

PREA Facility Audit Report: Final

Name of Facility: Harrisburg Community Corrections Center

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/29/2018

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Julie Ustruck Wetzel	Date of Signature: 06/29/2018

AUDITOR INFORMATION	
Auditor name:	Ustruck-Wetzel, Julie
Address:	
Email:	Julie.UstruckWetzel@wisconsin.gov
Telephone number:	
Start Date of On-Site Audit:	05/14/2018
End Date of On-Site Audit:	05/15/2018

FACILITY INFORMATION	
Facility name:	Harrisburg Community Corrections Center
Facility physical address:	27 N. Cameron Street, Harrisburg, Pennsylvania - 17101
Facility Phone	717-787-4427
Facility mailing address:	
The facility is:	<input type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
Facility Type:	<input type="radio"/> Community Treatment Center <input checked="" type="radio"/> Halfway house <input type="radio"/> Restitution center <input type="radio"/> Alcohol or drug rehabilitation center <input type="radio"/> Mental health facility <input type="radio"/> Other community correctional facility

Primary Contact			
Name:	Maxine Stanley	Title:	Center Director
Email Address:	maxstanley@pa.gov	Telephone Number:	717-756-9102

Facility Director			
Name:	Maxine Stanley	Title:	Center Director
Email Address:	maxstanley@pa.gov	Telephone Number:	717-756-9102

Facility PREA Compliance Manager			
Name:	Maxine Stanley	Email Address:	maxstanley@pa.gov

Facility Health Service Administrator			
Name:	N/A	Title:	
Email Address:		Telephone Number:	

Facility Characteristics			
Designed facility capacity:		150	
Current population of facility:		106	
Age Range	<i>Adults: 18 and up</i>	<i>Juveniles:</i>	<i>Youthful Residents:</i>
Facility security level/resident custody levels:		1	
Number of staff currently employed at the facility who may have contact with residents:		28	

AGENCY INFORMATION	
Name of agency:	Pennsylvania Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	1920 Technology Parkway, Mechanicsburg, Pennsylvania - 17050
Mailing Address:	
Telephone number:	(717) 728-2573

Agency Chief Executive Officer Information:			
Name:	John Wetzel	Title:	Secretary
Email Address:	██████████	Telephone Number:	██████████

Agency-Wide PREA Coordinator Information			
Name:	David Radziewicz	Email Address:	dradziewicz@pa.gov

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Prison Rape Elimination Act (PREA) audit of Harrisburg CCC located at 27 Cameron Street Harrisburg PA was conducted by Department of Justice (DOJ) certified PREA auditors Julie Ustruck Wetzel and Ernette Griggs. The auditors are employees of the State of Wisconsin, Department of Corrections (DOC). The audit was conducted as part of a consortium between the states of Pennsylvania, Maryland, Michigan, and Wisconsin.

In preparation for the on-site audit scheduled for May 14, 2018, audit notices were sent to the PREA Compliance Manager (PCM) at Harrisburg CCC on March 16, 2018. The notices were written in English and Spanish and included the purpose, the date of the on-site visit, confidentiality, and auditor contact information. As requested, photographs depicting notices displayed in various locations throughout the facility were emailed by the PCM to confirm timely placement. An email with attached photographs was received from Harrisburg on March 30, 2018 indicating placement of the notices on March 27, 2018 and March 28, 2018 in various locations including placement outside of B side bathroom, outside of A side bathroom, main entrance of the facility, A side TV room, and B side entrance door. One letter was received from a reentrant postmarked March 30, 2018 Harrisburg.

The Pre-Audit Questionnaire was completed and submitted via the PREA Online Audit System (OAS) by facility and Bureau staff. Prior to the on-site visit, this auditor reviewed the Pre-Audit Questionnaire and attached documents. Attached documents included BCC-ADM 008 PREA Policy and Procedures Manual, Grievance Policies and Procedures, Legal Policy and Procedures, BCC Security Procedures, 11.2.1 Reception Classification, Human Resource Policies, examples of forms indicating facility procedures, training materials, training records, hiring documents, investigation documents, Collective Bargaining Agreements, and Letters of Agreement. Additionally this auditor reviewed the agency's website specific to Harrisburg CCC and PREA, including the Harrisburg CCC final 2016 PREA Audit Report. Further this auditor reviewed the facility layout, staff schedule, and Harrisburg CCC Count Log provided by the PREA Compliance Manager. The documents and information submitted as part of the Pre-Audit Questionnaire were detailed, providing a picture of the policies, procedures, and operations of Harrisburg CCC.

The on-site portion of the audit was conducted on May 14, 2018 and May 15, 2018. The day began with an entrance meeting with both auditors and key DOC staff. Present for Pennsylvania Department of Corrections were: PREA Coordinator David Radziewicz; Center Director Maxine Stanley; BCC Regional Director Christy Ulrich; Lieutenant Lori Bilwin; Corrections Counselor Kevin Sommers; Acting Administrative Officer Cheryl Gee; Corrections Monitor Judy Guity. The meeting consisted of introductions, a brief overview of the facility programming, and a schedule of the visit.

Following the entrance meeting, the auditors were provided a comprehensive facility tour including the two living areas, side A and side B which each housed: bedrooms, bathrooms, a recreation area, a kitchen, dining, laundry room, storage, mechanical room, and storage. Additionally, staff and

administrative offices were viewed, conference rooms, visiting area, and monitor's office. During the tour, audit notices and PREA information were visible throughout the facility. Camera and mirror placements were noted and visible throughout the facility to minimize blind spots and ensure the safety of staff and reentrants. As the tour continued through the living area, the first staff of the opposite gender announced their presence by loudly stating "Female" as hallways turned or the group neared the restroom area.

Following the facility tour, staff and resident interviews were conducted. Interviews were conducted by the auditors in private settings. Harrisburg CCC is designed for reentrants to leave the facility for employment and programming. Given the fluid schedules of reentrants, prior to leaving the facility or upon return, reentrants were offered to speak with auditors. All reentrants who were offered an interview, accepted the interview. Due to the small number of staff at Harrisburg CCC, all Corrections Monitor staff on each of the three shifts on the first day, were offered and accepted an interview. Interviews were conducted using the DOJ protocols that questions PREA knowledge, including knowledge of PREA protections for reentrants and reporting mechanisms available to staff and reentrants. Staff and reentrants alike were aware of the zero tolerance policy and the rights of reentrants to be free from sexual abuse and sexual harassment. Staff and reentrants were aware of the various ways to report sexual abuse and sexual harassment. Staff were well aware of their responsibilities in assuring these rights are being met, and should an incident occur, staff knew their role in responding and reporting.

PREA investigations are a centralized Bureau of Community Corrections-Management Operations Center (BCC-MOC) function. Investigative documents and reports are housed electronically and were accessible by a PREA investigator. Auditors reviewed two investigations that occurred during the past twelve months at Harrisburg CCC. These investigations were timely and well documented.

In addition to the staff interviews, one contractor who provides weekly programming to reentrants at Harrisburg CCC was interviewed by phone. The contractor confirmed having been trained regarding a contractor's responsibilities in sexual abuse and sexual harassment prevention, detection, and response per agency policy, including the Department's zero tolerance policy and how to report such incidents. She acknowledged receiving initial and update training and further commented on the PREA information readily available at Harrisburg CCC,

A total of 21 staff were interviewed or provided information for this audit. 12 Random staff in the Corrections Monitor classification were interviewed. Corrections Monitors are centrally located within the facility. All three shifts were represented in the staff interviews. Specialized Interviews were also conducted of staff and were chosen based on the responsibilities and assigned duties at Harrisburg CCC or within the Bureau of Community Corrections (BCC). Most staff were assigned multiple duties and were able to answer more than one specialized interview. For example, Corrections Monitors are responsible for the day to day contact with reentrants and essentially provide security of the facility, but they are often first responders and are responsible for intake activities. In addition to the random interviews, some were asked the intake interview questions according to the DOJ recommended questions, but they were all assessed on their knowledge of first responder responsibilities. The following specialized interviews were conducted: Facility Director, PREA Compliance Manager, Human Resources, staff who conduct investigations, staff on the incident review teams, intermediate or higher level staff, staff who perform intake, staff who perform risk screening assessments, and staff who monitor retaliation. The following interviews were not conducted: Agency Contract Administrator, education and program staff who work with youthful reentrants, staff who supervise reentrants in segregated housing, medical and mental health staff, and staff who conduct cross gender non-medical strip searches. Harrisburg CCC does not house youthful offenders, does not utilize segregated housing, and non-medical cross-gender strip

searches do not occur. Harrisburg CCC does not offer on site medical and mental health programming, but refer reentrants to community providers. The agency head was interviewed on 9/29/17 by PREA Auditor Maria Siloa-Johnson and the PREA Coordinator was interviewed on 9/17/17. Both interviews were referenced for this audit. In addition to the formal interview on 9/17/17, the PREA Coordinator was available for questions and clarifications throughout the Harrisburg CCC audit.

Twenty reentrants were interviewed, consisting of random and targeted interviews according to DOJ interview protocols. They represented both housing units. The following targeted interviews were not conducted as there were no reentrants identified who met the criteria for interview: youthful reentrant, reentrant in segregated housing, reentrant who disclosed during screening, and a reentrant who reported sexual abuse or sexual harassment. Reentrants consistently answered that staff of the opposite gender of the reentrant announce themselves when entering the living area, they are aware of their rights to be free from sexual abuse and sexual harassment, and have a right not to be punished for reporting. Reentrants, consistently indicated they were asked questions about the sexual safety the day they arrived and the facility, and again shortly after they arrived. All reentrants knew at least one manner in which to report sexual abuse or sexual harassment, and overwhelmingly, many of the reentrants were comfortable they could tell staff. During the reentrant interviews, this auditor had reason to utilize the PROPIO language line for interpretation services. This required the auditor to obtain the phone number from staff, who had it readily available. The process for obtaining this service was simple and according to staff, a service of which they are aware.

Many documents and file material was available through the Pre-Audit Questionnaire. However, on-site the auditors reviewed investigative file material via the electronic investigation files and signed reentrant forms acknowledging PREA education components. Additionally, the strip search log was reviewed indicating no cross gender strip searches had been completed. Human Resource functions are delegated to various offices and housed and tracked electronically. For instance, the hiring process, which includes the application, is completed electronically and stored in that program. The Office of Administration Public Safety HR Delivery Center is responsible for the processing of applications, conducting reference checks, background and PREA checks. The HR Analyst for the Office of Administration was interviewed by phone and further discussed the structure of the Bureau of Community Correction Human Resources. The Bureau of Community Corrections Security Administrative Officer assisted this auditor with obtaining training records for BCC staff. These records are stored electronically and were submitted during the post audit, as requested. Further, criminal background checks are completed within the Bureau of Investigations and Intelligence. Contact was made with this office by email and phone during the on-site and post audit phases.

At the conclusion of the on-site phase of the audit, an exit meeting was conducted with Facility Director Maxine Stanley, Lieutenant Lori Bilwin, and Corrections Monitor Judy Guity. Initial observations were shared with the facility staff and next steps were outlined by this auditor. It should be noted that facility staff were professional, accommodating, and attentive to detail throughout the audit process. It was evident that the sexual safety and well-being of reentrants is taken seriously.

During the post-audit phase, additional interviews were conducted with agencies outside of DOC. The Director of Violence Intervention and Prevention Services at the YWCA Greater Harrisburg was interviewed by phone on 5/28/18. This program offers confidential support services to anyone disclosing sexual assault at a DOC facility; formalized with a Letter of Agreement with Harrisburg CCC. Services include advocacy, crisis response, counseling, and support groups. These services include accompaniment to the sexual assault examination and meeting with reentrants at the YWCA location or

at the Harrisburg CCC. The manager of the Sexual Assault Forensic Examiner Program at Harrisburg Hospital was interviewed by phone on 6/12/18. She confirmed a Letter of Agreement being signed with Harrisburg CCC to provide sexual assault examinations to reentrants who are sexually assaulted at Harrisburg CCC. It should be noted, she could not remember an incident in which a reentrant from Harrisburg CCC was brought in for an examination in the recent past. She outlined the process for what would occur should a reentrant be brought to the hospital for an examination. The program is a 24 hour, 7 day a week program. If a SAFE/SANE nurse is not available on site, there is always a nurse on call and has one hour to respond to the hospital. She indicated that the SAFE program works with the YWCA for support and advocacy services.

During the post-audit phase, this auditor completed a submission on TipSubmit.com to Pennsylvania Crime Stoppers in order to confirm and understand the lifecycle of a complaint. As of this writing, a response has not been received. This auditor later learned this particular software is no longer in use.

Additionally in the post-audit phase, this auditor drafted and mailed through US Postal Service a letter to the Pennsylvania State Police (PSP) at the address provided to staff and reentrants as a mechanism for reporting sexual abuse and sexual harassment. This auditor received a phone call in response to the letter from the PSP fourteen days after the letter was mailed and ultimately interviewed an employee in the PSP Bureau of Criminal Investigations on 6/12/18. PSP confirmed they are a third party to receive allegations of sexual abuse incidents stemming from DOC facilities and that they do receive PREA correspondence from Pennsylvania DOC. Upon receiving the letter, it is immediately scanned and sent to the PREA Coordinator at DOC. PSP does not begin an investigation at this time. She confirmed that the Tip Submit website is no longer in use however tips are received through the PA Crime Stoppers tip website. Additionally, she confirmed the Crime Stoppers tip line call center is no longer an option for reporting PREA complaints and talked about the history of the decision to discontinue use of the line.

During the post-audit period, PA DOC implemented an updated PREA Risk Assessment Tool. Two phone conferences and several emails were shared between the PREA Coordinator and PREA Auditors with an interest in the tool for other open audits. Additional documentation was gathered during this time by email, including the updated PREA Risk Assessment Tool (PRAT) in English and Spanish, PRAT instructions, published Bulletin formalizing the implementation, PREA Policy and Procedures, and staff training records.

There are no corrective action recommendations required for this audit.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Harrisburg Community Correctional Center (CCC) is operated by the Department of Corrections, Bureau of Community Corrections. This is a residential program to assist male reentrants in their transition back into the community from a secure setting by providing "supportive, transitional and accountable reentry". Harrisburg CCC houses Parolees from a State Correctional Institution transitioning home. The parolee has developed a home plan and while at Harrisburg CCC is working towards returning home. In addition to Parolee Reentrants, State Intermediate Punishment (SIP) inmates who have moved home, report into the facility one to two times per week. At the time of the on site audit, 120 reentrants were placed at Harrisburg CCC. The average daily population is 130 reentrants with a maximum capacity of 150 reentrants. The average length of stay at Harrisburg CCC is 180 days. Harrisburg CCC reentrants participate in workshops to address employment, housing, financial literacy, and community services. They receive much of their programming off site from community agencies such as treatment to address mental health, substance abuse, and employment. A contractor provides parenting courses on site one time per week.

Harrisburg CCC is a single story building co-located with the Bureau of Community Corrections Region 2 office. Upon entering Harrisburg CCC, visitors are buzzed in through a locked door and required to successfully navigate the metal detector. One Monitor's office is located immediately upon entering the building. The living areas are divided into A side and B side. A Side consists of eight bedrooms housing 5-15 reentrants in each room, a recreation area, kitchen, dining room, laundry, and two restrooms with stall toilets and shower. B Side consists of five bedrooms housing 2-5 reentrants in each room, kitchen, day room, dining room, laundry, weight room, restroom and showers with two stalls. The toilet and showers are designed with safety in mind, in that there is sight and sound supervision available, yet at the same time allowing the reentrant privacy to toilet and shower. At no time should a staff of the opposite gender see a reentrant in undress. Reentrants are not allowed access to the side in which they are not assigned. At the entrance of each living unit, is a sign reminding staff of the gender of the unit and per PREA standards must announce their presence if of the opposite gender. Announcing of gender occurred regularly throughout the facility tour. Additionally, line staff and supervisory staff make regular rounds to the housing units and other areas of the facility.

Reentrants at Harrisburg are allowed out of the facility. There is a lot of movement of reentrants in and out of Harrisburg CCC, as most reentrants are involved in employment and treatment services in the community and return back to the facility when their approved "passes" have ended. Reentrants are required to pass the metal detector upon return.

The facility has 51 cameras strategically placed throughout the facility, supplemented by mirrors. Cameras are placed outside restroom areas, down each hallway, and in common areas. Camera footage is monitored real time by Corrections Monitors and also has the capacity to store footage for thirty days. Additionally, PREA information is displayed throughout the facility in living and visitor areas. Upon entry into the facility, a PREA bulletin board with information on rights and how to report is displayed in the

entrance of the facility in which all staff, visitors, and reentrants pass.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of standards exceeded:	3
Number of standards met:	38
Number of standards not met:	0

After a review of documents, interviews of staff, reentrants, and community providers, along with the on-site visit, this auditor has determined the following for Harrisburg CCC:

Number of standards exceeded: 3

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 0

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures BCC - ADM 008 Bureau of Community Corrections PREA Procedures Glossary of Terms BCC-ADM 008 Section 2 Prevention and Training BCC-ADM 008 Section 4 Responding to a Report of Sexual Abuse BCC-ADM 008 Section 7 Disciplinary and Administrative Actions BCC-ADM 008 Policy 3. Documents Organizational Chart 10/19/17 Letter to auditors regarding the Mission Statement 4. Interviews PREA Compliance Manager 9/17/17 <p>Findings:</p> <p>Subsection (a): Harrisburg CCC follows a comprehensive policy on sexual abuse and sexual harassment in BCC-ADM 008 Prison Rape Elimination Act (PREA) effective May 30, 2017. This policy covers all Bureau of Community Corrections facilities. The policy mandates zero tolerance for sexual abuse or sexual harassment and prohibits retaliation against a reentrant or any staff who reports sexual harassment or sexual contact against a reentrant, or cooperates with an investigation. The accompanying Procedures Manual outlines how Harrisburg CCC is to implement the policy to prevent, detect and respond to such conduct. The policy and procedure mirrors language found in the federal standards outlined in 28 C.F.R. Part 115.</p> <p>Section 2 of the Procedures Manual outlines how the Department will ensure zero tolerance towards all forms of sexual abuse and sexual harassment and how it will implement the federal PREA standards through designating staff specific to these responsibilities, training employees, contractors, and volunteers, reentrant education, housing, searches, supervision, and screening. Section 4 addresses responding to reports of sexual abuse and sexual harassment and Section 7 address Disciplinary and Administrative Action when an employee, contractor, or volunteer violates the zero tolerance policy. Additionally, Section 7 addresses how to respond to reentrants who engage in sexual abuse, sexual harassment, or any sexual activity.</p> <p>BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual includes a Glossary of Terms which describes prohibited behavior regarding sexual abuse, sexual harassment, and sexual grooming. The definitions are consistent with definitions found in 28 C.F.R. Part 115.5.</p>

Subsection (b):

BCC-ADM 008 Section 2 outlines agency staff responsibilities in preventing and responding to sexual abuse and harassment of reentrants, including the duties of a Department PREA Coordinator. The Department PREA Coordinator's sole responsibility is to develop, implement, and oversee Pennsylvania Department of Corrections efforts to comply with the federal PREA standards in all of the State Correctional Institutions and Community Corrections Centers. This position reports directly to the Director of Bureau of Standards, Audits and Accreditation and is granted the authority to make decisions to ensure compliance with the PREA Standards. The Director of each Community Correctional Center is designated as the PREA Compliance Manager and reports directly to the Department PREA Coordinator regarding PREA matters. The organizational chart confirms the structure of DOC and includes the PREA Coordinator under the Bureau of Standards, Audits, and Accreditations who reports directly to the Executive Deputy Secretary.

