI Pittsburgh has an MOU with Magee Womens Hospital (10 June 2014); and the University of Pennsylvania Medical Center Mercy is an alternate hospital to conduct forensic exams using SANE/SAFE staff. Services are provided at no costs to the inmate when requested, Crime Victim Compensation fund pays for the forensic exam. There was no forensic medical examination conducted during the audit period. SCI Pittsburgh has a MOU with the Crime Victim Center (June 18, 2014) to provide a victim advocate to provide victim advocate services to the victim. The Crime Victim Center also provides emotional support, crisis intervention, information, and referrals to the victim.

§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)

Through review of policies, documentations, MOUs, and interviews (staff and inmates), the Pennsylvania Department of Corrections and SCI Pittsburgh: ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment; and that all allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The Pennsylvania Department of Corrections policy and MOU with the Pennsylvania State Police describes the responsibilities of both agencies. Through review of documents and interviews of staff and inmates it was determined an administrative or criminal investigation is completed on all allegations of sexual abuse and sexual harassment. There was one investigation early in the audit cycle that was not investigated. The facility investigator initiates all investigations.

§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)

All SCI Pittsburgh staff had received training on PREA. Review of the lesson plans and slides identified the training did not include: inmates' right to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; and how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates (115.31 (a)). Interviews of staff demonstrated they understand the zero tolerance policy; the agency policy and procedures for prevention, reporting and response to a sexual assault or sexual harassment incident, and the reporting requirements and procedures. During the corrective action period, training slides were developed for the areas not covered and staff received the training. Auditor reviewed training slides and documents that staff understood the training.

Pennsylvania Department of Corrections female facilities tailor the training for staff, as this auditor has also audited a Pennsylvania Department of Corrections female facility.

Staff acknowledges receiving training prior to 2014; random training records did document PREA training in 2013 and 2014. For 2014, training was documented with the employee signature that employees understand the PREA training they received. Training academy provides the PREA training for the new recruits. Training curriculum at the training academy was also updated to include inmates' right to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; and how to

communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates (115.31 (a)).

Staff were also provided information in the Superintendent newsletter called "The Wall". In the Spring 2014 newsletter there were three pages of PREA information to include what is PREA, the purpose of PREA, what constitutes staff sexual misconduct with inmates, biggest challenges in implementing PREA, what should someone do if they suspect a sexual assault, penalty for not reporting, what does the law require from each state, what the Pennsylvania Department of Corrections is doing to implement PREA, and what happens if Pennsylvania does not comply with PREA.

§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)

Based on review of contractor and volunteer training records; interviews with the volunteer coordinator, volunteers, and contractors; not all contractors and volunteers (10 of 51 not trained) who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Interviews of contractors and volunteers demonstrated those that received the training had a good knowledge of PREA, their responsibilities and the agency zero tolerance policy; while others knew about PREA, the zero tolerance policy, and how to report.

By August 14, 2014, all volunteers and contractors received their training and it was documented. SCI Pittsburgh provided documentation to prove all volunteers, and contractors had been trained, and understood the training.

§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)

During intake, inmates are provided information through a PREA pamphlet and inmate rule book (both available in English and Spanish) that explains the agency's zero tolerance policy regarding sexual abuse and sexual harassment; and how to report such incidents. During facility orientation they receive additional training which consists of a video and additional information which expands on the previous information provided in

the pamphlet and handbook. The auditors reviewed the information provided, and both training included all required information. Rosters of attendees document who attended the training. Posters and inmate handbooks are provided to inmates or posted in the housing units in formats accessible to all inmates.

During the tour and interviews most inmates acknowledged the information being provided upon arrival, during orientation, and throughout the facility on posters. Some claim to be unaware that victim advocates are available for emotional support services related to sexual abuse. Although the information is posted on bulletin boards and in the inmates' handbook, the auditors recommend annual or refresher classes for the inmate population as done for staff.