According to the Department PREA Coordinator in an interview dated 9/17/17, his sole responsibility is PREA. He is involved in developing procedures, training policy revisions, and reviews sexual abuse investigations.

Corrective Action: None

115.212	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures BCC-ADM 008 Section 2 Prevention and Training 2-7 and 2-8 3. Documents Contract Firetree contract valid until 6/30/18 Contract Keystone contract valid until 6/30/18 Renwal Inc. contract valid until 6/30/18 MOU between Chester County Correctional Facility and Pennsylvania DOC dated 12/14/15 MOU between Cambrian County Correctional Facility and Pennsylvania DOC dated 9/24/15 MOU between Montgomery County Correctional Facility and Pennsylvania DOC dated 12/14/15 Completed PREA Contract Compliance Monitoring Report: -Berks County Jail System dated 10/30/17 -York County Prison dated 11/7/17 -Gaudenzia Sienna House dated 10/31/17 -Firetree, LTD Capital Pavilion dated 10/30/17 -GEO Group, Inc., Alle-Kiske Pavilion dated 10/30/17 PREA Audit Reports: -York County Prison dated 7/10/17 -Gaudenzia Sienna House dated 8/27/15 -Firetree, LTD Capital Pavilion dated 6/5/17 -GEO Group, Inc., Alle-Kiske Pavilion 5/1/17 Gaudenzia, Inc Policy and Procedure Manual September 2016 Community Education Center PREA Policy effective 8/18/14 4. Interviews Harrisburg CCC Director <p>Findings:</p> <p>Subsection (a): BCC-ADM 008 Section 2- Prevention and Training addresses PREA expectations when the Department contracts with other facilities for housing reentrants. Policy dictates that any new contract or contract renewal for the housing of a reentrant adopt and comply with the PREA standards and the Department's PREA compliance policies.</p> <p>According to the Pre-Audit Questionnaire, the Department has 41 contracts for housing reentrants. No new contract has been entered into over the past year. A copy of the Invitation for Bid And Treatment Services issued 1/4/13 was submitted through the Pre-Audit Questionnaire. This Bid specifies that the selected contractor must comply with all policies and</p>

procedures of DOC and must adopt and comply with the PREA standards and applicable DOC policies. As a condition of the contract, DOC also has access to the contractor's facilities at all times to conduct security inspections, program evaluations, and detainment of parolees as well as searches and inspections to determine compliance with policies. Example contracts resulting from the 1/4/13 bid were also submitted and reviewed for the purpose of this audit. Although no new contracts were entered into, the contracts reviewed were first effective on 2/27/13 and most recently, 6/30/17, renewed and valid until 6/30/18.

In addition to the contracts, Memorandums of Understanding (MOU) were submitted for review. The MOU's were agreements between Chester County Correctional Facility and Pennsylvania DOC dated 12/14/15, between Cambrian County Correctional Facility and Pennsylvania DOC dated 9/24/15, and between Montgomery County Correctional Facility and Pennsylvania DOC dated 12/14/15. These MOU's included a section in which the County agreed to adopt and comply with all PREA regulations and apply PREA standard to all County employees, subcontractors, or anyone working on behalf of the County who work in the prison. The MOU's also include an agreement to allow DOC access to inspect the facility to monitor County compliance with PREA regulations. The MOU dated 12/14/15 does not specifically state inspection is for PREA compliance, but is more general in nature. The MOU's include inspections specific to PREA. Further, all three MOU's require the County facility to notify the Department of any PREA violations.

Subsection (b):

BCC-ADM 008 Section 2 Prevention and Training requires contracted facilities to have an official PREA audit completed by a Certified DOJ PREA Auditor once every three year cycle. Additional monitoring is done by the PREA Director to ensure the contractor is complying with the PREA standards. The policy also requires the PREA Director to document the findings by using the BCC PREA Contract Compliance Monitoring Report.

During the pre-audit questionnaire, the PREA Contract Compliance Monitoring Report was submitted for review, as well as four completed reviews in 2017. Documentation included the most recent PREA Audit Report for each facility. Additional documentation in the PREA Contract Compliance Monitoring documentation was the Gaudenzia, Inc Policy and Procedure Manual dated September 2016 and the Community Education Center PREA Policy effective 8/18/14.

Subsection (c):

BCC-ADM 008 Prevention and Training also states that the Department can only enter into a contract in which compliance with the PREA standards have not been met with if in an emergency circumstance and all other attempts to secure a PREA Compliant agency have failed. All attempts shall be clearly documented. Harrisburg CCC does not have any such contracts.

Corrective Action: None

115.213	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy & Procedure <ol style="list-style-type: none"> 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 15 - Facility Staffing 3. Documentation <p>Memo re: Staffing Plan & PREA Report for CCC's dated February 7, 2018</p> <p>Memo re: Staffing Plan & PREA Report for CCC's dated March 20, 2017</p> <p>Memo re: Staffing Plan & PREA Report for CCC's dated June 23, 2016</p> <p>Bureau of Community Corrections CCC Monitor Schedule Harrisburg CCC and Mandatory OT</p> 4. Interviews <p>Harrisburg CCC Director/PCM</p> <p>PREA Coordinator</p> <p>Findings:</p> <p>Subsection (a):</p> <p>According to 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 15 - Facility Staffing, the Bureau Director or designee is required to develop and document a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring to protect offenders against sexual abuse. The following items are taken into consideration:</p> <ol style="list-style-type: none"> (1) the physical size and layout of the facility; (2) number and type of offenders assigned to the facility; (3) video monitoring capabilities to protect offenders against sexual abuse; (4) the prevalence of substantiated and unsubstantiated incidents of sexual abuse; (5) any other relevant factors. <p>During the pre-audit, Staffing Plan and PREA Reports for CCC's for 2016, 2017, and 2018 were submitted. These plans reviewed the previous calendar year's statistics and served as a staffing request for the following fiscal year. These reports consistently addressed the physical layout of the facility, number and type of reentrants assigned to the facility, the number of cameras and DVRs used in monitoring the facility, number of staff, and the number of sexual abuse and sexual harassment investigations opened and closed in the previous year. In 2017, two Community Corrections Center Monitors (CCCM) positions were redistributed to Harrisburg CCC due to staff overtime. Additionally, Harrisburg has 51 cameras, with storage capability, which are supplemented with mirrors.</p> <p>The Harrisburg CCC Director indicated that she ensures there is the necessary staff coverage to ensure reentrants are protected against sexual abuse and that she and staff are monitoring</p>

and conducting rounds. She also considers cameras when determining staffing plans. During the onsite portion of the audit, adequate numbers of staff were on duty to comply with the staffing plan.

Subsection (b):

According to the Pre-Audit Questionnaire, the staffing plan for Harrisburg CCC is 150 reentrants per day, however, since the last audit, the average daily population is 130 reentrants. Deviations from the staffing plan are not made. Vacancies are addressed through voluntary or mandatory overtime. An example of the Bureau of Community Corrections CCC Monitor Schedule Harrisburg CCC was submitted for review, as well as a list of mandatory overtime showing overtime worked for the period of 1/6/18 to 4/1/18. This documentation supports the assertion that overtime is utilized to comply with the staffing plan. Additionally, during the interview with the Facility Director, she maintained that the facility is never short staffed and confirmed voluntary or mandatory overtime is utilized.

Subsections (c):

According to 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 15 - Facility Staffing, annual reviews are completed by the Bureau Major or designee to determine staffing patterns at every Community Corrections Center and a report is prepared to include recommendations for staffing level and/or video monitoring changes. The past three confidential staffing plans, which included Harrisburg CCC, were included in the pre-audit questionnaire. Taken into consideration are:

- (1) the layout of the facility, resident populations, incidents of sexual abuse and sexual harassment
- (2) prevailing staffing patterns
- (3) the number of cameras and DVRS capable of recording
- (4) number of employees by employment classification.

In addition to the annual review of the staffing plan, whenever there is a staffing change, the facility conducts a subsequent review. According to the statewide PREA Coordinator, he is aware of these reviews.

Corrective Action: None

115.215	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 30 - Searches 3. Documentation Bureau of Community Corrections Offender Strip Search Log Housing Area- Announcement (PREA115215) Training Academy Curriculum for Searches Staff Training Records Search Log 4. Interviews Random Staff Interviews Reentrant Interviews Facility Director 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a): According to 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 30 - Searches, Community Corrections staff are not allowed to conduct:</p> <ol style="list-style-type: none"> (1) a body cavity search (visual or internal) of any offender (2) a cross-gender strip search of any offender (3) a strip search of a transgender offender <p>The manual does outline the procedure and requirements should the Facility Director/designee authorize a strip search. This includes having two trained staff of the same gender, when possible, or with a supervisor on site to conduct the strip search. If a pat search or strip search is necessary based on credible information such as the reentrant may be in possession of a weapon, yet same gender staff is not available, staff are directed to call 911 for local law enforcement assistance.</p> <p>BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training indicated that searches shall be in accordance with Department Policy 8.3.1, Section 30 which is noted above.</p> <p>Staff interviewed reported that strip searches are only conducted by male staff, as Harrisburg</p>

CCC is a male facility, and that two staff are always present. In reviewing the search log book, the presence of two male staff during each strip search was confirmed.

Subsection (b):

Harrisburg CCC does not house female reentrants. This was confirmed through the on site visit and speaking with staff.

Subsection (c):

According to 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 30 - Searches, every strip search is documented on the Offender Strip Search Log which was attached to the Pre-Audit Questionnaire and viewed on site. Procedure prohibits visual or internal body cavity searches or cross gender strip searches of any reentrant by Community Corrections staff. Harrisburg CCC does not house any female reentrant. However, according to the procedures manual, pat searches are conducted only when gender-appropriate staff are available.

Per the Staffing Plan and PREA Report for CCC's memo, every attempt is made to have one staff present that is the same gender as the resident population. During the on site visit, this did occur at Harrisburg CCC. Additionally, interviews with staff indicated there was usually a male staff on duty each shift. In reviewing the search log book, only male staff conducted strip searches of male reentrants. No female is housed at Harrisburg CCC.

Subsection (d):

BCC-ADM 008 Bureau of Community Corrections - PREA Procedures Manual mandates reentrants be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when viewing is incidental to routine dorm room checks or security rounds. The facility will have designated areas in which reentrants can perform those tasks in private. Additionally, policy mandates that opposite gender staff announce their presence upon entering the bathroom, shower, or authorized changing areas.

During the Pre-Audit, a copy of the Housing Area Announcement was provided. The announcement was viewed during the tour in various areas of the facility including near bathrooms and upon entering the housing area. Additionally, throughout the tour, female staff announced their presence as they entered into various sections of the facility.

All of the reentrants interviewed acknowledged that female staff announce their presence when on the housing unit, prior to entering a resident room or resident bathroom. Reentrants reported not being viewed naked in front of staff, and staff indicated reentrants have the ability to shower, dress, and use the toilet without being viewed by staff.

One letter was received by a reentrant concerned that staff were viewing reentrants in the toilet stall during rounds. This was talked about by other reentrants and random staff during interviews. According to the Director and staff, when rounds are conducted, reentrants are required to be in their rooms and not allowed in the restroom during that time. The only time staff would view a reentrant while in a toilet stall is if there is a safety concern or the suspicion of illegal drug use by the reentrant. If there is a safety or security concern, a male staff would first attempt to receive a verbal response from the reentrant and if there was not answer

would then visually check the stall. Female staff would not conduct this type of welfare check.

Subsection (e):

According to the Searches procedure, Community Corrections staff are prohibited from conducting a search or physical examination for the sole purpose of determining a reentrant's genital status. If the status is unknown, staff should have a conversation with the reentrant, review medical records, or a broader medical examination should be conducted in private by a medical practitioner.

All of the staff interviewed were trained in searches, which included the search of transgender individuals. All staff were aware they are prohibited from conducting a search or physical examination for the sole purpose of determining a reentrant's genital status and were aware of the policy behind this prohibition. There were no transgender reentrants placed at Harrisburg CCC during the on-site phase of the audit, resulting in no transgender interviews being completed.

Subsection (f):

Offender Searches training power point was submitted with the Pre-Audit Questionnaire. Performance Objective #3 states: " Perform a clothes search of a transgender or intersex Offender in accordance with the National PREA Standard 115.15." This training is an agency training, encompassing both Community Corrections and institution staff. Included in the training is professionalism by staff for all searches. Additionally, staff are trained to conduct searches of Transgender and Intersex reentrants in the least intrusive manner, completed in a professional and respectful manner, conduct pat searches in full view of a camera if possible, and staff are not allowed to search or examine a transgender or intersex reentrant for the sole purpose of determining genital status.

Twenty-two Harrisburg CCC staff training records were submitted for review. All staff but one new hire completed PREA Essentials 2018 and most staff completed a minimum of two or three annual PREA trainings, depending on their length of employment. Of the twenty-two records, twelve staff completed BCC Searches - Body Area Vehicle. All staff interviewed reported being trained in searches, most completing the training at the Academy. Training included cross-gender and transgender searches, and how to conduct searches in a professional and respectful manner.

Corrective Action: None

115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policies and Procedures BCC-ADM 005 Bureau of Community Corrections Resident Legal BCC-ADM 008 Bureau of Community Correction PREA Procedures Manual Section 2 - Prevention and Training 3. Documentation PREA Poster in Spanish PREA sexual abuse awareness Handout in Spanish Email dated 9/19/17 from PREA Coordinator to PREA Compliance Managers RE: Propio Language Line and instructions to use Bureau of Community Corrections Language Line Information PREA SAFE/SANE Letter of Agreement with Harrisburg Hospital dated 3/25/15 4. Interviews Agency Head Reentrant interviews 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a): BCC-ADM 005 Bureau of Community Corrections Resident Legal policy, directs the establishment of procedures for a Community Corrections reentrant to request reasonable accommodations for a qualified disability that affects a major life activity and for facilities under the authority of the Department to provide reasonable accommodations. The procedure is in line with the Americans with Disabilities Act of 1990 and in line with PREA Standards, in that PREA information is to be delivered in alternative formats to ensure effective communication. Additionally, reentrants are not to translate for other reentrants.</p> <p>BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training ensures that reentrants with disabilities have an equal opportunity to participate in or benefit from all aspects of Department efforts to prevent, detect, and respond to sexual harassment. It further outlines that every reentrant receives information regarding the Zero Tolerance policy, how to report sexual abuse and sexual harassment, and their rights to be free from sexual abuse, sexual harassment and retaliation. This information must be accessible to all reentrants including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, or have limited reading skills.</p> <p>Upon intake at Harrisburg CCC, monitors provide reentrants with PREA Information, including</p>

the zero tolerance policy, reentrant rights, and how to report. This information is provided verbally and in writing. Written information is provided in both English and Spanish. Within five days of intake, reentrants view the PREA video and meet with a Corrections Counselor to further discuss PREA. Additionally, PREA announcements are made two times per day in both English and Spanish. There are PREA information posters throughout the facility and a PREA bulletin board in the entrance area of the facility. This information is posted in both English and Spanish. Furthermore, PREA materials in Braille and TTY services for the deaf and hard of hearing are available, if needed.

Subsection (b) and (c):

Two notices in Spanish were provided for review in the Pre-Audit Questionnaire. The notices included the Department's No Tolerance Policy, definition of PREA, sexual abuse, and sexual harassment, and how to report. Notices in Spanish and English were posted throughout the facility. Additionally, written PREA information is available to reentrants in both Spanish and English. Two Spanish speaking reentrants were interviewed. Both acknowledged receiving information in Spanish and English and understanding the information.

PA DOC prohibits the use of inmate/reentrant translators for PREA allegations except in exigent circumstances. If qualified staff are not available to translate, DOC contracts with Propio Language Line to meet the language needs. Propio offers translations services in over 33 languages. Information on how to use this service was most recently distributed to all PREA Compliance Managers in September 2017. PA DOC compiles a list of staff who are multi-lingual and can act as interpreters for reentrants. During the Pre-Audit, the Pennsylvania Department of Corrections - Foreign Language Employee Directory dated 12/11/15 was submitted and reviewed documenting the availability of qualified staff interpreters. There is not a mechanism in place to document when a reentrant is used for interpretation, however, Harrisburg CCC reports that during the past year, no reentrants have been used to translate.

Staff and reentrants, confirmed that reentrants are not used to interpret for other reentrants in PREA related matters. Staff were aware of the language line and when asked for the phone number to call the Propio Language Line, the information was readily available from staff. During reentrant interviews, the Propio Language Line was used to translate for one reentrant. There were no barriers in obtaining a translator for the interview.

Corrective Action: None

115.217	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed</p> <p>1. Pre-Audit Questionnaire</p> <p>2. Policy and Procedure</p> <p>1.1.4, Centralized Clearances Procedures Manual Section 4 - Centralized Clearance Check Procedures</p> <p>8.3.1, Bureau of Community Corrections Security Procedures Section 31- Contractor and Volunteer Clearances</p> <p>4.1.1, Human Resources and Labor Relations Procedures Manual Section 38 - Recruitment, Selection, and Placement for Non-Civil Service Positions</p> <p>4.1.1, Human Resources and Labor Relations Procedures Manual Section 40 - Conducting Pre-Employment Background Investigations</p> <p>4.1.1, Human Resources and Labor Relations Procedures Manual Section 41- Employment of Job Applicant Having Prior Adverse Contacts with Criminal Justice Agencies</p> <p>3. Documents</p> <p>Position Vacancy Interest Form</p> <p>Consent to Release Information for Prison Rape Elimination Act Compliance</p> <p>Current/Prior Employer Letter used for prospective employee</p> <p>Current/Prior Employer Letter used for prospective contractor</p> <p>4. Interviews</p> <p>Human Resources</p> <p>Bureau of Investigations and Intelligence (BII)</p> <p>Findings:</p> <p>Subsection (a):</p> <p>PA DOC policy and procedure 4.1.1 Human Resources and Labor Relations Procedures Manual Section 41 specifically states the Department will not hire or promote anyone who:</p> <p>a. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution,</p> <p>b. Has 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,</p> <p>c. Has been convicted of any offense under the follow (or equivalent out of state):</p> <p>1. Title 18 Pa C.S.A. Chapter 31- Sexual Offenses or</p> <p>2. Title 18 Pa C.S.A. Chapter 59 - Public Decency</p> <p>Additionally, prior to the engagement of any contractor, the contractor and all of the contractor's employees and/or subcontractors that may have contact with inmates will be investigated to ensure the Department does not enlist the services of any person(s) who:</p>

A. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution

B. Has 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.

Subsection (b):

According to procedure 4.1.1 Human Resources and Labor Relations Procedures Manual Section 41, when hiring or promoting, the Department also considers any incidents of sexual harassment. Additionally, 1.1.4, Centralized Clearances Procedures Manual requires the Department to consider any incidents of sexual harassment when determining whether to enlist the services of a contractor who may have contact with inmates.

Subsection (c):

The Pennsylvania Department of Corrections Application for Employment process includes the following sections consistent with PREA standards:

1. Consent to Release Information for Prison Rape Elimination Act Compliance
2. Current and prior employer information
3. General information includes questions regarding prior employment in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution to include state facilities for persons who are mentally ill, disabled, or retarded, or chronically ill or handicapped; residential care or treatment facilities for juveniles; and facilities that provide skilled nursing, intermediate or long term care or custodial or residential care.
4. General information regarding prior history of engaging in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
5. General information regarding substantiated allegations against the applicant of sexual abuse or sexual harassment in a prison, jail, lockup, community confinement facility, juvenile facility or other institution, or has the applicant resigned during a pending investigation of an allegation of sexual abuse of a confined individual.

When current employees apply for a vacant position within the Department, the applicant completes a Position Vacancy Interest Form. This form requires the applicant to answer five PREA related questions regarding (1) prior employment in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution to include state facilities for persons who are mentally ill, disabled, or retarded, or chronically ill or handicapped; residential care or treatment facilities for juveniles; and facilities that provide skilled nursing, intermediate or long term care or custodial or residential care and while employed in such a capacity, (2) the applicant engaging in, (3) a substantiated allegation, or (4) the applicant resigning during an investigation for sexual abuse or sexual harassment or (5) the applicant having been convicted, civilly or administratively adjudicated for engaging or attempted 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.

All new employees are subject to background check. In the past year six employees have been hired at Harrisburg CCC and all six had background checks completed. It is the responsibility of the BCC Human Resource Coordinator to process the Application for Employment and route the Checklist for Background Check Requests. It is the responsibility of Bureau of Investigations and Intelligence (BII) to complete the background check and conduct

a full investigation on all applicants. When the background check is completed, BII completes a summary of the findings and submits the information to BCC Human Resources for final hiring decision.

According to Human Resources and Labor Relations Procedure Manual, background checks are completed by the Office of Special Investigations and Intelligence for all prospective new hires and rehires. Consistent with PREA, prior employment in any type of prison, jail, lockup, community confinement facility, juvenile facility or other institution will be further investigated to ensure that the candidate has not been found to have engaged in sexual abuse or 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.

According to Centralized Clearance Procedures Manual, if there is an indication that the employee or contractor has worked in a prison, jail, lockup, community confinement facility, juvenile facility, or institution, then the PREA Current/Prior Employer Letter is sent to the applicant's previous employer by Human Resources. A copy of this form was included in the Pre-Audit Questionnaire. The form includes questions related to sexual abuse and sexual harassment according to policy and PREA standards.

Subsection (d):

Per 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 31, every person who provides recurring on-site services and has contact with reentrants at a CCC as a volunteer, contractor, or employee of the contractor must submit to a criminal background check, PREA background check and receive clearance from the Department prior to having contact with reentrants. Applicants submit a completed and signed Community Corrections Clearance Application to the Facility Director or designee. Per procedure, the PREA Background check completed the PREA Questionnaire and Consent to Release PREA Information. The PREA Background check is completed in the same manner as an employee in that the previous employer will be contacted if prior employment included any type of confinement setting to ensure the applicant has not engaged in sexual abuse in a facility or has been convicted of engaging or attempting to engage in sexual activity in the community, or has been civilly or administratively adjudicated to have engaged in such activity.

During the past year, Harrisburg CCC has not completed any background checks for volunteers, contractors, or contractor employees.

Subsection (e):

Employees are required to report any negative contact with law enforcement to their supervisor, as soon as possible, or no later than the employees next scheduled work day. In addition to the reporting requirement, the Department of Corrections utilizes the Justice Network (JNET) system to cross check all employees daily for negative law enforcement contact. Contractor and volunteers who continue to provide services receive an annual clearance update. The Annual Clearance Review is completed and saved to MAP. Every two years, the contractor and volunteer has a criminal background check completed by the Centralized Clearance Unit. This information is communicated with facility requesting the background check.

Subsection (g):

Applicants are required to affirm and sign the Application for Employment, indicating the information is true and complete to the best of the applicants knowledge and belief. The applicant also acknowledges that any material omission or false information is grounds for non-selection, discipline, or termination of employment.

According to Section 31 of 8.3.1, Contractors and volunteers will not be granted clearance with the Department if the candidate has deliberately falsified or omitted pertinent information including PREA related misconduct on the Community Corrections Clearance Application or PREA Questionnaire.

Subsection (h):

According to the Human Resource Analyst, Pennsylvania DOC does provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee when the information is requested from and institutional employer for whom the employee has applied to work.

Corrective Action: None

115.218	Upgrades to facilities and technology
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 42 - CCT Monitoring and Recording Systems 3. Documents <p>Order and Receipt for dome camera purchased 6/30/17 for Scranton CCC and purchasing correspondence</p> <p>Work Order for Camera replacement in the laundry room at Scranton CCC</p> <ol style="list-style-type: none"> 4. Interviews <p>Agency Head Harrisburg CCC Director</p> <p>Findings:</p> <p>Subsection (a) & (b):</p> <p>According to 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 42 - CCT Monitoring and Recording Systems, the Department must consider how technology may enhance the facility's ability to protect residence from sexual abuse when installing or updating video monitoring technology. Correspondence, purchase information and receipts for Scranton CCC were submitted for review.</p> <p>When considering installing or updating monitoring technology, a number of things are taken into consideration to protect reentrants from incidents of sexual abuse such as blind spots, areas of issue, available technology and data collections. Harrisburg CCC is planning for renovations in the near future including the kitchen and bathroom remodel. Although mainly cosmetic, they are taking into consideration the sexual safety of inmates.</p> <p>Corrective Action: None</p>

115.221	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 24 - BCC Evidence Control BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse 3. Documents <ul style="list-style-type: none"> Memorandum of Understanding Between the Pennsylvania State Police and the Pennsylvania Department of Corrections dated 9/24/13 Memorandum of Understanding Between the Pennsylvania State Police and the Pennsylvania Department of Corrections dated 2/16/17 Letter from PA DOC to Pennsylvania State Police (PSP) regarding PREA Standard 115.21 dated 6/16/15 Response letter from PSP to PA DOC 7/1/15 Bureau of Community Corrections First Responder Checklist Victim of Sexual Abuse Services Offered form PREA Safe/SANE Letter of Agreement between Department of Corrections and Harrisburg Hospital dated 3/25/15 PREA Rape Crisis Center Letter of Agreement between the Department of Corrections and the YWCA Greater Harrisburg dated 10/17/14 A National Protocol for Sexual Assault Medical Forensic Examinations 4. Interviews <ul style="list-style-type: none"> Staff interviews SAFE/SANE Manager <p>Findings:</p> <p>Subsection (a):</p> <p>The Bureau of Community Corrections is responsible for administrative investigations and the Pennsylvania State Police (PSP) conducts criminal sexual abuse incidents. When an allegation of sexual abuse occurs, it is the policy of the Department that the facility will secure and protect the potential crime scene and law enforcement and/or outside medical professional will collect the physical evidence. Correspondence letters were submitted for review during Pre-Audit in which DOC requested PSP assistance in complying with PREA Standard 115.21 (A) through (E). PSP acknowledged familiarity with the standard and a willingness to follow the subject standard. The relationship between PA DOC and PSP was solidified through a Memorandum of Understanding (MOU) date 2/24/13, superseded by the MOU dated 2/16/17.</p> <p>Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 24 BCC</p>

Evidence Control - Crime Scene Control details what security staff should do in the event that a suspected crime occurred in the facility. To ensure staff follow the procedure, a First Responder Checklist was developed for staff. This includes victim safety and medical care, securing the crime scene, reporting, and documentation.

Community Corrections Monitors at the Harrisburg CCC have the potential to be first responders. All of the staff interviewed were aware of their responsibilities as first responders and were able to verbalize steps necessary to address the safety of the victim, preserve the crime scene and physical evidence and make the proper notifications to MOC, who directs the investigation. Staff were aware of the chain of command in providing notification and who is responsible for investigations.

Subsection (b):

The MOU dated 2/16/17 indicates the PSP is responsible for investigating allegations of sexual crimes in a PA DOC facility and that PSP is knowledgeable with PREA Standard 115.21, also confirmed in letter from PSP to PA DOC on 7/1/15. The MOU further states that "PSP will endeavor to comply with PREA Standard 115.21, with the understanding that every alleged crime is unique and requires different investigative steps".

Harrisburg CCC does not house youthful offenders. Harrisburg CCC has procedures in place consistent with "A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents". They have developed a coordinated response with the Pennsylvania State Police for criminal investigations, the Harrisburg Hospital for medical services and YWCA Greater Harrisburg for advocacy services. Staff are trained to address the safety of the victim by separating the alleged abuser from the victim and utilizing the language line or qualified staff to assist when there are language or communication barriers. Staff are trained not to investigate or collect evidence but to preserve the crime scene and evidence by asking the victim to not shower, change clothes, brush teeth, use the bathroom, eat or drink. Additionally, staff are to secure the area where the assault occurred if on grounds, and not allow anyone to enter the area unless necessary and the entry is monitored and documented.

Subsection (c):

According to BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse, it is the responsibility of the PCM to coordinate medical services related to sexual abuse at the facility, and where possible, utilize a hospital that employs a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) to conduct sexual abuse examinations. The facility is required to enter into a letter of agreement with the hospital or document attempts to enter into such an agreement. On 3/25/15, Department of Corrections and Harrisburg Hospital signed a Letter of Agreement, in which Harrisburg Hospital agreed to provide sexual assault examinations performed by a certified sexual assault nurse examiner when the sexual abuse incident occurred within 96 hours.

When a reentrant is a victim of sexual abuse, they are offered medical treatment and crisis intervention services at no financial cost to the reentrant. Reentrants are provided a form, written in both English and Spanish, in which they can request or decline a medical examination, mental health evaluation, and rape crisis services. The reentrant and PCM sign and date the form.

Harrisburg CCC has reported no sexual abuse incidents occurring within the past year. Therefore, no forensic medical examinations have been completed for reentrants at Harrisburg CCC during that time period. The Manager of the Harrisburg Hospital SAFE Program confirmed the presence of a Letter of Agreement with Harrisburg CCC. She could not recall an incident during the past year in which Harrisburg CCC transported a reentrant to Harrisburg Hospital for a sexual assault exam, confirming Harrisburg CCC's report of zero incidents.

Subsection (d) and (e):

According to BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse, the PCM coordinates victim services related to sexual abuse for the facility by working with the Pennsylvania Coalition Against Rape (PCAR) approved local rape crisis center. This coordination of services is documented through a PREA Rape Crisis Center Letter of Agreement. On 10/14/17, the Department of Corrections and the YWCA Greater Harrisburg signed a Letter of Agreement, included in the Pre-Audit Questionnaire. This Letter of Agreement outlines each agency's responsibilities. The YWCA Greater Harrisburg through the Violence Intervention and Prevention Program services, agrees to maintain a trained pool of advocates to respond to sexual assault survivors at DOC facilities in Dauphin County, maintain confidentiality, provide necessary release forms, provide advocacy for and accompany the victim to the Forensic Medical Examination, provide confidential supportive services, accompany the victim to court.

The Director of Violence Intervention & Prevention Services at the YWCA Greater Harrisburg confirms that the YWCA Greater Harrisburg has entered into a Letter of Agreement with Harrisburg CCC for rape crisis services. In addition to support services, they provide accompaniment to the forensic medical examinations at Harrisburg Hospital. In the post-audit interview, Harrisburg Hospital acknowledged YWCA Greater Harrisburg provides support services for victims during the medical examination. It should be noted that the formal relationship with the two outside resources extend beyond Harrisburg CCC and encompasses other PA DOC facilities. Although Harrisburg CCC has not required these services in the past year, there is a process in place and services are provided for other correctional facilities.

Subsection (f):

The responsibility of investigation allegations of sexual abuse lies with the Pennsylvania State Police. In viewing the letters of correspondence and signed MOU's, PSP acknowledged familiarity with the standard and a willingness to follow the subject standard. The MOU indicates that the PSP will "endeavor to comply with PREA Standard 115.21" and "will coordinate with DOC personnel to arrange for access to victim advocates who can provide the emotional and other needed support services".

Subsection (h):

Harrisburg CCC does not utilize staff to conduct sexual assault examinations or collect evidence for criminal proceedings.

Corrective Action: None

115.222	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations 3. Documents Example BCC PREA Report - Sexual Abuse Screenshot PREA Tracking System Screenshot of PA DOC public website showing policy link and list of policies available to the public, include BCC-ADM 008 Prison Rape Elimination Act (PREA) Screenshot of PA DOC public website showing PREA-Related Links Pennsylvania Department of Corrections public website Memorandum of Understanding Between the Pennsylvania State Police and the Pennsylvania Department of Corrections dated 9/24/13 Memorandum of Understanding Between the Pennsylvania State Police and the Pennsylvania Department of Corrections dated 2/16/17 Letter from PA DOC to Pennsylvania State Police (PSP) regarding PREA Standard 115.21 dated 6/16/15 Response letter from PSP to PA DOC 7/1/15 4. Interviews Agency Head PREA Investigator Random Staff <p>Findings:</p> <p>Subsection (a) and (b): Per policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 Investigations and Retaliation Monitoring, initial complaint information is entered into the PREA Tracking System which generates an incident number. According to policy:</p> <ol style="list-style-type: none"> A. 5. The Bureau Major/designee shall assign an administrative investigation for every incident of sexual abuse and/or sexual harassment. A. 6. The Bureau Major/designee shall refer incidents/allegations of sexual abuse or sexual harassment of a reentrant for criminal investigation, unless it does not involve potentially criminal behavior, and assign a Bureau of Community Corrections (BCC) investigator to track the progress. <p>All allegations of sexual abuse and sexual harassment are investigated. PA DOC has several</p>

ways in which an allegation is investigated including internally and through the Pennsylvania State Police. In BCC, all allegations are routed internally through the BCC-MOC for assignment to a trained investigator and referral to PSP if needed. PSP investigates all allegations appearing criminal in nature as well as all allegations of sexual abuse by staff. All investigations are tracked and documented. Ultimately the final report is reviewed by the Secretary.

In the past twelve months, one allegation of sexual harassment was investigated, and two allegations of sexual abuse. One of the two allegations of sexual abuse was initially report in 2016 was investigated and closed. However, new information surfaced in 2017, which reopened the investigation. It is currently open and pending a criminal investigation. A screenshot of the PREA Tracking System was submitted for review. It indicates that in the past twelve months two incidents of sexual abuse have been reported, one claim being unsubstantiated and the other case is pending at this time. Additionally the PREA Tracking System shows two reports for sexual harassment in early 2017, which were both unsubstantiated through investigation.

PA DOC has made accessible for review the BCC-ADM 008, Bureau of Community Corrections Prison Rape Elimination Act (PREA) policy and procedure on the public website. The policy, and PREA related information, is accessible in various paths on the website.

Subsection (c):

According to policy, if a case is being investigated for criminal charges, the Department investigators suspend their administrative investigation and allow the criminal investigation to take precedence. The Bureau Major and/or OSII coordinate with the criminal investigator or District Attorney's Office to determine when to resume the administrative investigation. The Department investigators are expected to work with law enforcement to obtain relevant reports and documents to include in the administrative investigation.

The MOU between DOC and PSP dated 2/16/17 outline roles and responsibilities for each agency. Also addressed in the MOU is the agreement that PSP will develop a policy for conducting criminal investigations of sexual abuse allegations as required including, in part, a. perform a criminal investigation when appropriate; b. refer cases to the prosecutorial agency having jurisdiction when such referral is consistent with its policies, procedures and practices; c. cooperate appropriately with the prosecutorial agency; d. provide the DOC's Office of Special Investigations and Intelligence (OSII) with the Criminal Incident Report upon email request by DOC.

According to the investigator interviewed, when an allegation of sexual abuse or sexual assault is made at Harrisburg CCC, the allegation is immediately reported to the BCC-Management Operation Center (MOC) which is a central monitoring unit in the Bureau of Community Corrections. A lieutenant receives the verbal report and generates an initial PREA report that is sent by email to the Captain at BCC-MOC, along with a phone call of the same information. The Captain then assigns a trained investigator. Any allegation with the potential to be criminal in nature is referred to PSP. The DOC investigator is responsible for working with PSP to provide information, paperwork or video evidence, but will conduct the administrative hearing upon completion of the PSP investigation. Every allegation is investigated. It should be noted that during staff interviews, all staff indicated they would

immediately report any incidents or reports of sexual abuse or sexual harassment to BCC-MOC. They also noted PSP as a confidential means to report sexual abuse, sexual harassment, and retaliation.