§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)

SCI Pittsburgh investigators received PREA investigator training in May 2014, developed by the MOSS Group from National PREA Resource Center website to supplement previous investigator training received. The training was documented for each investigator. SCI Pittsburgh investigators also attend the general PREA training required of all employees, signing that they understood the training. The lesson plans, slides and sign in sheets were reviewed and interview of investigators demonstrated they understood the how to conduct a sexual abuse investigation in a confinement setting and what their roles were. The training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Interviews of investigators verified their knowledge of conducting investigations.

§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)

Through review of the questionnaire, training records, and interviews, it was determined the medical and mental health care staff received the basic PREA training all staff or contractor receive as applicable, and the specialized medical and mental

health training that included: 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. All training was documented in the training records as having occurred in May and June 2014. Medical staff at the facility do not perform nor are trained to conduct forensic examinations.

§115.41 – Screening for Risk of Victimization and Abusiveness

Exceeds Standard (substantially exceeds requirement of standard)

X 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 auditors reviewed policy, randomly selected screening forms, and interviewed staff who conduct the screens and inmates. All inmates are assessed during intake screening for their risks of being sexually abused by other inmates or sexually abusive towards other inmates. The screening is completed within 72 hours of arrival by policy, observation of screening and check of inmate records. The auditor had the staff that performs the screen to conduct a screen of the auditor to demonstrate the process of filling out the screening form. The process was done very professional. Between 20 – 30 days the facility reassesses the inmate's risks of victimization or abusiveness and by policy the inmates risks level is reassessed again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The auditor reviewed random screening forms to include those that were reassessments between 20 – 30 days, and one that was completed following an allegation of sexual abuse and inmate's risk of future sexual victimization. Screening recently was started and most of those inmates who came after that remembers being asked the questions and being screened upon arrival. Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to questions asked. The screening instrument is objective in determining if inmate is at risks for victimization or abusiveness. Staff interviews confirmed appropriate controls have been implemented to ensure that sensitive information is not released and exploited by staff or other inmates.

Not all the criteria referenced in the standard are in the form, nor all questions required to be asked to the inmate are asked. The screening form did not include: whether the inmate's criminal history is exclusively nonviolent; and whether the inmate is detained solely for civil immigration purposes (115.41(d)). Though required by policy, inmates were not asked if they had a developmental disability (115.41(h)). The following was not in the criteria to assist in determining whether the inmates risk of being sexually abusive: prior convictions for violent offenses (115.41(e)).

During the corrective action period, the Pennsylvania Department of Corrections screening form was updated, SCI Pittsburgh staff were trained, and the new form was implemented. The auditors reviewed the screening form before implementation,

interviewed a staff who conducts screens, and reviewed documentation of five inmates using the new screening form upon arrival at the facility and one screening form completed as a reassessment between 20-30 days after arrival at the facility. The facility meets standards 115.41 (d), 115.41 (e), and 115.41(h).

§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)

The facility uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risks of being sexually victimized separate from those at high risks of being sexually abusive. These decisions are made on a case by case basis using information from the screen, assigned PREA classification, and good correctional judgment. By agency policy, a "Z" code is given to inmates who are vulnerable to include vulnerable to sexual assault and is given a single cell. Other vulnerable reason includes danger to self, danger to others, mental health problems, medical problems. Long term inmates can also get single cell if space is available. By policy lesbian, gay, bisexual, transgender, or intersex (LGBTI) inmates are not housed in dedicated facilities or housing units; transgender or intersex inmates are reassessed twice each year and their own views with respect to his or her own safety are given serious consideration; and they have the opportunity to shower separately. The transgender inmate was housed in general population and not a dedicated housing area; she was asked for her view of her own safety and given the opportunity to shower separately.

Agency policy was not clear on how to determine whether a transgender or intersex inmate would be assigned to a facility for male or female inmates. During the corrective action period, both agency and SCI Pittsburgh policies were modified to ensure facility assignments, and programming for transgender and intersex inmates would be done on a case by case basis by the Transgender Review Personnel based on safety/security needs, housing availability, inmate opinion, gender identity, and genitalia.