Two investigation files were reviewed during the on site audit, one open and one closed. The open investigation is pending criminal investigation through PSP. Once PSP completes the investigation, DOC will conduct the administrative investigation. Both files confirmed that immediately upon receiving information, a PREA investigation was initiated and documented.

Subsection (d):

BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring and 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations addresses the conduct of investigations for PREA allegations.

Corrective Action: None

115.231	Employee training
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training 3. Documents PREA 2018 Essentials Slides PREA 2018 Essentials Slides 2016-2018 2018 BCC Annual Training for Staff 2017 Basic Training slides with notes PREA Course Lesson Plan (Basic Training) with slides 2017 PREA Risk Assessment Tool training power point 2017 Policy Update Training Visual Aid 2017 PREA DC-ADM 008 Policy Update 2015 PREA Course Lesson Plan (Basic Training) 2015 PREA Course Lesson Plan (Basic Training) with slides 2015 PREA Participant Handout 2015 PREA Basic Training Power Point 2014 BCC - Annual Training 2018 Block Schedule PREA Policy update Training acknowledgment web based training menus (PREA Training modules 2015-2018) PREA Basic Training Participant Guide Handout 1- Sexual Abuse and Sexual Harassment 4. Interviews Random staff interviews BCC staff <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training, every person who has contact with reentrants shall be trained on his/her responsibilities related to sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Basic and refresher training includes:</p> <ol style="list-style-type: none"> 1. the agency's zero tolerance policy 2. how staff fulfill their responsibilities under the agencies prevention, detection, reporting, and response policies and procedures 3. reentrants' right to be free from sexual abuse and sexual harassment 4. the right of reentrants and employees to be free from retaliation for reporting sexual abuse 	

or sexual harassment

5. the dynamics of sexual abuse and sexual harassment in confinement
6. the common reactions to 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 reentrants
9. how to communicate effectively and professionally with reentrants, including LGBTI or gender nonconforming reentrants
10. how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities

Subsection (b):

According to policy BC-ADM 008, if an employee is reassigned from a single gender facility to an opposite gender or co-ed facility, the employee shall receive additional training tailored to the gender of reentrants at the facility. During the past year, Harrisburg CCC has not hired new staff who was previously employed at a female facility.

Subsection (c):

According to policy BCC-ADM 008 section 2- Prevention and Training, O. Employee, Contractor and Volunteer Training, every person who has contact with reentrants shall be trained on his or her responsibilities related to sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Training occurs as follows:

- a. Orientation - Basic information related to PREA shall be provided by the PCM or Facility Director/designee and documented during facility orientation via the PREA Orientation Receipt for Department and Contract Employees and Volunteers. Individuals shall also be informed of their immediate responsibility for reporting and responding of sexual abuse and sexual harassment allegations/incidents.
- b. Basic Training - Initial training shall be provided within three months of hire or execution of contract.
- c. Refresher Training - Refresher training shall be provided every two years and include current sexual abuse and sexual harassment policies and procedures. In alternate years refresher information shall be provided on the current sexual abuse and sexual harassment policies.

According to the Pre-Audit Questionnaire, PREA Essentials web-based training is required on even number years and PREA Policy Updates are required on odd number years. In 2017, annual training consisted of DC-ADM 008 PREA Policy and Procedures manual update training. Training mirrored the structure of the procedures manual. The 2018 annual training consists of the PREA Essentials. The power point for this training was submitted and reviewed. This online training consists of PREA overview, the PREA Policy including zero tolerance, retaliation, victim behavior changes, and perpetrator characteristics, sexual orientation and gender identity, inappropriate relationships, communication, and how to report. This training appears to be an update to the 2017 Basic Training offered to new employees.

Subsection (d):

Upon completion of the online training, staff are required to acknowledge receiving and understanding the training on current sexual abuse and sexual harassment policies maintained within DC-ADM 008. This acknowledgment includes an understanding of the zero tolerance policy, and the employee's obligation to report all forms of sexual abuse, sexual

harassment, and retaliation. Training is tracked on individual Employee Training Transcripts through . An example of the acknowledgement and nine employee training transcripts were submitted and reviewed.

Random staff interviews confirmed that all staff received PREA training. PREA training consists of in person training at the academy for new staff followed by on line training. All staff interviewed have been trained in the components listed in (a).

Training is tracked in an online system and is a centralized BCC function. Training records have been submitted for review during the pre and post audit phases.

Corrective Action: None

115.232	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 11 - Non-Residential Contract Services 3. Documents Volunteer PREA Orientation and Verification Forms 2018, 2017, 2016, 2016 over 2 years PREA Orientation Receipt for Department and Contract Employees and Volunteers PREA Information and Reporting Requirements for Non-residential Contract Service Providers PREA Training Receipt for Department and Contract Employees and Volunteers 4. Interviews Contractor <p>Findings:</p> <p>Subsection (a), (b), and (c): Per policy BC-ADM 008, all contractors and volunteers who have contact with reentrants are required to complete PREA training similar to that of an employee. This includes the zero tolerance policy and how to report incidents of sexual abuse and sexual harassment. Contractors and Volunteers are provided PREA Orientation Receipt which defines and explains PREA, the zero tolerance policy, sexual abuse, sexual harassment, prohibitions, and reporting requirements. Upon completion of the training, contractors and volunteers are required to affix their signature to the acknowledgement on the PREA Orientation Training and Training Forms. Harrisburg CCC reports twenty contractors and volunteers who have been trained, and submitted PREA Orientation and Verification Forms for contractors and volunteers who have been trained since 2016.</p> <p>Level of training is based on the services provided to reentrants. According to Section 11 of BCC-ADM 008, non-residential reentry services provided to reentrants on community supervision living at home or a community confinement facility through a contract is provided the PREA Information and Reporting requirements requiring a signature acknowledging their obligations to report. The service providers receive the PREA Information and Reporting Requirements for Non-Residential Contract Service Provider which defines and explains PREA, the zero tolerance policy, sexual abuse, sexual harassment, prohibitions, and reporting requirements.</p> <p>One contractor who provides weekly groups at Harrisburg CCC was interviewed by phone. She confirmed being trained in person on PREA which included definitions, how to report,</p>

what to do if a witness to a PREA incident, and how to handle if receiving a report of a PREA incident. Additionally, she reported receiving PREA information every two years. Further, she commented that Harrisburg regularly provides PREA information to staff and reentrants through training and posters displayed throughout the facility.

Corrective Action: None

115.233	Resident education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre- Audit Questionnaire 2. Policy and Procedure BCC-ADM, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training 11.2.1, Reception and Classification Procedures Manual Section 2 - Diagnostic and Classification Procedures 3. Documents PREA Sexual Abuse Awareness Receipt for Reentrants - English and Spanish "What is Prison Sexual Assault?" intake handout PREA Sexual Abuse Awareness Handout and Receipt for Reentrants - English and Spanish - amended June 2018 PREA Resident Training and Understanding Verification Form for Harrisburg CCC Zero Tolerance Fact Sheet DAILY PREA ANNOUNCEMENT PREA Resident Training Sing In Sheet 4. Interviews Random Staff conducting intakes Reentrants PREA Coordinator communication 5. Facility Tour <p>Findings:</p> <p>Subsection (a) and (b):</p> <p>According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training, every reentrant, including transfers and new receptions, will receive information regarding the Agency's zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, and the right to be free from retaliation for reporting such incidents. Additionally, all reentrants receive information regarding policies and procedures for responding to such incidents.</p> <p>Harrisburg CCC also follows 11.2.1, Reception and Classification Procedures Manual Section 2 - Diagnostic and Classification Procedures, which states that "DCC's (Diagnostic and Classification Center) within the Department shall present an orientation program for new inmates". During the orientation program, reentrants receive information on sexual abuse/sexual harassment prevention, reporting, and intervention. At Harrisburg CCC, at intake, all reentrants receive the "What is Prison Sexual Assault?" handout which includes the definition of sexual abuse and sexual harassment and how to report such incidents. The handout states "Any form of sexual abuse or sexual harassment will not be tolerated". The</p>

hand out was submitted during the pre-audit. However, it was replaced in June 2018 with the "PREA Reentrant Intake Handout" in English and Spanish. Copies of the handout, receipt, and Bulletin implementing the change was submitted via email from the PREA Coordinator during the post-audit phase. The new handout is more robust and includes a detailed description of zero tolerance, sexual abuse and harassment definitions, and understanding consent. It further outlines what a reentrant should do if the reentrant is abused, how to report sexual abuse or sexual harassment and how to access support services free of charge through Pennsylvania Coalition of Rape (PCAR).

According to the Pre-Audit Questionnaire, 502 reentrants were admitted to Harrisburg CCC during the past year and received PREA information. 310 reentrants transferred from another community confinement facility. According to staff, all new reentrants go through the intake process immediately upon arriving to Harrisburg CCC, regardless of the location from which the reentrant is coming. The intake includes the PREA handout which is reviewed with the reentrant by staff and acknowledgment subsequently signed by the reentrant.

Subsection (c) and (d):

Reentrants receive PREA information by video, handout, handbook, daily announcement, and meeting in person with staff. During intake, reentrants meet with a monitor and review PREA information. This includes a handout in both English and Spanish. Within five days of intake, a reentrant participates in orientation group which includes the PREA video and follow up information with a counselor. Reentrants sign a PREA Education Receipt upon completion of this orientation group. On going information is available through a PREA announcement made daily during each shift, in both English and Spanish. PREA information is posted throughout the facility, including a bulletin board visible to all reentrants and staff as they enter the building.

Interviews with reentrants all confirmed the receipt of PREA information from both a monitor and counselor on separate occasions. Most reentrants reported receiving the information the same day, if not within minutes of arriving to the facility. Additionally, reentrants confirmed having knowledge of the information posted throughout the facility and referenced the displayed information during the interview.

Documentation is scanned and housed in an electronic database. Seven reentrant's signed documents were reviewed. All but one of the reentrants signed the PREA Sexual Abuse Awareness Handout Receipt on the day of reception to Harrisburg CCC. The reentrant that did not sign the day of reception, signed the receipt the following day. Additionally, the documents submitted confirmed that the orientation is completed on Friday and reentrants attend the first orientation following admission. Of note, orientation scheduled for the Friday after Thanksgiving was conducted earlier in the week rather than cancelling the orientation due to the holiday.

Subsection (e):

Three times per day, once each shift, Harrisburg CCC presents a PREA announcement over the PA system which includes the Zero-Tolerance policy, response to sexual abuse or sexual harassment, and how to report. A copy of the daily announcement was reviewed during the Pre-Audit and this auditor heard the announcement in both English and Spanish. Additionally, reentrants confirmed the daily PREA announcements.

	Corrective Action: None
--	-------------------------

115.234	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre- Audit Questionnaire 2. Policy and Procedure BCC-ADM, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training 3. Documents Employee training transcript PREA Training Receipt for Department and Contract Employees and Volunteers (blank) Power Point modules 1-7 PREA Grant Project: Sexual Assault Investigator Training (post December 2017) Power Point modules 1-5 Investigator (pre December 2017) 4. Interviews Lead PREA investigator Follow up question with BBC-MOC Captain <p>Findings:</p> <p>Subsection (a) and (b): According to BCC-ADM, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training, "any employee who conducts sexual abuse investigations shall receive specialized training specific to confinement settings through the Departments or other approved source. This training shall include 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 actions or prosecution referral."</p> <p>Prior to December 2017, investigators were trained using the PREA Resource Center's (PRC) five Investigator modules. Investigators trained after December 2017 were trained using materials based on the PRC demonstration grant project. Both Power Points were submitted for review during the pre-audit. Training consisted of interviewing sexual abuse victims and suspected perpetrators, the use of Miranda and Garrity warnings, sexual abuse evidence collections, and prosecutorial Collaboration.</p> <p>PREA investigations are coordinated through the Bureau of Community Corrections- Management Operation Center (BCC-MOC). An interview was conducted with the lead investigator for the Bureau of Community Corrections. He confirmed that in addition to the PREA training required of all staff, as a PREA investigator he also completed specialized investigator training. This training consisted of techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and criteria and evidence required to substantiate a case for</p>

administrative or prosecution referral.

Subsection (c) and (d):

Upon completion of any PREA training, staff are required to sign the PREA Training Receipt for Department and Contract Employees and Volunteers. The employee is required to check the training completed. One such training is the investigator training. Training is provided through the Training Academy and tracked through Central Office. Twenty-eight training transcripts were submitted in the Pre-Audit Questionnaire which documented the dates and title of the training. All twenty-eight transcripts documented PREA Investigator training in addition to other PREA training required of all staff.

Corrective Action: None

115.235	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre- Audit Questionnaire 2. Policy and Procedure BCC-ADM, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training 3. Documents PREA Training Receipt for Department and Contract Employees and Volunteers (blank) Power Point PREA Specialized Training Medical and Mental Health Care Standards; October 2016 Power Point PREA Specialized Training: Medical and Mental HealthCare Standard Letter of Agreement between Harrisburg CCC and Harrisburg Hospital 4. Interviews Correspondence with PREA Coordinator <p>Findings:</p> <p>Subsection (a) and (b): According to BCC-ADM 008. All full and part-time medical and mental health care practitioners who work regularly in the facilities will be trained in, or provide proof that they have been trained prior to providing service to the facility:</p> <ol style="list-style-type: none"> a. how to detect and assess signs of sexual abuse and sexual harassment b. how to preserve physical evidence of sexual abuse c. how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and d. how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. <p>Two power point training modules were provided, dated 10/4/16 and October 2017. Both trainings were titled "Specialized Training Medical and Mental Health Care Standards" and covered the topics noted in policy a. through d.</p> <p>There are no medical or mental health care staff on site at Harrisburg CCC. These services are provided by community medical agencies. Forensic examinations are conducted at Harrisburg Hospital, the relationship solidified through a letter of agreement. Because of this, no training records were submitted for review. However, it should be noted, all training completed by BCC staff, including "Specialized Training Medical and Mental Health Care Standards" is documented through the Bureau of Community Corrections.</p> <p>Corrective Action: None</p>

115.241	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008, Bureau of Community Corrections PREA Procedure Manual Section 2 - Prevention and Training BCC-ADM 008 Section 2-01 Bulletin 3. Documents PA DOC PREA Risk Assessment Tool (PRAT) PA DOC PREA Risk Assessment Tool (PRAT) - updated 2018 BCC-ADM 008 Section 2-01 Bulletin PRAT Tracking Form PRAT Training Power Point developed by the Training Academy PRAT User Guide PREA Facility Audit Report Interim Scranton Community Corrections Center dated 4/19/18 Training Records 4. Interviews PREA Coordinator Specialized staff interview Random reentrants <p>Findings:</p> <p>Subsection (A) and (B): BCC-ADM 008, Bureau of Community Corrections PREA Procedure Manual Section 2 - Prevention and Training requires every reentrant to be assessed for risk of being sexually abused by other reentrants or sexually abusive towards other reentrants within 72 hours of initial reception to the facility, including transfers from another facility.</p> <p>According to the Pre-Audit Questionnaire, in the past twelve months, 497 reentrants have entered the facility and all 497 reentrants were assessed using the PRAT within 72 hours of intake. The Harrisburg CCC PRAT Tracking Form was submitted and reviewed. The submitted tracking form included 146 reentrants who were received at Harrisburg CCC between April 2017 to May 2018. The tracking form included: the reentrant name, DOC number, Reception Date, when the PRAT was due and completed within the 72 hours, when the PRAT was due and completed 20-30 days from reception, high risk indicator for abuser or victim, and LGBTI status.</p> <p>Subsection (c): BCC-ADM 008 does require the use of an objective screening tool to assess for sexual victimization. Per policy and practice, PA DOC utilizes the Pennsylvania Risk Assessment Tool</p>

(PRAT). In May 2018, PA DOC, with technical assistance from the PREA Resource Center, revised the PRAT to address compound structure of questions to provide clarity to the question and updated terminology to more accurately capture sexual orientation, gender identity and gender expression. This change became effective June 18, 2018 and was communicated to DOC staff through the distribution of BCC-ADM 008 Section 2-01 Bulletin. In May 2018, staff responsible for conducting the risk assessment was trained on the revised tool through a webinar. Because the PRAT update and implementation occurred post-audit, conversations by phone and correspondence through email occurred with invested auditors and the PREA Coordinator.

The PRAT was submitted for review and appears to be an objective assessment. The PRAT consists of 22 questions with a numeric score for potential victim and a numeric score for potential abuser. The questions ask:

1. Have you ever been convicted of a crime of violence?
2. Did your current offense involved personal violence?
3. Is this the first time you have ever been incarcerated?
4. What is your age today?
5. Which of the following best describes your sexual orientation?
6. Are you intersex? (definition provided)
7. What is your gender expression?
8. What is your gender identity?
9. Have you ever been sexually victimized before this incarceration?
10. Have you ever sexually victimized someone before this incarceration?
11. Have you ever been sexually victimized while incarcerated?
12. Have you ever sexually victimized anyone while incarcerated?
13. Did any of your offenses involve sexually victimizing a child victim?
14. Did any of your offenses involve sexually victimizing an adult victim?
15. Do you have a physical disability?
16. Do you have a diagnosed mental disability?
17. Do you know if you have a developmental disability?
18. IF the IQ score is unavailable, does the inmate appear to have a developmental disability?
19. Do you feel vulnerable while incarcerated?
20. Describe the physical build of the inmate.
21. Describe the presentation of the inmate.
22. Is the inmate detained solely for civil immigration purposes?

Subsection (D) and (E):

BCM-ADM 008 requires the screening to consider a minimum of ten criteria when assessing residents for risk of sexual victimization. These criteria mirror the criteria as set forth in the standards. Additionally, these criteria are addressed in the PRAT. The criteria include:

1. Whether the resident has a mental, physical, or developmental disability
2. The age of resident
3. The physical build of the resident
4. Whether the resident has previously been incarcerated
5. Whether the resident's criminal history is exclusively nonviolent
6. Whether the resident has prior convictions for sex offenses against an adult or child
7. Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming

8. Whether the resident has previously experienced sexual victimization
9. The resident's own perception of vulnerability

Subsection (E):

The PRAT considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. Question 1, 2, 10, 12, 13, and 14 address prior acts physical and sexual violence towards adults and children.

Subsection (F):

According to BCC-ADM 008, follow-up assessments are completed 20-30 days after initial intake into the facility. Additional assessments are completed within 5 days of an allegation of sexual abuse or sexual harassment. All reentrants involved will complete the assessment. This practice was confirmed through interviews with Corrections Counselors responsible for conducting PRAT assessments.

Subsection (G):

According to training materials, staff are trained that reassessments for risk should occur upon referral, request, incident of sexual abuse, or receipt of additional information. This practice was confirmed through interviews with Corrections Counselors responsible for conducting PRAT assessments.

Subsection (H):

Reentrants are not disciplined for refusing to answer a question, or not disclosing information. According to BCC-ADM 008, reentrants shall not be disciplined for refusing to answer, or for not disclosing complete information in response to the question. Prior to administering the PRAT, staff are trained to read a statement to reentrants about PREA and the purpose of the PRAT. Included in the statement is the following sentence, " You will not be penalized in any way if you choose not to provide any information". According to submitted training materials, staff are trained that it is acceptable for reentrants not to answer a question. This was confirmed in both the PRAT user guide and the PRAT training power point submitted during the pre-audit. Additionally, Corrections Counselors responsible for conducting the PRAT confirmed that reentrants are not disciplined for refusing to answer a question.

Subsection (I)

Policy states that PRAT information and scores shall only be made available to designated staff and shall never be shared with other reentrants. This requirement is supported in both the PRAT user guide and the PRAT training power point. Staff are trained not to discuss PRAT information with anyone, including the reentrant, except to the extent necessary to make a report of sexual abuse and inform housing, bed, work, and programming assignments. PRAT scores are housed in the WebTAS System. A PRAT is conducted in the online system. The score is provided to the designated staff at Harrisburg CCC for tracking, but once the score is entered into the WebTAS System, it is no longer accessible to staff. According to the PREA Coordinator, only the PREA Compliance Managers have access to the information system.

Corrective Action: None

115.242	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 9- Working with Transgender/Intersex Reentrants 3. Documents PREA Risk Tracking in Unit Management System/PRAT Assessment and Tracking dated 2/18/15 Count Sheet PRAT Tracking form dated 4/6/18 Gender Review Committee (GRC) Checklist Gender Review Reassessment Checklist 4. Interviews Corrections Counselors PREA Coordinator PREA Compliance Manager Reentrant Interviews <p>Findings:</p> <p>Subsection (A) and (B): BCC-ADM 008 Section 2, mandates that information received through administering the PRAT shall be used to make individualized determinations regarding housing, work, education, and program assignments with the goal of keeping reentrants safe and keeping separate those reentrants at high risk of being sexually victimized from those at high risk of being sexually abusive. Section 9 furthers that in working with transgender/intersex reentrants, the Gender Review Committee shall consider numerous items regarding the safety and care of the transgender/intersex individual. The focus will be on sleeping quarters, use of bathroom/shower facilities/facility-based activities, community-based resources, and general questions or clarifications.</p> <p>The PRAT Tracking form was submitted during the Pre-Audit. This tracking shows when the PRAT was administered during the first 72 hours and again 20-30 days after intake, and any additional administrations. It further indicates a yes or no score for high risk of abuser or victim and if the reentrant identified as LBGTI. This information is also tracked in the Unit Management System for informing housing decisions. To maintain confidentiality, number scores and specific information is not included, it is noted as an "N" meaning a "housing concern".</p>

According to the Pre-Audit Questionnaire, when an Abuser or Victim is identified through the PRAT assessment, it is reported on the PRAT Tracking Sheet and logged on the count sheet as "N". If there are N's in a room, Harrisburg CCC staff will not place an abuser and victim together. If placing an abuser and victim together does occur, they will be split up immediately.

Subsection (C)(D):

According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 9- Working with Transgender/Intersex Reentrants, when deciding whether to assign a transgender/intersex reentrant to a facility, and in making other housing and programming assignments, consideration is made on a case-by-case basis, whether a placement would ensure the reentrant's personal health and safety, other reentrants' health and safety, and whether the placement would present management or security problems. When the reentrant's status as transgender or intersex is revealed after placement, the PREA Compliance Manager (PCM) is immediately notified. The PCM meets with the reentrant and counselor within one business day to discuss appropriate accommodations and convenes a Gender Review Committee (GRC). The Gender Review Committee Checklist is used to document both the discussion between the PCM and reentrant and the GRC. The PCM then meets with the reentrant a minimum of once every other month to review housing, bed placement, programming, work detail, education and any threats to safety experienced by the reentrant. These meetings are documented on the Gender Review Reassessment Checklist. The information gathered on the GRC checklist together with the PRAT is used to determine housing, bed, work, education and program assignments. When determining appropriate accommodations, the reentrant's own views, with respect to safety is given serious consideration both in policy and practice. At any point that new information is obtained that indicates a risk to the reentrants safety, the GRC will reconvene. No reentrant identified as transgender were placed at Harrisburg CCC during the time auditors were on sight, therefore no transgender reentrant was interviewed to confirm this process.

Subsection (E):

According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 9- Working with Transgender/Intersex Reentrants and confirmed by Harrisburg CCC staff, transgender and intersex reentrants are given the opportunity to shower separately from other reentrants. Reentrants at Harrisburg CCC are not provided a specific shower schedule. However, shower are designed as stalls covered by curtains and in A side bathroom, short partitions and curtains to allow for some privacy.

Subsection (F):

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2- Prevention and Training Section N, the Department shall not place LGBTI reentrants in dedicated facilities, units or wings solely on the basis of such identification or status, unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such reentrants. Harrisburg CCC does not house LGBTI reentrants in dedicated rooms or areas of the facility. The PREA Coordinator confirmed in the interview on 9/17/17, inmates who identify at LGBTI are housed with the general population and are not placed in one dedicated facility.

Corrective Action: None

115.251	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment BCC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 1 - Grievance Reporting 3. Documents Zero Tolerance Fact Sheet Daily PREA Announcement DC-904A Official Resident Grievance form (blank) DC-135 Inmate's Request to Staff Member (blank) DC-121 Part 3-BCC Employee Report of Incident PREA Notice poster PREA Notice poster (yellow); English and Spanish PREA Report (completed) PREA incident tracking and report (completed) 2017 and 2018 PREA training power point for staff 4. Interviews Random staff Random Reentrants PREA Coordinator PREA Compliance Manager (PCM) TipSubmit.com correspondence (tip through website) Pennsylvania State Police correspondence (letter) 5. Facility Tour <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3, " A report, complaint, or allegation of sexual abuse, sexual harassment, or retaliation (by other reentrants or staff) for reporting sexual abuse and/or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents can be reported by several means: verbal, written, anonymous, or by a third party." Policy specifically identifies the following employees to whom reentrants may privately report sexual abuse, sexual harassment, retaliation, staff neglect or violation of responsibilities that may have contributed to the incident: any staff member, the Facility Director/designee, the facility PREA Compliance Manager (PCM), and the Department PREA Coordinator.</p>

Daily PREA announcements are made over the public address system during each shift. The announcement reminds reentrants they can report sexual abuse and sexual harassment by contacting the nearest non-involved staff member. These announcements are in both English and Spanish. This auditor reviewed the announcement in writing and was allowed to hear the announcement outside the regular time. During interviews, Reentrants noted the announcement that played over the loud speaker at Harrisburg CCC. Additionally, posters on display throughout the facility outline methods of reporting which include verbal or written report to any staff member, Center Director or PCM. Further, at intake to the facility, reentrants are provided informational handouts which also provide ways to report.

BCC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 1 - Grievance Reporting outlines the responsibilities and procedures for reentrants to file a grievance. Per policy, if a grievance is regarding an allegation of sexual harassment or sexual abuse by a staff or resident, the report will not be addressed through the Resident Grievance System but will be investigated following the procedures outlined in BCC-ADM 008 PREA Manual.

Both staff and reentrants were aware of more than one way to report sexual abuse, sexual harassment, or retaliation. Most reentrants interviewed stated they could tell any staff including monitor, counselor, Director, or PCM. If the reentrant was not able to articulate specifically how to report, they indicated they would look at one of the posters displayed in the building, as the posters list how to report. Staff were also aware of more than one way a reentrant could report and most staff also referenced the posters displayed throughout the facility.

Subsection (b):

Pennsylvania Department of Corrections has entered into an agreement with Pennsylvania State Police (PSP) in which PSP receives PREA reports by mail as a 3rd party reporter. This information is noted on the various PREA posters, in the daily announcement, in the handouts given to reentrants, and the address is noted on the public website.

Reentrants consistently noted PSP as a means of reporting sexual abuse and sexual harassment. Additionally, staff interviewed also noted PSP as an outside resource for reporting.

Subsection (c)

BCC-ADM 008 further directs staff to accept reports made verbally, in writing, anonymously and from third parties and requires staff to document any verbal report on a DC-121 and notify the Facility Director/designee of the report. Staff confirmed this requirement and further explained their next steps in documenting the verbal report on a DC-121, ensuring reentrant safety, and forwarding the report to supervisory staff and BCC-MOC at Central Office. During the Pre-Audit, two PREA incident reports were submitted, confirming documentation, notification, and investigation.

Subsection (d)

Per policy, staff may privately report reentrant sexual abuse and sexual harassment incidents by writing a letter to PSP. PREA notices also outline methods of reporting for staff which include, verbal or written report to the Center Director/designee/or PCM, or written report to

PSP. In addition to PSP, staff identified the Facility Director or BCC-MOC as entities they were comfortable and confident in reporting incidents of sexual abuse and sexual harassment of reentrants.

Posters displayed in the facility also advertise PACrimestoppers.com, a website to anonymously report criminal activity. Although not intended to receive PREA allegations, this is another outside resource in which reentrants and staff could potentially anonymously report PREA allegations. This site is linked to the Pennsylvania State Police who is designated the third party reporter.

Methods of reporting is a topic covered in 2017 and 2018 annual PREA training for staff. However, when asked how staff could report sexual abuse and sexual harassment of reentrants, some staff still referenced the PREA hotline/phone number or a website. The PREA tip line call center was discontinued after one year in service in 2015. This is no longer an option for reporting and is not presented as an option at Harrisburg CCC through handouts, brochures, or verbal announcements. Additionally, the crimestoppers website is not intended for PREA reports and the website, tipsubmit.com is no longer a supported software. Further, four of the twenty reentrants mentioned a phone number as an option to report sexual abuse and sexual harassment, but furthered they would check the posters for the number. It should be noted, posters displayed at Harrisburg did not include a phone number to report sexual abuse or sexual harassment.

Corrective Action: None

115.252	Exhaustion of administrative remedies
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 518 358">Evidence Reviewed:</p> <ol data-bbox="252 369 1460 1086" style="list-style-type: none"> <li data-bbox="252 369 598 403">1. Pre-Audit Questionnaire <li data-bbox="252 459 1460 750">2. Policy and Procedure BCC-ADM 003, Community Corrections Resident Grievances Policy and Procedures Manual Section 1 - Grievance Reporting BCC-ADM 003, Community Corrections Resident Grievances Policy and Procedures Manual Section 2 - Grievance Processing and Response BCC-ADM 003, Community Corrections Resident Grievances Policy and Procedures Manual Section 3 - Grievance Appeals <li data-bbox="252 795 438 828">3. Documents <li data-bbox="252 884 518 996">4. Interviews Random staff Random Reentrants <li data-bbox="252 1052 446 1086">5. Facility Tour <p data-bbox="252 1131 375 1164">Findings:</p> <p data-bbox="252 1220 1484 1780">According to Department policy BCC-ADM 003, every resident in community corrections has access to a formal procedure in which to seek resolution for a problem or area of concern. For every issue, there is a procedure in place to review the problem or concern and provides a process for appeal. According to BCC-ADM 003, Section 1, Section 2, and Section 3, Community Corrections Resident Grievances Policy and Procedures Manual, if a grievance is submitted which alleges sexual abuse or sexual harassment by a staff or resident, the allegation will not be addressed through the Resident Grievance System, but the Grievance Officer will reject the grievance and immediately and verbally refer the allegation to the Bureau of Community Corrections - Management Operations Center (BCC-MOC). The Grievance Officer is prohibited from investigating the PREA complaint, unless directed to do so by BCC-MOC. The Grievance Officer subsequently provides notice to the reentrant that the grievance was rejected. All rejections are documented. During the past year, Harrisburg BCC has not received a grievance which alleged sexual abuse or sexual harassment.</p> <p data-bbox="252 1825 1476 1982">During the interviews with random staff and random reentrants, no one indicated that filing a grievance is a mechanism to report sexual abuse or sexual harassment by staff or reentrants. During the facility tour, it was noted there is a locked grievance box and a separate locked PREA box in the main entrance.</p> <p data-bbox="252 2038 566 2072">Corrective Action: None</p>

115.253	Resident access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual, Section 4 - Responding to a Report of Sexual Abuse 3. Documents "If you are the Reported Victim of Sexual Abuse" form and service acknowledgement Sexual Abuse Awareness Informational handout - Spanish Bureau of Community Corrections PREA Report - Sexual Abuse (blank) PREA- Rape Crisis Center Letter of Agreement 4. Interviews Random staff Random Reentrants YWCA Greater Harrisburg Director of Violence Intervention and Prevention Services <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, it is the responsibility of the PREA Compliance Manager to coordinate victim services. Additionally, facilities are to post notifications about available services using the form titled "If you are the Reported Victim of Sexual Abuse", which includes the name and address for local service.</p> <p>Reentrants have access to support and advocacy services through the YWCA Greater Harrisburg and the Pennsylvania Coalition Against Rape (PCAR). If a reentrant reports being a victim of sexual abuse, they are referred to the YWCA Greater Harrisburg and are required to accept or decline services in writing. Reentrants are provided resource information at the time of disclosure, as well as at intake to Harrisburg CCC and provided contact information continuously through posters displayed throughout the facility. Further, when an incident of sexual abuse is first reported the staff completing the initial written report is required to include if the victim desired to speak with a rape crisis counselor or declined services.</p> <p>Most reentrants interviewed were aware that support services are available. They were unable to provide the name of an agency, but knew where to locate the information.</p> <p>Subsection (b): Support services are available to reentrants in the community. Most reentrants have their own cell phones and are routinely in the community rather than inside the facility. Reentrants are able to access support services through the assistance of DOC staff or can access the services on their own. Because reentrants are in the community essentially unmonitored,</p>

there is the option to receive services confidentially. An interview with the Director of Violence Intervention and Prevention Services at the YWCA Greater Harrisburg confirmed that reentrants are referred by DOC and that services are provided confidentially. Reentrants are advised by the YWCA Greater Harrisburg when confidentiality would be broken, such as a report by a reentrant of criminal activity, self harm or child abuse.

Staff and reentrants were aware of support services but could not identify YWCA Greater Harrisburg as a resource or a resource financially supported by DOC if the abuse occurred in a DOC facility. Some reentrants indicated they would check the posters displayed around the facility to get more information. Given the frequency at which reentrants report being the victims of abuse, It is recommended that staff responsible for ensuring reentrants receive these services are aware of their responsibility to refer reentrant to this particular provider.

Subsection (c):

A copy of the Letter of agreement between Harrisburg CCC and the Violence Intervention and Prevention Program Services at the YWCA Greater Harrisburg was submitted during the pre-audit. Included in the MOU are services the program agrees to provide, which includes "confidential support services to the victim" by phone, mail, or in person. Support services are also available through the YWCA Greater Harrisburg at Harrisburg CCC, depending on the need of the reentrant's at the facility.

The interview with the Director of Violence Intervention and Prevention Services at the YWCA Greater Harrisburg confirmed the presence of the Letter of Agreement with Harrisburg CCC. She confirmed the various support services provided by the YWCA Greater Harrisburg such as crisis intervention, advocacy, and accompanying reentrant to the forensic examination. the YWCA Greater Harrisburg reviews the limitations of confidentiality prior to services being received.

Corrective Action: None

115.254	Third party reporting
	<p data-bbox="252 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 507 360">Evidence Reviewed</p> <ol data-bbox="252 371 1409 1128" style="list-style-type: none"> <li data-bbox="252 371 600 405">1. Pre-Audit Questionnaire <li data-bbox="252 456 1409 573">2. Policy and Procedure BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual, Section 3 - Reporting Sexual Abuse and Sexual Harassment <li data-bbox="252 629 994 831">3. Documents Screen shot of PA DOC Public Website Viewed current PA DOC Website PREA Notice in English and Spanish Sexual Abuse Awareness Informational handout Spanish <li data-bbox="252 887 587 1043">4. Interviews Random staff Random Reentrants Pennsylvania State Police <li data-bbox="252 1099 520 1133">5. Tour of the facility <p data-bbox="252 1189 371 1223">Findings:</p> <p data-bbox="252 1267 1441 1469">According to BCC-ADM 008, anyone can make a private report of sexual abuse or sexual harassment on behalf of a reentrant by writing to the Pennsylvania State Police (PSP). This information is communicated to reentrants through posters displayed at Harrisburg CCC, through reentrant education handouts, and on the Pennsylvania Department of Corrections public website.</p> <p data-bbox="252 1525 1457 1727">For the purpose of this audit, a letter was sent to PSP at the address provided on the handouts and website. Approximately two weeks later a phone call was received from the Pennsylvania State Police Bureau of Criminal Investigations confirming receipt of the letter. The PSP staff confirmed that PSP is a third party reporter and all reports received are immediately scanned and sent to the Pennsylvania DOC PREA Coordinator for investigation.</p> <p data-bbox="252 1783 1485 1984">Staff and reentrants interviewed acknowledged the ability for a third party to report allegations of sexual abuse or sexual harassment on behalf of the reentrant or the option to contact Pennsylvania State Police directly. During interviews, it was common for staff and reentrants to reference the PREA posters or signs displayed throughout the facility when discussing ways to report.</p> <p data-bbox="252 2040 563 2074">Corrective Action: None</p>

115.261	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment BCC-ADM 003 Community Corrections Resident Grievances Procedures Manual Section 5 - Investigations and Retaliation Monitoring 3. Documents DC-121 Part 3-BCC Employee Report of Incident (blank) PREA Report (blank and completed) PREA incident tracking and report (completed) Bureau of Community Corrections First Responder Checklist (blank and completed from York CCC) 4. Interviews Random staff PREA Coordinator Facility Director Lead Investigator <p>Findings:</p> <p>Subsection (a): Agency policy BCC-ADM 008, requires all staff, contractors, and volunteers to report immediately any knowledge, suspicion, or information regarding an alleged incident of sexual abuse or sexual harassment to the facility director or designee where the incident occurred, report any retaliation against reentrants or staff who reported, or any staff neglect or violation of responsibilities that may have contributed to a sexual abuse or harassment incident or retaliation. According to staff who were interviewed, all staff were aware of their requirement to report knowledge, suspicion, or information regarding an incident of sexual abuse or harassment, retaliation, or staff neglect. Staff indicated they would immediately report to the director and if she was not available the lieutenant or BCC-MOC. Additionally, if retaliation is suspected, the Facility Director and Regional Director or designees are immediately notified to ensure appropriate steps are taken to protect the individual and remedy retaliation.</p> <p>The First Responder Checklist was developed to assist staff in responding appropriately to incidents of sexual abuse. The first Responder Checklist includes a checkbox to notify the Center Director/designee and further directs the staff not to question any victim, witness, or assailant without direction from BCC-MOC. This requirement was consistently acknowledged by random staff.</p>

Subsection (b):

Agency policy prohibits staff, contractors, and volunteers from revealing information related to the sexual abuse report to anyone except those specifically involved in treatment, investigation, or other security and management decisions. Staff interviewed were aware of their responsibility and were clear in the notification chain of command and their first responder duties. Staff acknowledged completing paperwork which is then disseminated to the BCC-MOC. At no time did staff indicate they would share information with other staff or reentrants.