§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)

Agency policy (DC-ADM 802 Administrative Custody Procedures) states inmates at high risks for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Reviews of status as protective custody are completed every seven days for the first two months and every 30 days after the first two months by policy. There were no inmates in protective custody who were high risks for sexual victimization to interview. Staff interviews verified inmates at high risks of sexual victimization are not placed in involuntary segregation unless other measures have been assessed, and that none had been placed in involuntary segregation. The questionnaire stated two inmates who were at risks for victimization were placed in segregation. Upon further review it was determined no inmates had been placed in the segregated housing unit involuntarily. The questionnaire was incorrect; neither inmate was at high risks of sexual victimization. Those inmates were placed in segregation for other reasons. There were no inmates in segregation involuntarily for sexual victimization at the time of the audit.

Agency policy also states inmates placed in segregated housing involuntarily for protection from sexual abuse would have access to programs, privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities were restricted, the facility would document: what was limited, duration of limitation, and reasons for limitation.

The only transgender inmate was in general population and reported he did not feel at risk of sexual violence at the facility.

§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)

Through interviews of inmates, staff and review of policies, inmate handbooks and posters SCI Pittsburgh demonstrated multiple internal and external ways for inmates to report sexual abuse and sexual harassment. Inmates can report verbally and in writing to staff; Pennsylvania website provides for third party reporting; and inmates can report to outside agencies such as Pennsylvania Crime Stoppers Tip Line (*77) to include anonymously, and write to PCAR, or BCI (Bureau of Criminal Investigations). The tip hotline also lists a pin number specifically for the Pennsylvania Crime Stoppers Tip Line. Examples of inmate reporting through different means were reviewed when investigative cases were reviewed, most were done verbally to staff or through the tip line. Some filed a grievance which went immediately to investigations to be processed through investigative channels. Staff accept reports made verbally, in writing, anonymously, and from third parties, and are promptly document any verbal reports. Nothing covered reporting retaliation, though inmates and staff in interviews knew they

could report retaliation. The auditor called the Pennsylvania Crime Stoppers Tip Line and discussed the process with staff that monitor the phone line.

§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)
- Non-Applicable

Per agency grievance policy, inmates cannot file a grievance for sexual abuse and assault. If it is filed, it is sent straight to the investigator for investigation and processing in accordance with investigation policies. Inmates can file a grievance for sexual harassment; seven of thirteen sexual harassment allegations were through the grievance procedures.

§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)

SCI Pittsburgh has an agreement with the the Crime Victim Center to provide inmates with access to the outside victim advocate for emotional support services related to sexual abuse by giving inmates mailing addresses and a phone number. The facility enables reasonable communication between inmates and the Crime Victim Center. Per interview with the Crime Victim Center, they seemed very professional and willing to provide support.

§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)

Pennsylvania Department of Corrections web site has a PREA section on their home page, and the PREA section is easily accessible. The PREA section has five sublinks, one of which is how to make a third party report. Third party reports can go to the agency or to the tips hotline phone number or link. At the time of the audit it was only for reporting sexual abuse and not sexual harassment. Posters at the facility provide the inmates a telephone number and link family friends can report sexual misconduct to include retaliation as a third party. Discussion with inmates demonstrated they knew how third party reporting could be accomplished.

During the corrective action period the website was updated and provided information on how to provide third party reports for sexual abuse and sexual harassment.

§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)

Agency policy and fliers require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than extent necessary. The policy and fliers do not cover reporting any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Review of investigative files; and interviews of staff and inmates verified staff immediately report to the facility's designated investigator any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and that staff does not reveal information related to a sexual abuse report other than to people authorize to discuss the report. Interviews with inmates and staff did not reveal any incident of sexual abuse or harassment not reported to the facility's designated investigator. During staff interviews, staff knew their requirements to report except for staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews of medical and mental health staff identified they are required to report sexual abuse.