Subsection (c):

According to a BCC-ADM 008, medical and mental health practitioners are required to report sexual abuse and to inform reentrants of the practitioner's duty to report and the limitations of confidentiality at the initiation of services. Harrisburg CCC does not employ medical and mental health on site, but services are received in the community. Service providers inform reentrants of the limitations of confidentiality.

Subsection (D):

BCC-ADM 008 states if the alleged victim is under the age of 18, or considered a vulnerable adult under state or local "Vulnerable Persons" statute, the facility shall report the allegation to the designated state or local services agency under applicable mandatory reporting laws. According to the PREA Coordinator, Pennsylvania does not have a vulnerable adult statute. Only two facilities house young adults, Pine Grove and Muncy. Harrisburg does not house any reentrant under the age of 18.

Subsection (e):

According to policy, when the Facility Director or designee learns of an allegation of sexual abuse or sexual harassment, including third party and anonymous reports, one of the requirements is to notify BCC-MOC, the central unit assigned to investigate allegations of sexual abuse or sexual harassment. The Facility Director and Investigator confirmed that all PREA allegations are reported to BCC-MOC and investigated.

Corrective Action: None

115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment 3. Documents Report documenting response to protect the victim Bureau of Community Corrections First Responder Checklist 4. Interviews Random staff Agency Head Facility Director PREA Compliance Manager (PCM) <p>Findings:</p> <p>Harrisburg CCC follows policy BCC-ADM 008 Section 3, in that when an employee learns that a reentrant is subject to a substantial risk of imminent sexual abuse, the employee shall take immediate action to protect the reentrant and verbally contact the Facility Director/designee for additional direction. The Secretary of Pennsylvania DOC was interviewed on 9/17/17 and confirmed that inmates/reentrants are immediately separated when there is imminent risk of sexual abuse. Ways to accomplish this are to segregate the alleged perpetrator, move the alleged victim or perpetrator to another housing unit or facility within the region. According to the PCM, when there is concern for reentrant sexual safety, steps are taken to separate the individuals by housing them in different rooms or different wings of the building. According to staff interviewed, should they become aware of or suspect a reentrant is at substantial risk of sexual abuse, they would immediately separate the individuals and report the information directly to the Facility Director, Lieutenant, or BCC-MOC, according to chain of command and take further direction from supervisory staff. The first responder is expected to first ensure the alleged victim is in a safe location, such as another room on the other side of the building. A report documenting Harrisburg CCC's response to a sexual harassment incident, confirmed the practice in that the two reentrants involved in the incident were separated and housed on different sided of the building. Reentrants on A Side do not have access to the housing area of B Side.</p> <p>Corrective Action: None</p>

115.263	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection 3. Documents BCC- PREA Report - Sexual Abuse (Blank) Notification email to another facility from Harrisburg CCC BCC PREA Report - Sexual Abuse to another facility from Harrisburg CCC Notification from another facility to Harrisburg CCC 121 from other facility to Harrisburg CCC and supporting documents - Notification of Sexual Abuse Allegation to another Facility DC-121 Part 3 completed by RNS DC-121 Part 3 completed by PSA Mental Health Referral Form Informed Consents Post Sexual Assault Interview 4. Interviews Facility Director Agency Head Random Staff 5. Tour of the Facility <p>Findings:</p> <p>Subsection (a) & (b): According to BCC-ADM 008, upon receiving an allegation that a reentrant was sexually abused while confined at another facility the Facility Director/designee documents the receipt of the allegations utilizing the DC-121 Part 3- BCC and verbally notifies the BCC-MOC without delay. The BCC-MOC prepares the PREA-Report -Sexual Abuse and forwards a copy electronically to the affected facility. Additionally, the Bureau Director makes initial contact with the Facility Director of the affected Facility to coordinate any immediate actions that may need to be taken. A follow up contact is also made to make the formal notification to the affected facility within 72 hours of the report.</p> <p>Harrisburg CCC had one allegation in June 2017 in which a reentrant reported being the victim of sexual abuse at another PA DOC facility. Email notifications and reports were</p>

submitted during the pre-audit. According to the documentation received, notifications followed policy and were made within 72 hours.

Subsection (c):

Policy BCC-ADM 008 requires the PREA Compliance Manager to maintain an electronic file for each PREA Report - Sexual Abuse and any electronic correspondence associated with its transmission. Based on the documents provided and the onsite visit, PREA Reports - Sexual Abuse are completed and housed electronically as well as supporting documentation and routing information.

Subsection (d):

According to BCC-ADM 008, any allegation of sexual abuse or sexual harassment shall be reported to BCC-MOC. Staff interviews determined that all allegations are immediately referred to the BCC-MOC who assigns a case number and investigator.

Corrective Action: None

115.264	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 24 - BCC Evidence Collection 3. Documents BCC- PREA Report - Sexual Abuse (Blank) If you are the Reported Victim of Sexual Abuse (blank form) BCC First Responder Checklist 4. Interviews Random Staff <p>Findings:</p> <p>Subsection (a): First responder duties are outlined in BCC-ADM 008, Section 4 and requires that upon Learning of an allegation that a reentrant was sexually abused, the first member to respond shall take immediate action. Immediate action includes: (a) escort the alleged victim to a safe location away from others and (b) preserve and protect any possible crime scene as outlined in Department policy 8.3.1, Community Corrections Security, Section 24 until appropriate steps can be taken.</p> <p>8.3.1. Section 24 includes Crime Scene Control which follows the requirements in 28 C.F.R S 115.221[a]. This policy states that "Crime Scene preservation is of primary concern" and "all people should be cleared from the suspected crime. The area shall be sectioned off and secured when possible. A security team member shall be posted a the entrance to the crime scene and maintain a log of activity."</p> <p>Additionally, BCC-ADM 008 states: if the incident occurred within 96 hours of the reporting, request that the alleged victim not take any actions that could destroy physical evidence, including , as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking drinking or eating.</p> <p>Further BCC-ADM 008 directs staff to contact BCC-MOC and follow direction provided. The BCC-MOC, according to policy, will assess the situation and advise if it is appropriate to ensure the preservation of physical evidence contained on the alleged abuser.</p> <p>To assist staff in first responder duties, a BCC First Responder Checklist is utilized and in</p>

accordance with standard 115.264, and includes:

- get the alleged victim to a safe location
- advise the victim that he/she should not shower or otherwise clean him/herself or if the assault was oral not to drink or brush his/her teeth, or otherwise take any action that could damage or destroy evidence
- Keep the victim separated from others
- Contact the BCC-MOC and follow direction given
- Secure the crime scene

According to interviews and the Pre-Audit, only one incident of sexual abuse was reported to have occurred at Harrisburg CCC during the past year. This incident was reported while the reentrant was housed at another facility and therefore, the first responder protocols were not necessary at Harrisburg CCC. Therefore, no reentrants were interviewed for this standard.

Random staff were interviewed and all staff were aware of their responsibility as a first responder and what was expected of a first responder. All staff reported they would separate the alleged victim and abuser and secure the crime scene. This includes requesting the alleged victim and abuser take steps not to destroy physical evidence such as brush teeth, wash, smoke, or urinate. Staff were able to articulate steps and procedures consistent with policy in securing the crime.

Subsection (b):

According to BCC-ADM 008, if the first 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 and then notify security staff. A non-security staff was interviewed regarding first responder responsibilities. She indicated she would follow protocol which includes separating the alleged victim from the alleged abuser, contacting law enforcements and obtaining medical care or follow up care for the victim.

Corrective Action: None

115.265	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a report of Sexual Abuse 3. Documents BCC- PREA Report - Sexual Abuse (Blank) If you are the Reported Victim of Sexual Abuse (blank form) BCC First Responder Checklist Harrisburg CCC Pinnacle Health website 4. Interviews Random Staff Facility Director <p>Findings:</p> <p>BCC-ADM 008 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.</p> <p>The Pre-Audit Questionnaire included a memo from the Center Director to the BCC Director dated April 13, 2018 outlining Harrisburg CCC's coordinated response. This memo documented First Responder duties, Facility Director responsibilities, Emergency Medical Treatment Services and Mental Health Treatment Services at Harrisburg Hospital. The Facility Director acknowledged the coordinated response plan during the interview at Harrisburg CCC. This plan is consistent with policy and procedures as outlined in BCC-ADM 008.</p> <ul style="list-style-type: none"> - First Responder Responsibilities are consistent with the First Responder checklist and consistent with Corrections Monitors verbal report of how they would handle a first responder situation. - The listed Facility Director Responsibilities are consistent with the requirement in the First Responder checklist, including notifications to BCC-MOC, Harrisburg Hospital, and Pennsylvania State Police. Further it is the responsibility of the Facility Director to ensure that documentation is completed. - Letters of Agreement confirm the relationship with Harrisburg Hospital to provide medical care and forensic examinations for reentrants at Harrisburg CCC. While at Harrisburg Hospital, reentrants will be offered mental health evaluation. According to interviews with

Harrisburg Hospital and YWCA Greater Harrisburg staff, Harrisburg Hospital refers patients and works in tandem with the YWCA Greater Harrisburg to provide advocacy, rape crisis services, and on going individual counseling and support. According to the Harrisburg Hospital Pinnacle Health website, survivors of sexual assault who are seen by a sexual assault nurse examiner will be offered crisis intervention, psychological care and support.

Corrective Action: None

115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure None 3. Documents PSCO Interest Arbitration Award, 2014 2016-2019 FOSCEP Agreement SEIU Healthcare Pennsylvania Agreement July 1, 20016 to June 30, 2019 CIVEA Agreement July 1, 2016 to June 30, 2019 AFSCME Mater Memorandum June 1, 2016 to June 30, 2019 SEIU Healthcare Agreement July 1, 2016 to June 30, 2019 dated February 17, 2017 SEIU Local 668 Collective Bargaining Agreement July 1, 2016 to June 30, 2019 dated October 3, 2016 SEIU Local 668 Memorandum of Understanding July 1, 2016 to June 30, 2019 dated October 3, 2016 4. Interviews Agency Head <p>Findings:</p> <p>Subsection (a): Collective Bargaining agreements have been entered since the last audit. Eight agreements were submitted during the Pre-Audit and reviewed. None of the agreements limited the Department's ability to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation, or of a determination of whether and to what extent discipline is warranted.</p> <p>Subsection (b): Agreements are consistent with PREA Standards. Agreements stay silent regarding if a no-contact assignment that is imposed pending the outcome of an investigation is expunged from or retained in the staff's personnel file following a determination that the allegation of sexual abuse is not substantiated. Additionally, the PSCOA Interest Arbitration specifically removes the requirement previously cited in Article 33 Section 20 in which the Commonwealth furnish 24 hours advance written notification if an inmate or patient alleges conduct falling under the Prison Rape Elimination Act of 2003.</p> <p>An interview with the Agency Head on 9/17/17, confirms that the Commonwealth has entered or renewed collective bargaining agreements since 2012 and the agreements allow for the removal of alleged staff sexual abusers from contact with an inmate pending an investigation or a determination of whether and to what extent discipline is warrant. Discipline includes thirty day suspension to termination.</p>

Corrective Action: none

115.267	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring 3. Documents Bureau of Community Corrections Retaliation Monitoring (blank form) If you are the Reported Victim Of Sexual Abuse notice 4. Interviews Random Reentrants Random staff Facility Director/PREA Compliance Manager Agency Head <p>Findings:</p> <p>Subsection (a): According to BCC-ADM Section 5, The Department shall protect all reentrants and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations from retaliation from other reentrants or staff. The PREA Compliance Manager (PCM) is assigned in policy to monitor for retaliation.</p> <p>Since the current PCM has been employed at Harrisburg CCC, there have been no allegations of sexual assault or sexual harassment requiring retaliation monitoring. According to staff interviews, the most recent retaliation monitoring occurred in February 2017. Although by policy the PCM is responsible for monitoring, other staff involved in case management and security and are aware of potential retaliation will watch and report any suspected retaliation to the supervisor.</p> <p>Random staff and reentrants interviewed were aware of their rights to be free from retaliation and knew how to report incidents of retaliation.</p> <p>Subsection (b): BCC-ADM 008 lists the following protections to ensure reentrants and staff are free from retaliation:</p> <ol style="list-style-type: none"> a. administrative and/or criminal investigations b. housing changes or transfers for alleged victims or alleged abusers c. removal of alleged abusers from contact with alleged victims d. emotional support services for reentrants and staff

When retaliation is suspected, the PCM and the Regional Director/designee will immediately take steps to remedy the retaliation and protect the individual. According to interviews, reentrants could be housed on different sides of the building, reentrants could be transferred, and emotional services would be offered. The Facility Director/PCM acknowledged that they would move the alleged abuser and would try not to move the victim, unless requested by the victim.

Subsection (c & e):

BCC-ADM 008 requires the PREA Compliance Manager (PCM) to monitor for 90 days the conduct and treatment of reentrants and staff who reported sexual abuse or reported having suffered sexual abuse or cooperated with a sexual abuse or sexual harassment investigation and expresses a fear of retaliation. Additional monitoring past 90 days can occur if needed.

Bureau of Community Corrections Retaliation Monitoring form is utilized to document monitoring and steps taken by to staff to evaluate whether or not there is a suggestion of possible retaliation. Staff consider disciplinary reports, evaluations, programming, housing assignments and interactions with staff and reentrants when determining if there is possible retaliation. In addition to documenting activities, it acknowledges the extension of the 90 day monitoring period. Staff have the option to decline retaliation monitoring and must affix their signature to the form if refusing.

Subsection (d):

According to BCC-ADM 008, the monitoring of reentrants include meeting with the reentrant bi-weekly to discuss the reentrants progress.

Subsection (f):

BCC-ADM 008 states that the Agency's obligation to monitor retaliation shall terminate if the allegation is unfounded.

Corrective Action: None

115.271	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations 3. Documents Training records MOU between DOC and PSP Harrisburg CCC sexual harassment case data, case review, and notification Email requesting an extension for investigations due to PSP investigation Retaliation Monitoring checklist Employee Report of Incident (x2), Harrisburg sexual abuse allegations, notification to another facility, Informed consent 4. Interviews PREA Investigator <p>Findings:</p> <p>Subsection (a): BCC-ADM 008 requires the Bureau Director/designee to ensure every reported incident/allegation of sexual abuse and sexual harassment of a reentrant is investigated promptly, thoroughly, objectively, and a confidential report is compiled according to 8.3.1 BCC Security Procedures Manual Section 35 - Investigations. All interviewed staff Harrisburg CCC stated they would call BCC-MOC to report an incident of sexual abuse or sexual harassment and complete written documentation in regards to the initial report. According to investigative staff, every incident of sexual abuse or sexual harassment is assigned a case number and an investigator, and is subsequently investigated.</p> <p>Subsection (b): Per 08.03.01, PREA Investigations are conducted by trained Department employees. PREA Investigators for Pennsylvania DOC BCC have received specialized PREA Investigator training. Training rosters were submitted for review and confirmed the training was received by 25 investigators. According to the lead PREA investigator for BCC, he completed all required PREA training as required by the Department, in addition to the specialized investigator training.</p>

Subsection (c):

According to the lead investigator, he considers direct evidence such as DNA (collected outside of DOC), video evidence, log books, paperwork, interviews, and statements from alleged victims, abusers, and witnesses. Investigation reports confirm investigators gather, review, and preserve the evidence.

Subsection (d):

According to BCC-ADM 008, if an incident of sexual abuse or sexual harassment involved criminal behavior, the allegations are referred for criminal investigation through the Pennsylvania State Police (PSP). While the case is being investigated by PSP, the administrative investigation is suspended and the criminal investigation takes precedence. The BCC investigator will coordinate with PSP and the District Attorney's Office to determine when to resume the administrative investigation to avoid interference with the criminal investigation and prosecution. This practice was confirmed by the lead investigator. Additionally, a memo requesting an extension of the investigation due date for three open PREA investigations due to PSP investigation was submitted during the Pre-Audit. This confirms the practice that DOC investigators continue to be peripherally involved in the investigation while PSP has an open case, yet still have a responsibility to complete the administrative investigation.

Subsection (e):

According to BCC-ADM and 08.03.01, the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by a person's status as reentrant or staff. The Department does not require a reentrant to submit to a polygraph examination or other truth telling device as a condition of the investigation into a sexual abuse or sexual harassment allegation. The lead investigator for BCC follows this policy in that victim, suspects, and witnesses are credible until proven otherwise, not based on status as reentrant or staff. Additionally, reentrants are not required to submit to a polygraph examination or other truth telling device as a condition of the investigation.

Subsection (f):

According to the lead investigator, he considers factors such as staff training and staffing levels to determine if these factors contributed to the sexual abuse or sexual harassment. All investigations are thoroughly documented in a written report which includes all evidentiary reports and an investigative summary. A sexual harassment case review from Harrisburg CCC was submitted for a review. This report included a summary of evidence reviewed, a summary of findings including interview summaries, and a defense of the disposition of the investigation.

Subsection (g):

Criminal investigations are documented in a written report. The investigator will coordinate with PSP to provide evidence such as video evidence and log books and will request police reports and other documentary evidence if available. This information will be included in the final administrative written report.

Subsection (h):

According to policy, substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. Additionally, allegations that appear criminal in nature prior to administrative investigation or an incident of sexual abuse, will be referred to PSP for criminal investigation. According to interviews, the determination of whether or not an allegation is

criminal and will be referred for criminal prosecution lies with PSP.

Subsection (i):

According to Section 1 of BCC-ADM 008, all criminal and administrative investigative reports are retained by the Department for as long as the alleged abuser is incarcerated, housed in a facility operated or contracted by the Department, or employed, plus five additional years.

Subsection (j)

According to 08.03.01, the departure of the alleged abuser or victim from employment or control of the facility or agency does not provide a basis for terminating the investigation. According to interviews, the Department will not accept an employee resignation until the investigation is completed. If a reentrant is released from the facility or absconds, the investigators will do their due diligence to contact the reentrant, but the investigation would continue. Investigators have the ability to temporarily close an investigation and when a reentrant is back in compliance from a period of absconding, the case can be re-opened.

Subsection (l):

The Department of Corrections and the Pennsylvania State Police have entered into an MOU which outlines the responsibilities of each agency and the level of cooperation and information sharing. According to the lead investigator, assigned investigators cooperate with the law enforcement agency conducting the criminal investigation and share evidence obtained by DOC. Likewise, PSP will provide DOC with written reports and documentary evidence they obtain during their investigation.

Corrective Action: None

115.272	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations 3. Documents Investigator Training power point slides 4. Interviews PREA Investigator <p>Findings:</p> <p>According to 08.01.03, no standards higher than a preponderance of the evidence shall be imposed in determining whether allegations of sexual abuse or sexual harassment are substantiated. The lead investigator confirmed this is the standard he uses when substantiating allegations of sexual abuse or sexual harassment. Additionally, the specialized training for investigators power point slides confirm this is the standard the Department trains investigators.</p> <p>Corrective Action: None</p>

115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure Bureau of Community Corrections - PREA Procedures Manual Section 1 - Data Collection Bureau of Community Corrections - PREA Procedures Manual Section 8 - Notification to Reentrants 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations 3. Documents PREA Investigation - Reentrant Notification 4. Interviews PREA Investigator PREA Coordinator <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, following the investigation into a reentrants allegation that he or she suffered sexual abuse in a facility operated or contracted by DOC, the PCM at the facility where the reentrant is housed shall inform the reentrant within five business days in writing as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>Subsection (b): According to BCC-ADM 008, if another agency conducted the investigation, the Bureau of Community Corrections (BCC) PREA Investigator will request the relevant information from the investigative agency and forward it to the PCM who will then inform the reentrant if the allegations were determined to be substantiated, unsubstantiated, or unfounded. The lead BCC investigator confirmed he provides reentrants with the disposition of investigations.</p> <p>Subsection (c): According to BCC-ADM 008, following a reentrant's allegation that a staff committed sexual abuse or sexual harassment against the reentrant, the PCM shall inform the reentrant when any of the following occur:</p> <ol style="list-style-type: none"> a. the staff is no longer posted within the reentrants unit b. the staff is no longer employed at the facility c. the agency learns the staff has been criminally charged related to the sexual abuse or sexual harassment within the facility d. the agency learns that the staff has been convicted on a charge related to sexual abuse or sexual harassment within the facility

Subsection (d):

According to BCC-ADM 008, following a reentrant's allegation that a reentrant sexually abused or sexually harassed the reentrant, the PCM is required to inform the alleged victim when:

- a. the agency learns that the alleged abuser has been criminally charged related to sexual abuse or sexual harassment within the facility
- b. the agency learns that the abuser has been convicted on a charge related to the sexual abuse or sexual harassment within the facility

Subsection (e):

According to BCC-ADM 008, notifications to the alleged victim must be in writing. The Bureau of Community Corrections utilizes the PREA Investigation - Reentrant Notification form. This form includes the investigation status, staffing update, and criminal action such as charges have been filed in relation to or the abuser has been convicted of the sexual abuse report. The reentrant signs the form and copies are maintained in the investigation file, per policy BCC-ADM 001.

Subsection (f):

According to BCC-ADM 008, notification shall occur even when the reentrant has been transferred to another facility within the Department of Corrections, however, the Department's obligation to report the results of the investigation or other actions terminate if the reentrant is released from the Department's custody.

According to the lead investigator, he ensures that the reentrant is notified of the investigation outcome. Within the past year, Harrisburg CCC has not housed an alleged victim at their facility which would have required PREA Investigation - Reentrant Notification. Additionally, the Facility Director/PCM acknowledged that reentrants are informed of investigation outcomes in writing.

Corrective Action: None

115.276	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 7 - Disciplinary and Administrative Action 4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 - Standardization of Pre-Disciplinary Conferences 3. Documents 4.1.1-1 Bulletin Section 4 and Section 6 4. Interviews Agency Head PREA Investigator <p>Findings:</p> <p>Subsection (a): BCC-ADM 008, Department employees shall be subject to disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies.</p> <p>Subsection (b): According to Human Resources and Labor Relations Manual 4.1.1, termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>Subsection (c): According to 4.1.1, disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment 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.</p> <p>Subsection (d): According to BCC-ADM 008, all terminations for violations of Department sexual abuse or sexual harassment policies or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies unless the activity was clearly not criminal and to any relevant licensing bodies. Further, resignations in lieu of discharge for employees charged with allegations of sexual abuse shall not be approved unless an exception is granted from the Director, BHR. Those resignations will still be reported and reviewed to determine if the activity is criminal in nature and should be referred to law enforcement.</p>

During the past year, Harrisburg CCC has not had a staff member disciplined for allegations of sexual abuse or sexual harassment. However, the facility does have one staff on suspension pending the investigation of allegations of sexual abuse. This case did appear criminal in nature resulting in a referral to law enforcement.

Interviews confirmed that policy is followed in that disciplinary sanctions for sexual abuse include termination. Additionally, all allegations of sexual abuse are referred to law enforcement for investigation, including if the alleged abuser no longer works for the Department.

Corrective Action: None

115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 7 - Disciplinary and Administrative Action 3. Documents None 4. Interviews Facility Director <p>Findings:</p> <p>Subsection (a): BCC-ADM 008 follows PREA standards in that any contracted employee or volunteer who engages in sexual abuse shall be prohibited from contact with reentrants and if the behavior is criminal in nature, will be reported to law enforcement and applicable licensing bodies. Interviews confirmed that all incidents of sexual abuse by a staff will result in a referral to law enforcement. While incidents of abuse by staff are being investigated, contractors, volunteers, and staff would not be allowed contact with reentrants.</p> <p>Subsection (b): Additionally, according to policy, if a contractor or volunteer violates PREA standards other than sexual abuse, the facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with reentrants.</p> <p>During the past two years, Harrisburg CCC has not employed a contractor or volunteer who engaged in behavior requiring law enforcement notification. According to interviews, any allegations of sexual abuse by a vendor or contractor would result in the individual not being allowed contact with reentrants while the allegations were being investigated. However, volunteers and contractors are escorted by staff while in the building and cameras monitor activity in the group rooms and throughout the facility.</p> <p>Corrective Action: None</p>

115.278	Disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 7 - Disciplinary and Administrative Action DC-ADM 801, Inmate Discipline Procedures Manual Section 7 - Community Corrections 3. Documents Community Corrections - Universal Set of Rules 4. Interviews Facility Director <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, reentrants are subject to disciplinary sanctions according to the formal disciplinary process following an administrative finding that the reentrant engaged in reentrant-on-reentrant sexual abuse or sexual harassment, or following a criminal finding of guilt for reentrant-on-reentrant sexual abuse. Reentrants are expected to follow the Community Corrections - Universal Set of Rules, in which they initial each rule and sign an acknowledgement of these rules. Included in the rules is "5. I will not sexually harass or sexually assault/abuse another person". Failure to comply with these rules will result in disciplinary sanctions according to the formal process in DC-ADM 801, Inmate Discipline Procedures Manual Section 7 - Community Corrections.</p> <p>DC-ADM 801 outlines the sanctioning process related to paroled offenders housed in community corrections in that the process shall be conducted in accordance with the Universal Set of Rules procedures, mutually agreed upon by the Department and the PA Board of Probation and Parole (PBPP). Additionally, DC-ADM 801 states the violation and sanction process related to SIP offenders housed in Community Corrections shall be conducted as follows: a. infractions that do not necessitate a DC-141, Part 1, Misconduct Report, requiring informal, but progressive and standard sanction, shall be addressed in accordance with the Universal Set of Rules (USOR) procedures. In such cases, sanctioning staff in Community Corrections shall act as the designee for the Department's Chief of Treatment. b. Infractions that result in issuance of a DC-141 shall be referred to the Department's Chief of Treatment/designee in the Bureau of Treatment Services (BTS) for sanctioning in accordance with the SIP Sanctioning Matrix.</p> <p>In the past year, Harrisburg CCC reports zero allegations of reentrant-on-reentrant sexual abuse or sexual harassment. In February 2017, an allegation of reentrant-on-reentrant sexual harassment was reported and investigated. The investigation resulted in the allegations being</p>

unsubstantiated, resulting in no formal discipline.

Subsection (b):

According to BCC-ADM 008, disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse, or sexual harassment committed, the reentrant's disciplinary history, and the sanctions imposed upon other reentrants for comparable offenses with similar histories.

Subsection (c):

BCC-ADM 008 further directs the disciplinary process to consider a reentrant's mental disabilities or mental illness when determining what type of sanction, if any, should be imposed.

Subsection (d):

Harrisburg CCC does not offer therapy, counseling, or other interventions at the facility. Reentrants are referred to community providers to receive counseling or other interventions. According to BCC-ADM 008, if the allegation of sexual abuse has been substantiated, the reentrant abuser will be discharged from the facility where the sexual abuse occurred.

Subsection (e):

According to BCC-ADM 008, a reentrant may be discipline for sexual contact with a staff if after a finding that the staff did not consent to such contact.

Subsection (f):

According BCC-ADM 008, a report of sexual abuse or sexual harassment made in good faith, based upon a reasonable believe that the alleged conduct occurred, shall not constitute a false report or lying, even if after investigation the allegation is unable to be substantiated.

Subsection (g):

Pennsylvania Department of Corrections prohibits all sexual activity between reentrants and disciplines reentrants for such activity. However, the Department will not deem the activity to be sexual abuse if it is determined the activity was consensual and not coerced. Rule #9 in the Universal Set of Rules prohibits reentrants from engaging in any sexual acts with other reentrants inside the facility.

Corrective Action: None

115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 4- Responding to a Report of Sexual Abuse 8.1.1, Community Corrections Centers Procedures Manual Section 5 - Resident Procedures UPMC Pinnacle Health Harrisburg Hospital website 3. Documents Victim of Sexual Abuse services offered PREA-Rape Crisis Center Letter of Agreement between Harrisburg CCC and YWCA Greater Harrisburg dated October 17, 2014 PREA Safe/Sane Letter of Agreement between Harrisburg CCC and Harrisburg Hospital dated March 24, 2015 4. Interviews Random Staff/first responders Harrisburg Hospital SAFE Program Manager YMCA Greater Harrisburg program Director <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, alleged victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. These services are determined by medical and mental health practitioners. Harrisburg CCC does not employ medical and mental health practitioners on site and rely on community agencies to provide these services.</p> <p>On October 17, 2014, Harrisburg CCC entered into an agreement with the Violence Intervention and Prevention Program Services at the YWCA Greater Harrisburg to provide crisis intervention, advocacy, and support services to victims of sexual abuse. In a phone interview on May 28, 2018, the director of the program confirmed the existence of the Letter of Agreement between the two agencies. The program offers confidential support services including individual counseling, support groups, crisis response, and accompaniment to forensic medical examinations. Reentrants from Harrisburg CCC are referred for services by facility staff as well as from reentrants directly accessing services on their own.</p> <p>On March 25, 2015, Harrisburg CCC entered into an agreement with the Harrisburg Hospital in which Harrisburg Hospital agreed to provide sexual assault forensic examinations conducted by certified sexual assault nurse examiners. It is agreed that examinations will be provided according to Pennsylvania DOC policy in that an exam will occur within 96 hours of a</p>

sexual abuse incident for all victims. On June 12, 2018, a phone interview with the program manager confirmed the existence of the Letter of Agreement. Reentrants are brought to the hospital by Harrisburg CCC staff when an alleged incident of sexual abuse has occurred. The reentrants are triaged for urgent medical needs and then referred for a sexual assault nurse examination. Harrisburg Hospital SANE is operational 24 hours a day, 7 days a week. If a Sexual Assault Nurse Examiner is not present at the hospital when a reentrant is transported to the hospital, a nurse is on call and will respond to the hospital within one hour. The program manager confirmed Harrisburg Hospital works in conjunction with the YWCA, referring victims for treatment and advocacy services. She was unaware of any SANE referrals from Harrisburg CCC, confirming the facility's assertion that they have not had any sexual assaults on site in the past year.

When an incident of sexual abuse occurs, reentrants are given the form titled "If you are the Reported Victim of Sexual Abuse" which they are asked to respond and sign either accepting or declining a medical examination, mental health evaluation, and rape crisis intervention. If a reentrant accepts medical care, the reentrant will be transported to Harrisburg hospital where the reentrant will receive emergency medical care and a sexual assault examination. At the hospital, reentrants will again be offered crisis intervention and mental health care and support through YWCA Greater Harrisburg.

Subsection (b):

When staff learn of an incident of sexual abuse, they immediately take action to protect the victim. This is done by separating the alleged victim from the alleged abuser, preserving the crime scene, and making the appropriate notifications either to the Facility Director or the BCC-MOC. First responders utilize the First Responder Checklist to guide the steps they are required to take and follow directions provided by the Facility Director and BCC-MOC. All staff interviewed were aware of and articulated their responsibilities as first responders.

Subsection (c):

During the sexual assault examination at Harrisburg Hospital, victims of sexual abuse are provided emergency contraception and are treated for sexually transmitted infections. This was confirmed by the interview with the Sexual Assault Forensic Examiner (SAFE) Program manager for UPMC Pinnacle at Harrisburg Hospital. Additionally, the UPMC Pinnacle Health website specific to the SAFE Program informs sexual assault survivors they should expect to be tested and treated for sexually transmitted infections and pregnancy.

Subsection (d):

According to BCC-ADM 008, medical and mental health services for victims of sexual abuse at a DOC facility are provided without financial cost to the alleged victims regardless if the alleged victim provided the name of the abuser or cooperates with the investigation.

Corrective Action: None

115.283 Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

- 1. Pre-Audit Questionnaire

- 2. Policy and Procedure
BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse

- 3. Documents
"If you are the Reported Victim of Sexual Abuse" Attachment 4-C (what to expect) and Attachment 4-E (checklist)
UPMC Pinnacle Health Harrisburg Hospital website

- 4. Interviews
Staff responsible for screening reentrants
Harrisburg Hospital SAFE Program Manager

Findings:

Subsection (a):
According to BCC-ADM 008, the PCM shall coordinate medical and mental health evaluations as appropriate for all reentrants who have been victimized by sexual abuse in any prison, jail, lockup, juvenile facility, or community confinement. Harrisburg CCC does not employ medical and mental health services on site but refers reentrants to community agencies. At Harrisburg CCC, during the first three days at the facility a Corrections Counselor meets with the reentrant to complete the PRAT. If at that time it is determined that the reentrant is a victim of sexual abuse, the Corrections Counselor will refer the reentrant for mental health services in the community. The reentrant has the option to receive services through his insurance, or can chose to be referred by the Department of Corrections who will fund the services. If an abuse incident occurs while a resident at Harrisburg CCC, medical and mental health services are immediately offered and provided by Harrisburg Hospital and the YWCA Greater Harrisburg.

Subsection (b):
The Department will continue to coordinate and refer for sexual assault abuse services, including follow-up, treatment plans, and continued care following release, according to policy BCC-ADM 008. According to a Corrections Counselor, when a reentrant first arrives at Harrisburg CCC and discloses prior victimization, services are offered to the reentrant.

Subsection (c):
All medical and mental health services are provided by community agencies.

Subsection (d) & (e):
Harrisburg CCC does not house female reentrants.

Subsection (f):

According to BCC-ADM 008, medical services and referrals for treatment in the community are coordinated and offered to victims of sexual abuse. This includes testing for sexually transmitted infections at Harrisburg Hospital, as noted by the program Manager and the SAFE program website.

Subsection (g):

According to BCC-ADM 008, treatment services are provided to alleged victims of sexual abuse without financial cost to the victim and regardless of whether or not the name the alleged abuser of or cooperate with the investigation.

Subsection (H):

According to BCC-ADM 008, Harrisburg CCC is required to attempt to coordinate a mental health evaluation of all known reentrant-on-reentrant abuser within 60 days of learning of the abuse history.

During the interview with a Corrections Counselor, when the PRAT is completed and a reentrant is identified as either a victim or abuser of sexual abuse, the reentrant will be offered community mental health programming. Programming can be obtained through the reentrant's insurance or paid for by the Department of Corrections. If an incident of sexual abuse occurs while the reentrant is housed at Harrisburg CCC, reentrants immediately receive medical and mental health services according to first responder responsibilities.

Alleged victims and abusers of sexual abuse are offered "If you are the Reported Victim of Sexual Abuse". This form offers reentrants the opportunity for emergency medical or crisis intervention services and at no cost to the reentrant. These services include a medical examination, mental health evaluation, and rape crisis center. In addition to Harrisburg Hospital, and the YWCA Greater Harrisburg, reentrants are provided the information to contact Pennsylvania Coalition Against Rape (PCAR) and are given the option to receive services through their insurance.