During the corrective action period SCI Pittsburgh policy was updated to include reporting staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

§115.62 – Agency Protection Duties

- Exceeds Standard (substantially exceeds requirement of standard)

X 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 requires staff to take immediate action to protect any inmate they learn is subject to substantial risks of imminent sexual abuse. Interviews with staff demonstrate they know the steps to take to protect an inmate subject to risk- of imminent sexual abuse. Security staff immediately employs protection measures as separating and protecting the inmate, passing the information to the investigator and PREA Compliance Manager. Per interview with PREA Compliance Manager, no inmate has reported substantial risk of sexual abuse.

§115.63 – Reporting to Other Confinement Facilities

Exceeds Standard (substantially exceeds requirement of standard)

X 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 requires when an allegation is made that an inmate was sexually abused while confined at another facility, the Superintendent that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred within 72 hours after receiving the allegation. Review of two cases demonstrated the information was forwarded from the investigator to OSII Interview in one case and to a Jail Chaplain in another case.

During the corrective action period, SCI Pittsburgh Superintendent forwarded an allegation to the jail administrator within 72 hours by email. The jail administrator acknowledged receiving notification. SCI Pittsburgh later followed up with the investigators interview of the alleged victim.

§115.64 – Staff First Responder Duties

Exceeds Standard (substantially exceeds requirement of standard)

X 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 policies specify procedures to respond to an allegation of sexual abuse for both security and non-security staff. Random interviews with staff confirmed both security and non-security staff knew upon learning of an allegation that an inmate was sexually abused they should: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken

to collect any evidence; and if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. SCI Pittsburgh staff had a check sheet with the steps at staff posts throughout the facility.

§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)

At the time of the audit SCI Pittsburgh did not have a published written institutional 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. Some of the information was in the agency PREA policy manual. During the corrective action period, SCI Pittsburgh twice published its written institutional plan. The December 2014 written institution plan coordinated actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership; along with other policy and procedures to prevent sexual abuse and harassment.

§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)

Pennsylvania Department of Corrections reported there has been no collective bargaining agreement entered into or renewed since August of 2012.

The agency policy does not restrict facility administrators from suspending staff pending investigations, removing staff from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

§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)

Pennsylvania Department of Corrections has established a policy to protect all inmates who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and has designate which staff members or departments are charged with monitoring retaliation for inmates. The PREA Compliance Manager by policy and in practice monitored inmates; but policy nor practice at SCI Pittsburgh addressed monitoring of staff for retaliation.

SCI Pittsburgh PREA Compliance Manager would employ protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The PREA Compliance Manager stated she had not had to employ protective measures to date, but was very knowledge on what measures would be done based on different scenarios discussed. No one was designated to monitor staff, but the PREA Compliance Manager knew what measures could be employed.

By policy and practice, SCI Pittsburgh monitors for at least 90 days, and if continuing need dictates beyond 90 days. During the audit, the only documentation of monitoring was bi-weekly meetings/status checks with the inmates. Staff were not monitored nor were inmates disciplinary reports, housing, or program changes reviewed as part of the monitoring process..

During the corrective action period, SCI Pittsburgh designated the PREA Compliance Manager to monitor staff for retaliation till Pennsylvania Department of Corrections policy identified the Deputy Superintendent for Centralized Services; and provided documentation demonstrating monitoring for retaliation was being conducted and documented. Interviews further confirmed monitoring for retaliation was being conducted.

§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)

Use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43. Agency policy (DC-ADM 802

Administrative Custody Procedures) states inmates who have suffered sexual abuse shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from abusers. Reviews of status as protective custody are completed every seven days for the first two months and every 30 days after the first two months by policy. There were no inmates in protective custody who had suffered sexual abuse. Staff interviews verified inmates who had suffered sexual abuse are not placed in involuntary segregation unless other measures have been assessed, and that none had been placed in involuntary segregation. There were no inmates in segregation involuntarily for sexual victimization at the time of the audit.

Agency policy also states inmates placed in segregated housing involuntarily for protection from sexual abuse would have access to programs, privileges, education, and work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities were restricted, the facility would document: what was limited, duration of limitation, and reasons for limitation.

The only transgender inmate was in general population and reported he did not feel at risk of sexual violence at the facility.

§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)

Based on review of the 23 investigations, agency and facility policies, and interviews of investigators and inmates, it was determined investigations into allegations of sexual abuse and sexual harassment are done thoroughly, and objectively for all allegations. The audit team had some concerns on the promptness of the investigations based on one case reviewed was reported on a Friday and the investigation did not start till Monday, and other times cases were delayed pending OSII review. By policy OSII has five business days when notified to determine if OSII or facility will investigate the case. Investigator has 30 days to complete investigation. All investigators used have received special training in sexual abuse investigations. The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as inmate or staff. Pennsylvania Department of Corrections and SCI Pittsburgh does not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. The agency retains all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years; and investigations continue regardless of the departure of the alleged abuser or victim

from the employment or control of the facility or agency.

SCI Pittsburgh investigator starts all investigations and conducts administrative investigations. If an allegation appears to be criminal in nature, the Investigator will call the Pennsylvania State Police who conducts all criminal investigations. An MOU between Pennsylvania State Police and the Pennsylvania Department of Corrections for investigations of allegations of sexual crimes was signed in September 2013. The MOU includes responsibilities of each agency to include Pennsylvania State Police responsibilities to meet standards in 115.21 and 115.71. The MOU includes Pennsylvania State Police responsibility to keep Pennsylvania Department of Corrections Special Investigations and Intelligence Office informed of the status of the investigation to include referral for prosecution to appropriate prosecutorial agency. OSII staff provide technical assistance and support to the facility investigator for administrative investigations, and normally review all allegations against staff.

Reviewed 23 investigative files, 21 were investigated, one was reported to the other facility that the allegation occurred (did provide statement from the inmate); and one sexual harassment early in the audit cycle was not investigated. Of the 21: ten were staff-inmate sexual harassment (four unsubstantiated, six unfounded); three were staff-inmate sexual abuse (all unfounded); three inmate-inmate sexual harassment (one substantiated, two unsubstantiated; and five inmate-inmate sexual abuse (four unsubstantiated, one unfounded). Additionally, four cases were still pending investigation during the on-site audit. During the corrective action period three more investigative files were reviewed.

During the corrective action period, three additional cases were reviewed and found to be completed promptly, thoroughly, and objectively. From July 3rd to November 12th there were 12 more cases, majority were sexual harassment.

§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)

Review of the agency policies, interview of investigators and review of investigations demonstrate SCI Pittsburgh does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§115.73 – Reporting to Inmate

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Agency policy requires the inmate be notified: following an investigation into an inmate's allegation that he or she suffered sexual abuse whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded; subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever the staff member is no longer posted within the inmate's unit or employed at the facility, staff member has been indicted on a charge or convicted on a charge related to sexual abuse within the facility; and if sexually abused by another inmate subsequently inform the alleged victim whenever the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. Though policy requires all notifications be documented, all notifications at SCI Pittsburgh were done verbally per interviews of staff and inmates, and no documentation was provided to demonstrate was done in writing. Some inmates claimed they had not been told the results of the investigation.

During the corrective action period the agency created a form to document notifying inmates as a result of the investigation and status of disciplinary action and prosecution as applicable. The facility provided documentation demonstrating inmates are informed as to whether a sexual abuse or harassment allegation had been determined to be substantiated, unsubstantiated, or unfounded in three cases. Two were unfounded, one was substantiated.

§115.76 – Disciplinary sanctions for staff

Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Per agency and SCI Pittsburgh policies and fliers, and interviews with staff: staff are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies; termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be 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. No staff have been terminated or disciplined during this audit period.

§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)

Agency policies prohibit contractors or volunteers who engaged in sexual abuse to have contact with inmates. Interviews with the PREA Compliance Manager and Superintendent confirmed there have been no founded allegations of sexual abuse by contractors or volunteers during the audit cycle; and that sexual abuse by contractors and volunteers would be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Interviews with contractors and volunteers confirmed they knew the punishment for engaging in sexual abuse or sexual harassment of inmates or staff.

§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)

Per Pennsylvania Department of Corrections policies and interviews with staff, inmates are subject to disciplinary sanctions 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 are 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; and considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. There was no disciplinary action during the audit cycle.

Policy does not address: (f) 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.

During the corrective action period SCI Pittsburgh incorporated the standard into their PREA supplement. There has been no false reporting during the audit period.

§115.81 – Medical and Mental Health Screenings; History of Sexual Abuse

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

During the audit it was determined neither agency or facility policies required medical and mental health follow-up meeting within 14 days for those inmates who experienced prior sexual victimization or previously perpetrated sexual abuse, whether in a prison/jail setting or in the community. Review of three cases demonstrated medical and mental health follow-up was immediately referred and being conducted normally six days following the intake screening. Interviews of medical and mental health staff, and inmates confirmed follow-up meetings are scheduled and conducted. During the corrective action period agency and SCI Pittsburgh policies were updated.

§115.82 – Access to Emergency Medical and Mental Health Services

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

Review of Pennsylvania Department of Corrections policies, SCI Pittsburgh fliers, and interviews with staff and inmates confirm inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services; and offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, where medically appropriate. Treatment is provided to the victim at no costs.

§115.83 – Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers

- Exceeds Standard (substantially exceeds requirement of standard)
- X 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 policies, interviews with staff and inmates; and medical and mental health documentation demonstrate there is on-going medical and mental health care for sexual abuse victims and abusers, to include tests for sexually

transmitted infections as medically appropriate. Treatment is at no costs to the inmates and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Mental health evaluations are conducted on all known inmate on inmate abusers within 60 days of learning such abuse, and treatment is offered. SCI Pittsburgh is an all male institution, NA to 115.83 (d) and (e).

§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)

Pennsylvania Department of Corrections policy identifies the minimum members of the review team, and covers the process for sexual abuse incident reviews. Incident reviews by policy are to be done within 15 days of the investigation being completed. Reviews were recently started before the audit, only one review had been completed. Incident review reports are reviewed by the central office.

During the corrective action period the facility provided three memorandums documenting three incident reviews conducted during the corrective action period. Reviews are in depth and covers more areas than required by the standard.

§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)

Pennsylvania Department of Corrections collects uniform data that provides the minimum data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice (DoJ). The DoJ Survey of Sexual Violence provided during audit for 2011 and 2012. The 2013 was not done yet due to late request from DoJ for data. The agency had not obtained incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. During the corrective action period PREA Coordinator briefed they were beginning to collect data from private facilities in 2015.

§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)

At the time of the audit, the agency did not have a policy to use the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies; and to identify problem areas and take corrective actions. The PREA Coordinator during the interview stated she was using data to improve the agency programs. The agency had never published an annual report.

During the corrective action period, the 2013 annual report was published December 10th and posted on the web site December 19th, 2014. This was the first annual report. The report included comparison of agency wide statistics from 2012 and 2013; allegations and findings by facility; and improvements in implementing PREA policies. The agency statistics showed a large increase in reported allegations. The increase in reported allegations could be due to improved reporting systems and understanding of PREA. There was an overall increase in allegations, but very few cases were substantiated. The report is posted on the Pennsylvania Department of Corrections website.

§§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)

The agency ensures that data collected pursuant to § 115.87 are securely retained. During the audit, the agency did post on its website the 2011 and 2012 DoJ Survey of Sexual Violence reports that have the aggregated sexual abuse data for its facilities under its direct control, private facility data was not provided. The agency had maintained its sexual abuse data collected pursuant to § 115.87 to date, which had not been ten years.

During the corrective action period, the auditor determined through interviews, observation of data provided, and update of PREA policies that sexual abuse data collected pursuant to § 115.87 will be maintained for at least 10 years after the date of the initial collection and private facility data would be collected and aggregated in future data posted on the web site. Additionally, the 2013 annual report was published December 10th and posted on the web site December 19th, 2014, which provides

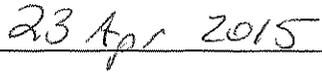
additional agency aggregate data and data by facility not found in the DoJ Survey of Sexual Violence reports.

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.



Auditor Signature



Date