Corrective Action: None

115.286	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 6 - Sexual Abuse Incident Review 3. Documents PREA Sexual Abuse Incident Review PREA Sexual Abuse Incident Review Plan of Action 4. Interviews Lead Investigator Facility Director PREA Coordinator Random Staff <p>Findings:</p> <p>Subsection (a) and (b): According to BCC-ADM 008, at the conclusion of every sexual abuse investigation in which the allegation was substantiation or unsubstantiated, a sexual Abuse Incident Review (SAIR) is conducted within 30 calendar days of the notice of satisfactory completion of the investigation.</p> <p>Subsection (c): BCC-ADM 008 requires the PREA Compliance Manager to co-chair the SAIR committee with the Regional Director. They will determine the composition of the SAIR team, however, at a minimum, policy also requires the following team members:</p> <ul style="list-style-type: none"> - other manager or supervisor - Bureau of Community Correction (BCC) Investigator - facility counselor (presence not authorized for staff on reentrant accusations) - Department PREA Coordinator when necessary. <p>Subsection (d) & (e): BCC-ADM 008 requires the SAIR Committee to utilize all available information and reports to:</p> <ol style="list-style-type: none"> a. consider whether the incident or investigation indicated a need to change policy or practice to better prevent, detect, or respond to sexual abuse b. consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification status, or perceived status, or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility; c. examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable sexual abuse; d. assess the adequacy of staffing levels in that area during different shifts;

- e. assess whether monitoring technology should be deployed or augmented to supplement supervision by staff;
- f. take action necessary to address immediate safety concerns;
- g. utilize the PREA Sexual Abuse Incident Review to prepare a confidential report with findings and recommendations ;
- h. forward the completed report with attachments to the Bureau major and Facility Director.

The SAIR process was described as an open forum to identify what could be done better to prevent similar incidents in the future. The SAIR committee completes the PREA Sexual Abuse Incident Review form as a checklist and documentation of the review. This is a five page standard form which summarizes the PREA incident and outcome of the investigation. The team specifically looks at the use of the PRAT scores and if and how the scores influenced housing decisions and if any subsequent PRATS were conducted. The team reviews at length the alleged victim and alleged abuser history, prior PREA incidents, the physical description of each person, mental health, criminal offense, misconduct history, and group or gang status. Further, the team reviews if and how medical and support services were offered to the alleged victim. Further, law enforcement involvement is discussed, including response to the referral and outcome of any investigation. Staff response to the PREA incident is reviewed. The review includes first responder actions and investigation process. Additionally, steps taken to minimize the risk of retaliation is also an area of discussion.

Upon completion of the SAIR, the PREA Sexual Abuse Incident Review Plan of Action is also completed by the PREA Director and forwarded to the Bureau Major. Deficiencies are identified and a plan of action is developed. It is the responsibility of the Facility Director to ensure the recommendations are implemented by the facility or document the reason for not doing so.

In addition to the SAIR, the Central Office PREA Administrative Review Committee (ARC) reviews the SAIRs to ensure consistent policy compliance and adherence to the PREA standards.

During the past year, an SAIR has not been convened at the Harrisburg CCC. There have not been any investigations stemming from a Harrisburg CCC incident closed prior to the audit. Because of recent staff changes, neither the current lead investigator or the current facility director has participated in an SAIR. Interviews with the Regional Director and the PREA Director confirmed the ARC process.

Corrective Action: None

115.287	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure <ul style="list-style-type: none"> BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 6 - Sexual Abuse Incident Review 3. Documents <ul style="list-style-type: none"> Survey of Sexual Violence State Prison Systems Summary Forms from 2011, 2012, 2013, 2014, 2015 and 2016 Survey of Sexual Victimization Incident Form from 2013 and 2015 Annual PREA Report Submitted for 2013, 2014, 2015, and 2016 Harrisburg PREA Tracking System screen shot Conewago Pottsville PREA Tracking System screen shot Sexual Abuse Incident Review Bureau Action March 27, 2018 and supporting documents from investigation BCC Facility PREA Compliance Report Gaudenzia Philly House December 2017 Initial Report from private contract facility October 13, 2017 Initial Report from ADAPT Treatment June 15, 2017 BCC Facility PREA Compliance Report CEC ADAPPT - 218 September 2016 <p>Findings:</p> <p>Subsection (a):</p> <p>Policy BCC-ADM 008 requires the Bureau of Standards, Audits, and Accreditation (BSAA) to collect accurate, uniform data for every allegation of sexual abuse at facilities under the direct control of the Department of Corrections. It further requires a standardized instrument and set of definitions. It is under the BSAA that the PREA Compliance office is housed. In policy and practice, standard PREA reports generated from the Sexual Abuse Incident Review are forwarded to the PREA Compliance office as well as the Executive Deputy Secretary who has oversight of the office.</p> <p>Subsection (b):</p> <p>According to BCC-ADM 008, annually, the BSAA reviews data collected and aggregates the data annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. BSAA does this by:</p> <ol style="list-style-type: none"> a. identifying problem areas b. taking corrective action on an ongoing basis c. preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole.

During the Sexual Abuse Incident Review problem areas are identified and corrective action is determined and subsequently implemented by the facility. The Administrative Review Committee (ARC) meets monthly to review reports to ensure that there is consistent compliance with policy and adherence to PREA standards.

During the Pre-Audit, Harrisburg CCC submitted examples of the Survey of Sexual Victimization, a US Department of Justice Bureau of Statistics form. The reporting covered incidents from 2013, 2014, and 2015.

Pennsylvania Department of Correction compiles an annual PREA report which summarizes each PREA incident with available data and a comparison of previous year data. Annual Report from 2014, 2015, and 2016 from each institution and community corrections centers of which DOC has oversight was submitted and reviewed for this audit. With every substantiated report, a five page Survey of Sexual Victimization Incident Form was completed. Attached in the Pre-Audit Questionnaire is the PREA report from 2013, 2014, 2015. Further submitted were the Survey of Sexual Victimization Incident Form 2013, 2014, and 2015.

Subsection (c):

According to BCC-ADM 008, Incident-based aggregate data is collected from every private facility the Department contracts with for the confinement of reentrants. Additionally, by policy and confirmed in practice, PA DOC produces an annual PREA report including the number of allegations at each facility, the number of substantiated, unsubstantiated and unfounded investigations, the number of on going investigations, comparison rates from the preceding year to the current report year, and any additional information required by the Survey of Sexual Violence required by the Department of Justice. Survey of Sexual Violence State Prison Systems Summary Forms from 2011, 2012, 2013, 2014, 2015 and 2016 were submitted for review. These forms were completed for each of their respective years.

Subsection (d):

Per BCC-ADM 008, all data is maintained, reviewed and collected as needed from all available incident-based documents including reports, investigation files, and sexual abuse incident reviews.

Subsection (e):

Incidents of sexual abuse and sexual harassment at DOC contracted facilities are investigated by DOC trained PREA investigators and tracked through the Department tracking system. These incidents are reviewed through a Sexual Assault Incident Review and the reports are submitted to the PREA Compliance Division. According to policy, incident-based aggregate data is collected from every private facility the Department contracts with for the confinement of reentrants. Data from the contracted facilities are included in the annual report. Monthly, contracted facilities submit a Bureau of Community Corrections Facility PREA Compliance Report to the Contract Facility Coordinator who places the report into the electronic tracking system.

Subsection (f):

According to policy, the Annual PREA Report is approved by the Secretary, provided to the Department of Justice, and posted on the Department website by June 30. The following PREA Annual Reports were submitted for review and located on the PA DOC public website.

Annual PREA Report Submitted for 2013, 2014, 2015, and 2016. These reports are approved and signed by the Department Secretary.

Corrective Action: None

115.288	Data review for corrective action
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 518 358">Evidence Reviewed:</p> <ol data-bbox="252 369 1460 918" style="list-style-type: none"> <li data-bbox="252 369 598 403">1. Pre-Audit Questionnaire <li data-bbox="252 459 1460 571">2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection <li data-bbox="252 627 845 739">3. Documents PREA Annual Report 2013, 2014, 2015, 2016 PA DOC Public Website <li data-bbox="252 795 486 918">4. Interviews Agency Head PREA Coordinator <p data-bbox="252 974 375 1008">Findings:</p> <p data-bbox="252 1052 1444 1344">Subsection (a): According to BCC-ADM 008, the Bureau of Standards, Audits, and Accreditations (BSAA) is responsible for reviewing data collected and aggregate the data annually in order to assess and improve the effectiveness of the Department's sexual abuse prevention, detection, and response policies, practices and training. This is done by identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole.</p> <p data-bbox="252 1400 1484 1601">The PREA Compliance office is housed under BSAA and is responsible for collecting PREA reports and conducting reviews of all PREA incidents at DOC operated and private contracted facilities. During PREA investigations and subsequent reviews (SAIR, ARC), problem areas are identified and corrective action is developed and implemented. Annually, PREA reports are prepared.</p> <p data-bbox="252 1657 1444 1736">Interviews confirmed that data is compiled and reviewed. During the review process, trends are looked for and a revision in policies, procedures, and training are considered.</p> <p data-bbox="252 1780 1452 1982">Subsection (b): According to BCC-ADM 008, the report shall include a comparison of the current year's data and corrective actions taken to reduce incidents of sexual abuse, sexual harassment, and retaliation with those from prior years, and provide an assessment of the Department's progress in addressing sexual abuse.</p> <p data-bbox="252 2038 1444 2150">The Annual PREA reports from 2013, 2014, 2015, and 2016 were submitted and reviewed. The reports include comparison data from the current and previous year and a summary of corrective action taken. Additionally, the reports consider additional efforts the Department</p>

was making to reduce incidents of sexual abuse, sexual harassment, and retaliation. The corrective action addressed in the reports were Department wide and included action such as the development of a tracking system which not only serves as a data hub, but allows for the identification of trends and issues in facilities, development of a risk assessment tool, improved collaboration of the investigative process intra agency, and creating sexual safety awareness and reporting options.

Subsection (c):

The Annual PREA Reports are reviewed and approved by the Pennsylvania Department of Corrections Secretary. The Annual PREA Report from 2013, 2014, 2015, and 2016 are currently available for review on the public website. Additionally, the Bureau of Justice Statistics - PREA Summary Reports and PREA Audit reports for each facility are published on the DOC public website.

Subsection (d):

BCC-ADM 008, ensures that specific identifying information collected for reporting purposes shall be redacted so that no individual is identifiable. 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. In review of the annual reports, there appears to be no redacted information and no identifiable information is present in the reports.

Corrective Action: None

115.289	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedure BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection 3. Documents PREA Tracking System, Harrisburg CCC Pennsylvania Department of Corrections public Website Screen shot of Pennsylvania Department of Corrections public Website 4. Interviews PREA Coordinator <p>Findings:</p> <p>Subsection (a): The Department is required to securely retain all aggregate PREA data according to BCC-ADM 008. The data is housed on the Department's secure servers using the PREA Tracking System. This system is a locked system with access only to the PREA Director and one other person. A screen shot of the Harrisburg CCC page in the PREA Tracking System indicate a secure site. The information was obtained through the PREA Director's account.</p> <p>Subsection (b): According to BCC-ADM 008, the Department shall make all aggregated sexual abuse data information from facilities under its direct control and contracted facilities, readily available to the public through the Department website, and at a minimum, annually. This information is provided on the Pennsylvania Department of Corrections public website in the form of PREA Annual Reports and Bureau of Justice - PREA Summary Reports.</p> <p>Subsection (c): According to BCC-ADM 008, specific identifying information shall be redacted so that no individual is identifiable. In reviewing Annual PREA Reports on the website for 2013, 2014, 2015, and 2016 no identifying information was made available in the reports.</p> <p>Subsection (d): Additionally, BCC-ADM requires PREA data to be retained for a period of no less than ten years after the date of the initial collection unless federal, state, or local law requires otherwise.</p> <p>Corrective Action: None</p>

115.401	Frequency and scope of audits
	<p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 517 360">Evidence Reviewed:</p> <p data-bbox="252 371 443 405">1. Documents:</p> <p data-bbox="252 416 906 450">Scranton CCC PREA Interim Report April 19, 2018</p> <p data-bbox="252 461 687 495">Pennsylvania DOC public website</p> <p data-bbox="252 506 695 539">Pennsylvania DOC audit schedule</p> <p data-bbox="252 584 373 618">Findings:</p> <p data-bbox="252 674 555 707">Subsection (a) and (b):</p> <p data-bbox="252 719 1481 1043">Pennsylvania DOC is currently in Year 2 of audit cycle 2. PA DOC has a detailed auditing schedule of facilities operated by DOC. According to reports on the PA DOC public website and auditing schedules, each facility operated by DOC was audited during the first three year cycle and have either been audited in cycle 2 or scheduled to be audited in cycle 2. Over one third of the DOC facilities were audited in 2017 however fourteen of the facilities were Secure Correctional Institutions and one was a Community Corrections Center. More than one third of the Community Corrections Centers will be audited in cycle 2 in addition to the Secure Corrections Institutions. Year three audits will be less than one third of all facilities to audit.</p> <p data-bbox="252 1099 453 1133">Subsection (h):</p> <p data-bbox="252 1144 1257 1178">During the on site audit, the auditors had full access to all areas of the facility.</p> <p data-bbox="252 1234 443 1267">Subsection (l):</p> <p data-bbox="252 1279 1481 1391">During the pre-audit, documents and information were requested by the auditor and were received from the facility via email. During the on-site phase of the audit, additional information was requested and received, hard copy and electronically.</p> <p data-bbox="252 1447 459 1480">Subsection (m):</p> <p data-bbox="252 1491 1406 1559">The auditor was allowed to conduct private interviews with reentrants at Harrisburg CCC. Auditors were provided a private office and a private conference room.</p> <p data-bbox="252 1615 453 1648">Subsection (n):</p> <p data-bbox="252 1659 1445 1816">Reentrants were allowed to send confidential correspondence to the auditor. Audit notices were sent to Harrisburg CCC on March 16, 2018 via email and posted prior to the arrival on site of auditors. This auditor received one letter from a reentrant at Harrisburg CCC postmarked March 30, 2018 from Harrisburg.</p> <p data-bbox="252 1872 560 1906">Corrective Action: None</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <p>1. Documents Pennsylvania DOC public website PREA Audit Reports Cycle 1 years 1-3, and Cycle 2 year 1</p> <p>Findings:</p> <p>Subsection (f): PREA Audit Reports are posted on the Pennsylvania DOC public website. Reports can be located based on facility name, or on a link listing all of the reports based on the audit cycle year the audit was completed. Reports are named by facility name and the date the report was completed.</p> <p>Corrective Action: None</p>

Appendix: Provision Findings

115.211 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.211 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities?	yes

115.212 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	yes

115.212 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.212(a)-1 is NO.)	yes

115.212 (c)	Contracting with other entities for the confinement of residents	
	If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na
	In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.)	na

115.213 (a)	Supervision and monitoring	
	Does the agency develop for each facility a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency document for each facility a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the physical layout of each facility in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the resident population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring?	yes

115.213 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	na

115.213 (c)	Supervision and monitoring	
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels?	yes

115.215 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.215 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if less than 50 residents)	yes
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if less than 50 residents)	yes

115.215 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female residents?	yes

115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents 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?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes

115.215 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, 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?	yes

115.215 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.216 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes

	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes

115.216 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.216 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes

115.217 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes

115.217 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes

115.217 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.217 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes

115.217 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes

115.217 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.217 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.217 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.218 (a)	Upgrades to facilities and technology	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012 or since the last PREA audit, whichever is later.)	na

115.218 (b)	Upgrades to facilities and technology	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	yes

115.221 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes

115.221 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes

115.221 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.221 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.221 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.221 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes

115.221 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above).	na

115.222 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that 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?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.222 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).)	yes

115.231 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.231 (b)	Employee training	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes

115.231 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.231 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.232 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.232 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes

115.232 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.233 (a)	Resident education	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes

115.233 (b)	Resident education	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes

115.233 (c)	Resident education	
	Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills?	yes

115.233 (d)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes

115.233 (e)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes

115.234 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes

115.234 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes

115.234 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a).)	yes

115.235 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment?	yes

115.235 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility does not conduct forensic exams.)	na

115.235 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?	yes

115.235 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.)	yes

115.241 (a)	Screening for risk of victimization and abusiveness	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes

115.241 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.241 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.241 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes

115.241 (e)	Screening for risk of victimization and abusiveness	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes

115.241 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.241 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess a resident's risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?	yes

115.241 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.241 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes

115.242 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

115.242 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes

115.242 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes

115.242 (d)	Use of screening information	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.242 (e)	Use of screening information	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes

115.242 (f)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes

115.251 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.251 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes

115.251 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.251 (d)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.252 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na

115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na

115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na

115.252 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	na

115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na

115.252 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na

115.253 (a)	Resident access to outside confidential support services	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes

115.253 (b)	Resident access to outside confidential support services	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.253 (c)	Resident access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.254 (a)	Third party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes

115.261 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.261 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.261 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.261 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

115.261 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.262 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes

115.263 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

115.263 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.263 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.263 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.264 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.264 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.265 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.266 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.267 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.267 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.267 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.267 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes

115.267 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.271 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes

115.271 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes

115.271 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.271 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.271 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.271 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.271 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

115.271 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.271 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.271 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes

115.271 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct and form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes

115.272 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.273 (a)	Reporting to residents	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.273 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.273 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.273 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.273 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes

115.276 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.276 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.276 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) 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?	yes

115.276 (d)	Disciplinary sanctions for staff	
	Are 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, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are 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, reported to: Relevant licensing bodies?	yes

115.277 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.277 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes

115.278 (a)	Disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.278 (b)	Disciplinary sanctions for residents	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes

115.278 (c)	Disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes

115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a condition of access to programming and other benefits?	no

115.278 (e)	Disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.278 (f)	Disciplinary sanctions for residents	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.278 (g)	Disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes

115.282 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.282 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse 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?	yes

115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services 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?	yes

115.283 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, 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?	yes

115.283 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.283 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na

115.283 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	na

115.283 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services 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?	yes

115.283 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes

115.286 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.286 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.286 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.286 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d) (1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.286 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.287 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

115.287 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.287 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.287 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.287 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	yes

115.287 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.288 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.288 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.288 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.288 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

115.289 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes

115.289 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.289 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

115.289 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.	yes

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes