

# PREA Facility Audit Report: Final

**Name of Facility:** SCI Retreat

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 03/12/2018

**Date Final Report Submitted:** 08/14/2018

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"/>
<b>Auditor Full Name as Signed:</b> Jennifer McDermott	<b>Date of Signature:</b> 08/14/2018

AUDITOR INFORMATION	
<b>Auditor name:</b>	McDermott, Jennifer
<b>Address:</b>	
<b>Email:</b>	Jennifer.McDermott@wisconsin.gov
<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	01/10/2018
<b>End Date of On-Site Audit:</b>	01/12/2018

FACILITY INFORMATION	
<b>Facility name:</b>	SCI Retreat
<b>Facility physical address:</b>	660 State Route 11, Hunlock Creek, Pennsylvania - 18621
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	660 State Route 11, Hunlock Creek, - 18621
<b>The facility is:</b>	<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
<b>Facility Type:</b>	<input checked="" type="radio"/> Prison <input type="radio"/> Jail

Primary Contact			
<b>Name:</b>	Stacy Miller	<b>Title:</b>	CCPM
<b>Email Address:</b>	smiller@pa.gov	<b>Telephone Number:</b>	570-735-8754

Warden/Superintendent			
<b>Name:</b>	Vincent Mooney	<b>Title:</b>	Superintendent
<b>Email Address:</b>	vmooney@pa.gov	<b>Telephone Number:</b>	570-735-8754

Facility PREA Compliance Manager			
<b>Name:</b>		<b>Email Address:</b>	
<b>Name:</b>	Stacy Miller	<b>Email Address:</b>	stamiller@pa.gov

Facility Health Service Administrator			
<b>Name:</b>	Pam Smith	<b>Title:</b>	CHCA
<b>Email Address:</b>	pamsmit@pa.gov	<b>Telephone Number:</b>	570-735-8754

Facility Characteristics		
<b>Designed facility capacity:</b>	1104	
<b>Current population of facility:</b>	1089	
<b>Age Range</b>	Adults: 19-94	Youthful Residents:
<b>Facility security level/inmate custody levels:</b>	3	
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	375	

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

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

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	David Radziewicz	<b>Email Address:</b>	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.

### **Overview:**

The Prison Rape Elimination Act (PREA) audit at SCI-Retreat was conducted January 10, 2018, January 11, 2018 and January 12, 2018. Certified PREA auditors Jennifer McDermott (lead Auditor), Kristi Dietz (assistant auditor), Greg Bucholtz (assistant auditor), and Ann Turner conducted the audit. The audit teams are members of a PREA audit consortium between the states of Wisconsin, Pennsylvania, Maryland, and Michigan. The duration period of the consortium is 2017 through 2019. During the on-site portion of the audit, we were accompanied by personnel from Retreat to assist with the audit. Following this entrance meeting, which had consisted of introductions, expectations of the Auditors, and an overview of Retreat, a site review of the facility was conducted in which all areas of the facility were accessible to the auditors. Many staff present at the entrance meeting were also present for the site review, including the Superintendent and PCM. The staff answered all questions and provided clarification, when necessary. I found the staff at all levels to be friendly, accommodating and professional. A total of 36 staff were interviewed. Auditors also conducted informal interviews with random staff during the onsite site review of the facility. Their responses were taken into consideration when reviewing the standards. Staffs representing all three shifts were interviewed. The inmate population at the start of the on-site audit was 1124 (which higher than the number listed above due to the amount of intakes that facility received at time they filled out the pre-audit questionnaire to what is was when we arrived, of these, a total of 48 inmates were interviewed. Auditors also interviewed inmates randomly throughout the onsite review of the facility and took into consideration their responses when reviewing the standards.

On day one of the audit, the Auditor conducted an entrance meeting, reviewed all areas of the facility and began interviews of specialized staff. On the remaining days, the audit team continued to interview additional specialized staff, random staff, random inmates, and special population inmates. The Auditor conducted an exit meeting with the facility administration to discuss preliminary findings and the subsequent audit processes and timeframes. Staff and inmates were made readily available to the audit team at all times for formal and informal interviews. The audit team was provided unimpeded access to all parts of the facility during the on-site review.

### **Pre-Onsite Audit Phase:**

On November 22, 2017, the PREA Audit Notice (in English and Spanish) was posted in the facility over 6 weeks prior to the audit team's arrival. Auditor received photographic evidence via email, the same date, demonstrating the posting of these notices in the housing units in the facility and inmate common areas. The PREA Audit Notices mandated that letters to the Auditor would be handled as confidential correspondence. The Auditor received three letters prior to the on-site visit and one after the on-site visit, from inmates at the designed audit post office box. All four inmates were interviewed during the onsite review (the letter received after was pertaining to a visit the inmate had with one of the auditors, during the on-site phase, regarding a police affidavit from 2015, not pertaining to this audit). The SCI-Retreat

staff provided the completed Pre-Audit Questionnaire (PAQ) along with supporting documents electronically utilizing the On-line Audit System (OAS) preceding the on-site review portion of the audit. Pre-audit preparation by the Auditor included a thorough review of all documentation and materials submitted by the facility along with the data included in the completed Pre- Audit questionnaire. The documentation reviewed included agency policies, procedures, forms, PREA education materials, training curriculum, organizational charts, posters, brochures and other PREA related materials that were provided to demonstrate compliance with the PREA standards.

Prior to the on-site audit, the Auditors conducted a telephone interview, on 12/19/17 with staff from the Victim Resource Center on that provide victim service advocacy to the inmates at SCI-Retreat. The staff indicated that they have provided on-site advocacy services for inmates that have alleged sexual abuse at SCI-Retreat. The Auditor also conducted a telephone interview with Retreat's SANE provider, Todd Burda, MBA, BSN, RN|ACNO|Commonwealth Health from Wilkes-Barre General Hospital on February 02, 2018. He confirmed they were the service providers for SCI-Retreat.

#### On-Site Audit Phase:

During the three days of the on-site audit, the audit team was provided with private rooms in the treatment hallway to conduct confidential interviews with both staff and inmates. Some staff interviews took place in the Administrative area. Requested inmate files were reviewed in the security office area, the requested staff files were reviewed in the human resources area. On the first day of the audit after the entrance meeting, the audit team reviewed most of the facility, the remaining areas were reviewed the third day of the site visit, the areas inside and outside of the fenced area, escorted by the Superintendent, PREA Compliance Manager, PREA Coordinator, PREA Lieutenant, and Deputy Superintendents. Areas that were reviewed included, General Population Units, Diversion Unit, Behavioral Management unit, canteen, Restricted Housing unit, Program Review Committee area, medical health area, staff dining room, commissary, maintenance, laundry room, kitchen, inmate dining room, housing units, outside recreation yard, gym, indoor weight room, chapel, new clothing issue area, visiting room, sallyport, garage, and warehouse. The Auditor spoke informally with staff and inmates during the site review which covered all housing and common areas of the facility, day room areas, programming areas, and shower and toilet areas. Notices of the PREA audit were posted throughout the facility as required by the Auditor. The main corridor in the Main Building had a stenciled PREA Wall that drew one's eyes to where the PREA notices were hung. This area is frequently visited by staff and inmates. During the on-site review of the physical plant, the Auditor observed, the facility configuration, location of cameras, staff supervision of inmates, housing unit layout including inmate cells and shower/toilet areas, strip search areas, placement of posters and PREA informational resources, security monitoring, inmate movement procedures, inmate programming and inmate interaction with staff. An active camera monitoring system was observed by Auditors during site review and entrance to the secured control center/camera room. The Auditor noted that the inmate shower areas throughout the facility were single showers or. Some Housing units had single showers and the Dorm unit had community with a single shower head that one inmate was able to utilize at a time.

The audit team was provided unimpeded access to all parts of the facility and all secure rooms and storage areas in the facility. The Auditor tested the language line, contracted vendor PROPIO LS LLC, to ensure it was operable. The auditor noted on each housing unit locked boxes was available for inmates to submit their grievance/complaints. Designated staff to collect the complaints was responsible for ensuring confidentiality of the contents of the boxes Interviews. The audit team conducted formal interviews with SCI-Retreat staff (40) and inmates (48) totaling 88 individuals over the course of the three day on-site phase of the audit. For the (20) random staff interviewed, Auditors were provided a shift schedule and selected staff from each shift. (20) Targeted staff also completed interviews. They consisted of Superintendent-1, PREA coordinator-1, PREA compliance manager-1, Intermediate or

higher-level facility staff-1, mental health staff-1, Medical staff-1, Human resources staff-1, SAFE and SANE staff-1, Volunteers and contractors who have contact with inmates-2, Investigative staff-1, Staff who perform screening for risk of victimization and abusiveness-2, Staff who supervise inmates in segregated housing-1, Staff on the incident review team-1, Designated staff member charged with monitoring retaliation-1, both security and non-security staff First Responders-3, and Intake staff-1. For both the random inmate and targeted population interviews, the PREA Compliance Manager provided a list of inmates from which a systematic random sampling technique was utilized to select inmates. For the random sample of inmate interviews, a sample was selected from each housing unit. Similarly, a random sample was selected from the lists of targeted inmates to be interviewed. The audit team interviewed 48 inmates in total; 22 random inmate interviews and 26 targeted inmate interviews (Physically Disabled-2, Blind Deaf, Hard of Hearing-1, LEP-1, Cognitive Disability-2, LGBTI-5, Transgender/Intersex-5, Inmates in Segregated Housing for High Risk of Sexual Victimization-0 (no inmates were placed in Restricted Housing for high risk of sexual victimization), Inmates who Reported Sexual Abuse-7, Inmates who Reported Sexual Victimization During Risk Screening-3). Interviews were also completed for the 4 inmates who wrote to the lead PREA auditor prior to the on-site phase of the audit, which are counted under the Random number of inmates or inmates who reported Sexual Victimization. All inmate and staff formal interviews utilized the National PREA Resource Center interview guides for random inmates and staff, and specialized staff.

Staff from each shift was interviewed.

- 1st Shift: 6:00 a.m. to 2:00 p.m.;
- 2nd Shift: 2:00 p.m. to 10:00 p.m.; and
- 3rd Shift 10:00 p.m. to 6:00 a.m.

Overall, the interviews with inmates indicated they are aware of and understand the PREA protections and the agency's zero tolerance policy. Auditors were able to observe two intakes to assure this process is adhered to. Inmates receive written materials at intake (i.e. Inmate Handbooks, PREA handouts, PREA pamphlet for victim service advocacy, etc. that provide detailed information about reporting options for sexual abuse and sexual harassment. Subsequent to intake, inmates are provided more comprehensive education on PREA that includes personal instruction in addition to watching a comprehensive PREA education video. PREA posters are placed in every inmate and staff common areas. Inmates were able to articulate to the audit team during formal and informal interviews how to report a PREA allegation. The Auditor's observation of staff interaction with inmates was appropriate. Interviews with staff indicated they received PREA training and could articulate to the audit team the meaning of the agency's zero tolerance policy. Staff understood their roles and responsibilities to prevent, report, and respond to sexual abuse and sexual harassment. All staff interviewed had a pocket-sized card to refer to regarding their responsibilities.

#### Post-Onsite Audit Phase:

The Auditor requested some further documentation which includes investigations, mental health contact notes, and pictures of some updated information regarding on-site observations. Auditors observed a toilet without any privacy screen while viewing the weight room. Maintenance staff built a privacy wall the following date and sent pictures for verification that it was complete. Housing Unit B's upper shower area had a door missing. This was fixed and a door was placed, which was observed by the auditors. In the Woodshop, the staff and inmate bathroom area, the practitioner around urinal needed to be shortened for a clear line of sight to enhance privacy when using the urinal. Opening the line of sight helps to prevent staff or inmate from inadvertently coming upon someone using the urinal. This was completed and verified with pictures. Housing Unit B/A had no door on their upper tier shower area during site review, but was then placed and Auditors observed this while on site. The abuse hotline that the inmates and staff both believed to be a PREA hotline was updated. The original purpose of this hotline was to

focus on physical abuse by staff and the message initially stated if the inmate needed to make a PREA complaint one should write a letter to the PREA office instead of leaving a message. Although it is not a PREA hotline, the agency recognized they did not want to send the message that PREA may not be abuse and removed the message regarding writing a letter to the PREA Office. Auditor called the number and verified this message was removed. All of these actions were completed by Retreat at only the recommendation of the auditors. None of the observances lead to a Standard not being passed, but was advise on better practices.

## 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.

SCI-Retreat is one of 26 facilities operated under the authority of the Pennsylvania Department of Corrections (PA DOC), opened in January 1988. SCI-Retreat houses adult male inmates 18-83, average age 35. SCI-Retreat consists of 264 Acres, 19 Acres are inside the Perimeter; and 245 Acres are outside the Perimeter, with 107 Acres on the west side of the Susquehanna River. SCI Retreat is a Medium/Maximum to Minimum prison. The pre-audit questionnaire indicated the facility's population was 1089 at time of submission. The agency website reports the capacity is 1125. There were a total of 1124 inmates housed at the facility at the time of the on-site review. The facility has 375 full time employees.

SCI-Retreat has 8 housing units, General Population units, Restricted Housing unit and a Diversion unit. The housing units consist of both cells and dormitory-style housing. One unit has an open bay with partitions that separate the beds into a block style. Most housing units are equipped with toilets in their cell and single showers located at the end of the tiers. Outdoor recreation space is adjacent to the housing area.

Ancillary/service spaces and buildings include a Program Review Committee area, medical health area, staff dining room, barber shop, commissary, maintenance, laundry room, computer room, kitchen, inmate dining room, housing units, outside recreation yard, gym, indoor weight room, chapel, visiting room, sally port, garage, warehouse, and utility plant.

Inmates eligible for a facility job assignment may apply for work on-site. SCI-Retreat has medical and mental health treatment services accessible to inmates for specialty care and all related support services.

Some of the Inmate programs offered at SCI- Retreat includes Academic education (G.E.D), Vocational education (Business Practices, Custodian Maintenance, Electricity/Electronics systems technician, OSHA Safety Certification and Barber Program), and Apprenticeship Programs (Carpenter/Electric/Plumbing/Machine/Paint shops). Also offered are self- help programs, Sex Offender Treatment, Substance Abuse Disorder treatment, Religious and Veterans Program, Reentry, Certified Peer Specialist Groups and Mental Health programs.

SAFE/SANE services are provided for SCI-Retreat inmates at Wilkes-Barre General Hospital. If the SAFE/SANE staff is not on site at the hospital, staff on-call will respond as needed to the Emergency Room if it's after hours.

## 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.

<b>Number of standards exceeded:</b>	0
<b>Number of standards met:</b>	39
<b>Number of standards not met:</b>	0
<b>Not audited at the facility level:</b> Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.	6

### Standards

Number of standards exceeded: 0

Number of standards met: 43

\*Includes three standards audited at the agency level (115.87 Data Collection, 115.88 Data review for corrective action and 115.89 Data storage, publication and destruction) and standard 115.14 Youthful inmates, which SCI Dallas does not house inmates under the age of 18.

Number of standards not met; 0

\*\*115.33 Inmate education

Corrective Action:

1. Update or replace the agency Sexual Assault Awareness Information handout, attachment 2-H specific to the following:

- a. Remove the reference to [www.tipsubmit.com](http://www.tipsubmit.com) to file an anonymous report of sexual abuse, sexual harassment and replace with current information that allows for anonymous inmate reporting.
- b. Remove the asterisk marked comment on the inmate information Sexual Assault Awareness Information handout that reads "\*\* If someone is a known or believed to be LGBTI, it does not mean that they are automatically agreeing to sexual acts."
- c. Provide a revision/effective date on the handout.
- d. Place the agency's policy reference to the handout: Sexual Assault Awareness Information on the handout (top/title area).
- e. Utilize definitions consistent with the PREA Standards:
  - i. Sexual Abuse
  - ii. Sexual Harassment
  - iii. Voyeurism

2. Educate staff and inmates on the revised handout.

a. Provide documentation that demonstrates staff and inmates have been informed and educated on the revision/replacement of the Sexual Assault Awareness Information handout and the information contained within the handout.

\*\*115.41 Screening for risk of victimization and abusiveness.

Corrective Action:

1. Adopt terms and definitions current and consistent with the PREA standards and in training information provided by the National PREA Resource Center for use in agency policy, objective screening instrument, training curriculum and staff user guide.

2. Eliminate compound assessment questions and replace with singular.

3. Develop a training curriculum that informs staff on the importance and means by which to have effective and professional communication with LGBTI inmates. This requires a basic understanding of:

- Sexual orientation;
  - Gender identity;
  - Gender expression;
  - How sex is assigned at birth;
  - Staff's own gaps in knowledge and cultural beliefs;
  - How the above factors may impact the ability to conduct effective interviews and assessments;
4. Request technical assistance from the National PREA Resource Center (PRC) to develop an objective risk screening instrument. The PRC provides technical assistance when awarded at no cost.
5. Establish oversight and monitoring of the WebTAS to assess "glitches" in the system

Number of standard not applicable 0

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.

POST INTERIM CORRECTIVE ACTIONS:

115.33

Following the issuance of the interim report, the PREA audit team coordinated multiple conference calls with the Pennsylvania Department of Corrections (PA DOC) PREA coordinator to discuss the process of revising the agency's Sexual Assault Awareness Informational Handout (Attachment 2-H) that was being utilized at SCI-Retreat. In particular, the auditor requested that "Attachment 2-H" remove the reference to [www.tipsubmit.com](http://www.tipsubmit.com) and replace with current information that permits anonymous inmate reporting, remove the comment that reads "If someone is a known or believed to be LGBTI, it does not mean that they are automatically agreeing to sexual acts," and utilize definitions consistent with the PREA Standards.

In May, 2018, the PA DOC provided the PREA audit team with a revised "Attachment 2-H" that removed

the reference to the tipsubmit website, LGBTI statement, and revised the definitions to reflect those consistent with the PREA Standards. In June, 2018 a bulletin was finalized and signed by the PA DOC Secretary on the changes being made to department policy DC-ADM 008, Section 2, Sexual Abuse/Sexual Harassment Prevention and Training (Attachment 2-H). Additionally, the name of Attachment 2-H was revised and retitled, PREA Intake Handout (Attachment 2-H).

On July 23, 2018, members of the Wisconsin PREA audit team conducted a post-onsite audit at SCI-Retreat to review the completion of the revised Attachment 2-H. During the second on-site audit, 10 inmates were interviewed who were randomly selected from the facility's admission database for June and July, 2018 in order to verify that the revised Attachment 2-H was being distributed to the inmate population. All inmates verified that they had received a copy of the PREA Intake Handout (Attachment 2-H). The auditors also verified that copies of the form were readily available within the intake area.

Based upon the revision to the PA DOC's Attachment 2-H, bulletin revision, and on-site verification of the form's dissemination to inmates, and through inmate interviews, the auditor determines that SCI-Retreat has demonstrated compliance with the provisions of this standard.

115.41

#### POST INTERIM CORRECTIVE ACTIONS:

Following the issuance of the interim report, the PREA audit team coordinated multiple conference calls with the Pennsylvania Department of Corrections (PA DOC) PREA coordinator to discuss the process of revising the PREA risk assessment tool (PRAT) that was being utilized at SCI-Retreat. Upon agreement between the PREA audit team and the Pennsylvania Department of Corrections, a request for technical assistance was issued to the PREA Resource Center. Ms. Bernadette Brown was selected by the PRC as the consultant for the revision of the PRAT.

In coordination with Ms. Brown, the PREA audit team and PA DOC agreed to the recommended changes to the PRAT. A final version of the PRAT was provided to the PREA audit team on May 9, 2018. The PA DOC then conducted five webinar training sessions for agency staff involved with the PRAT on May 23-25, 2018. Training records were also provided by SCI-Retreat to verify that the training had been completed. The revised PRAT was deployed on the PA DOC WebTAS on May 24, 2018. In June, 2018 a bulletin was finalized and signed by the PA DOC Secretary on the changes being made to department policy DC-ADM 008, Section 2, Sexual Abuse/Sexual Harassment Prevention and Training, PREA Risk Assessment Tool (PRAT) (Attachment 2-E).

On July 23, 2018, members of the Wisconsin PREA audit team conducted a post-onsite audit at SCI-Retreat to review the completion of the revised PRAT. During the second on-site audit, a Registered Nurse who completes the initial assessment and a counselor who conducts reassessments were interviewed. Additionally, 10 inmates were interviewed who were randomly selected from the facility's admission database for June and July, 2018 in order to verify that the revised PRAT was being utilized. Similarly, the PRAT's for these inmates were also reviewed on the agency's WebTAS to confirm the use of the revised PRAT. The auditors were also able to observe a PRAT being completed with an inmate and counselor.

Based upon the revision to the PA DOC PRAT, staff training, bulletin revision, and on-site verification of the PRAT's use through WebTAS, staff and inmate interviews, the auditor determines that SCI-Retreat has demonstrated compliance with the provisions of this standard.

## 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.

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008 Section 2 (PREA Procedures Manual) 19 pages</li> <li>c. Policy DC-ADM 008 Section 7 (PREA Procedures Manual) 2 pages</li> <li>d. Policy DC-ADM 008 (PREA Procedures Manual) Glossary of Terms</li> <li>e. Agency Table of Organization</li> <li>f. Agency Mission Statement</li> <li>g. SCI-Retreat Table of Organization</li> <li>h. PREA Resource Center (PRC) List of Certified Auditors</li> <li>i. Inmate Handbook</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. PREA Compliance Manager</li> </ol> </li> <li>3. Site Review Observations <ol style="list-style-type: none"> <li>a. Facility walkthrough</li> <li>b. Signs indicating the name of the PREA Compliance Manager</li> </ol> </li> </ol> <p>Subsection (a):</p> <p>Pennsylvania Department of Corrections policy DC-ADM 008 PREA Procedures Manual Section 2 requires the Department to take appropriate actions to ensure zero tolerance toward all forms of sexual abuse and sexual harassment in order to promote the safety of inmates. It will also implement the PREA Standards to ensure that all aspects of operations work toward preventing, detecting, and responding to such conduct resulting in a safer environment. A glossary of terms is also set forth by the Department in DC-ADM008. A list of terms is provided related to prohibited behaviors of sexual abuse and sexual harassment as defined in the National Standards to Prevent, Detect, and Respond to Prison Rape. Sanctions for those found to have participated in prohibited behaviors is described in DC-ADM 008 PREA Procedures Manual Section 7 (Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) for both staff and inmates. For staff, Section 7 maintains that any employee who violates the Department’s zero tolerance policy by engaging in, failing to report or knowingly condones sexual abuse or sexual harassment of an inmate shall be subject to disciplinary or administrative action up to and including termination. Additionally, terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation are required to be reported to law enforcement agencies, unless the activity was not clearly criminal, and to any relevant licensing bodies. DC-ADM008 Section 7 also discusses in detail the sanctions for inmates who have participated in prohibited behaviors.</p> <p>Subsection (b):</p> <p>The Pennsylvania Department of Corrections has one statewide PREA Coordinator, Mr. David</p>

Radziewicz, who is responsible for PREA compliance for all state correctional institutions and community corrections centers. Policy DC-ADM 008 PREA Procedures Manual Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training), stipulates that the PREA coordinator's sole responsibility is to develop, implement, and oversee the Department's efforts to comply with the federal PREA Standards in all facilities. So 100% of the PREA coordinator's time is allocated to obtaining and maintaining compliance with the federal PREA Standards. This was also confirmed during the Auditor's interview with the PREA coordinator. According to the Department's table of organization, the PREA coordinator reports directly to the Director of the Bureau of Standards, Audits and Accreditation. The Director reports to the Executive Secretary for the Department of Corrections. According to the Auditor's interview with the PREA coordinator, he also meets regularly with the Secretary of the Department of Corrections on all PREA matters.

Subsection (c):

The Corrections Classification and Program Manager (CCPM) at each state facility have been designated as the PREA Compliance Manager (PCM), and have been given sufficient time and authority to coordinate compliance with departmental policies and federal PREA Standards. At SCI-Retreat, the PCM is Stacy Miller. Ms. Miller confirmed during her interview that she had sufficient time and authority to serve as the PCM, in addition to the duties as a CCPM.

Pennsylvania Department of Corrections policy DC-ADM008 PREA Procedures Manual Section 2 also describes in detail the duties of the PREA compliance manager. The organizational chart for SCI-Retreat graphically shows that the CCPM at the facility is also the PCM. At the facility level, Ms. Miller reports directly to the Deputy Superintendent for Centralized Services. At the agency level, the PCM reports to the PREA coordinator who indicated during his interview that he communicates with the PREA compliance managers on a regular basis via telephone, email, video conference, site visits and during an annual 1 ½ day annual conference. This was also confirmed by the PREA compliance manager. Each PCM is also required to submit monthly reports to the PREA coordinator. The Superintendent also indicated during informal discussions during the onsite audit phase that he allows the PCM as much time as needed to manage the facility's compliance with the PREA Standards. Informal discussions with inmates during the walk through of the facility during the onsite audit phase also indicated that they were aware of who the PREA compliance manager was at SCI-Retreat. Signage located in conspicuous locations throughout SCI-Retreat also informed inmates that Ms. Miller was the PCM. The Auditor had staff take a photo of one of the signs that was located in the gymnasium lobby.

Corrective Action: None

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008 Section 2 (PREA Procedures Manual) 19 pages</li> <li>c. Policy BCC-ADM 008 Section 2 (Bureau of Community Corrections PREA Procedures Manual), Prevention and Training, Attachment 2-B</li> <li>d. Commonwealth of Pennsylvania, Department of General Services, Bureau of Procurement (Invitation for Bids) 96 pages</li> <li>e. Contract between the Commonwealth of Pennsylvania and Catholic Social Services of the Diocese of Scranton, Inc., 2 pages</li> <li>f. Contract between the Commonwealth of Pennsylvania and Keystone Correctional Services, Inc., 2 pages</li> <li>g. Contract between the Commonwealth of Pennsylvania and Gaudenzia, Inc., 14 pages</li> <li>h. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of Montgomery, 26 pages</li> <li>i. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of Cambria, 29 pages</li> <li>j. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of Chester, 25 pages</li> <li>k. Pennsylvania Department of Corrections, Bureau of Community Corrections (PREA Contract Compliance Monitoring Report, 2017)</li> <li>l. Armstrong County Jail (2016 PREA audit report)</li> <li>m. Firetree LTD, Conewago Snyder (2016 PREA audit report)</li> <li>n. Gaudenzia First (2016 PREA audit report)</li> <li>o. GEO Group, Inc. Luzerne Treatment Center (2015 PREA audit report)</li> <li>p. Treatment Trends, Inc. Keenan House (2017 PREA audit report)</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> </ol> <p>Subsection (a):  Pennsylvania Department of Corrections policy DC-ADM 008 PREA Procedures Manual Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) requires that the Department include in any new contract or contract renewal for the housing of an inmate with a private entity or other entities, including other government agencies, the obligation to adopt and comply with the PREA Standards and the agency’s policies related to PREA compliance. Additionally, Section 2 maintains that contracted entities shall undergo regular, mandated audits on a three-year basis, as required by the PREA Standards. All contracted entities are expected to have an official PREA audit by a certified Department of Justice (DOJ) PREA auditor once during every three year audit cycle as directed in the PREA Standard.</p> <p>Subsection (b):  Policy DC-ADM 008, Section 2 also stipulates that the Department provide for contract</p>

monitoring to ensure that the contract service provider is complying with the PREA Standards with any new contract or contract renewal. The Department completes a PREA Contract Compliance Monitoring Report during the years in which a PREA audit is not completed. The monitoring report is maintained as an attachment (Attachment 2-B) as part of policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 (Prevention and Training).

Although the Statewide PREA coordinator indicated that no contracts have been renewed since the last PREA audits within the agency in October, 2017, SCI-Retreat provided sample copies of PREA audits during the pre-onsite audit phase that included the following:

Armstrong County Jail (2016 PREA Audit Report);  
Firetree LTD, Conewago Snyder (2016 PREA Audit Report);  
Gaudenzia First (2016 PREA Audit Report);  
GEO Group, Inc. Luzerne Treatment Center (2015 PREA Audit Report);  
Treatment Trends, Inc., Keenan House (2017 PREA Audit Report).

In addition, Department Memorandum of Understandings (MOUs) were reviewed by the Auditor (Cambria County, Chester County, Montgomery County). All MOUs contain PREA language under Section 15 that stipulates that the county must agree to adopt the federal PREA Standards.

An interview with the agency's contract administrator did not occur as the agency was previously audited. However, the Statewide PREA coordinator was interviewed and provided further information regarding the Department's contracting with other entities for the confinement of inmates.

Correction Action: None

115.13	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008, PREA Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) 19 pages</li> <li>c. Policy 6.3.1, Facility Security Procedures Manual, Section 15 (Correctional Officer Staffing System) 12 pages</li> <li>d. Policy 6.3.1, Facility Security Procedures Manual, Section 19 (Managerial Visits/Inspections) 5 pages</li> <li>e. 2017 SCI-Retreat Approved Staffing Survey</li> <li>f. Housing Unit Administration/Management Inspection Sign-In Log Books</li> <li>g. PIDS (Perimeter Intrusion Detection System) Monthly Meeting Minutes</li> <li>h. SCI-Retreat Position Worksheet</li> <li>i. SCI-Retreat Corrections Officer Post Assignment Report and Summary of Security Activities</li> <li>j. Mandatory Overtime Reports for COI</li> <li>k. Shift Commander Reports (Rosters and Overtime Logs: 12/16, 1/17, 4/17, 7/17, 9/17, 10/17)</li> <li>l. Memorandum, Staffing Plan Review (December, 2017)</li> <li>m. Monthly PREA Tour Schedule</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Superintendent</li> <li>b. PREA Coordinator</li> <li>c. PREA Compliance Manager</li> <li>d. Intermediate or Higher-Level Facility Staff</li> <li>e. Random Staff Interviews</li> </ol> </li> </ol> <p>Subsection (a):</p> <p>Pennsylvania Department of Corrections policy DC-ADM 008, PREA Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) requires each facility to develop a staffing plan and address the 11 required elements of this standard. During the onsite audit phase, interviews with the Superintendent, PREA coordinator and PREA compliance manager each confirmed that the 11 required elements are taken into consideration on an annual basis when reviewing the staffing plan. According to the Superintendent, PREA coordinator and PREA compliance manager, SCI-Retreat has not had any judicial findings of inadequacy, any findings of inadequacy from federal investigative agencies, or any findings of inadequacy from internal or external oversight bodies.</p> <p>The Auditor’s review of the staffing plan materials provided by SCI-Retreat was detailed in terms of defining what positions are required to meet minimum staffing levels and what positions are needed to meet the staffing levels at the time of the annual staffing plan review. The “Corrections Officer Post Assignment Report” provides a detailed description of the</p>

security activities for each post within the facility for all three (3) shifts for each hour of the shift, including the number and placement of supervisory staff. Additionally, the "Summary of Security Activities" details all components of the facility's physical plant that is broken down into three (3) distinct categories (Security Control, Essential Services, and Inmate Programs). Each of the categories is then broken down further regarding institutional function and activity.

The security control category includes outside control (e.g., towers, vehicle entrance, perimeter patrol), inside control (e.g., gates, movement control, inside escort), and security support (e.g., inspections, inmate dining, correctional industries). Essential services includes inmate housing (e.g., rover, unit control room), special housing (e.g., RHU, MHU, exercise/showers), and health services (e.g., sick call, outside hospital, medical lobby). Inmate programs includes core programs (e.g., education/programs, treatment services), ancillary programs (e.g., commissary, visiting room, library), and recreation (e.g., yard/recreation, gymnasium, auditorium).

Policy 6.3.1, Facility Security Procedures Manual, Section 15 (Correctional Officer Staffing System) was provided during the pre-onsite audit phase and demonstrates the methodology and tasks required (including the agency head, executive deputy secretary, regional deputy secretary, chief of security, human services, PREA coordinator, and PREA compliance manager), for the calculation of each facility's staffing patterns. The local union is also provided the opportunity to provide input by documenting any concerns and/or suggestions they may have and submitting them to the Major-of-the-Guard for review prior to the annual staffing plan audit.

During every third year, a security staffing survey is conducted by the Department's Central Office Staffing Audit Team. The Central Office Staffing Audit Team reviews seven (7) consecutive days of rosters for all shifts, union agreements that affect staffing, facility written justification of posts being requested, and post orders for any new posts being requested. The Audit Team also conducts interviews with the Superintendent, PREA compliance manager, and a representative of the local union. A walkthrough of the facility is also conducted in an effort to identify any blind-spots or areas where staff or inmates may be isolated, and to determine the need for any technological additions or upgrades.

Auditor interviews with the Superintendent and PREA coordinator confirmed that the PREA compliance manager is an integral component to the staffing plan review, and has the authority to provide input by documenting any concerns and/or suggestions they may have and submitting them to the Major-of-the-Guard for review. Policy 6.3.1, Facility Security Procedures Manual, Section 15 (Correctional Officer Staffing System) also requires the Central Office Staffing Audit Team meet with the PREA compliance manager, and discuss any concerns, questions, and/or suggestions.

The PREA compliance manager also works with facility administration on an annual basis to assess, determine, and document whether adjustments are needed to the staffing plan, deployment of video monitoring systems and other monitoring technologies, and the resources available to the facility in order to ensure adherence to the staffing plan. The Auditor was able to confirm through interviews and the staffing plan documents provided that the PREA compliance manager plays a direct role in both the agency and facility level reviews.

SCI-Retreat had their agency level review in 2017, which was approved in 12/17. The updated approved agency staffing plan for SCI-Retreat was provided during the onsite audit phase, as approval at the agency level was completed after the pre-onsite audit phase. The approved staffing plan indicated 257 required custody positions, with 235 custody positions currently staffed; a difference of 22 positions. Although SCI-Retreat has a capacity of 1,125, the staffing plan was predicated on the average daily population since their last PREA audit in 2015 which is 1,140 inmates according to the information provided during the pre-onsite audit phase.

According to the Auditor's interview with the Superintendent, any reduction in staffing realized by the facility is augmented through the use of voluntary or mandatory overtime in order to comply with the approved staffing plan. This was also supported through a review of 6 months of Shift Commander Reports for all 3 shifts (12/16, 1/17, 4/17, 7/17, 9/17, 10/17).

Subsection (b):

Policy 6.3.1 Facility Security Procedures Manual, Section 15 (Correctional Officer Staffing System) is specific to security staff and requires any deviations from the required staffing plan to be documented. In the past 12 months, SCI-Retreat reported that there have been no deviations from the staffing plan. According to the Auditor's interview with the Superintendent, the staffing plan is fulfilled through either voluntary or mandatory overtime. This was verified through a review of 6 months of SCI-Retreat's Shift Commander Reports for all 3 shifts.

Subsection (c):

Policy 008 PREA Procedures Manual, Section 2 ((Sexual Abuse/Sexual Harassment Prevention and Training) provides the duties of the PREA coordinator and sets forth the requirement of working with each facility on an annual basis regarding their staffing plan. Specifically, the policy states that the PREA coordinator will, "Work with each facility on an annual basis to assess, determine, and document whether adjustments are needed to: the staffing plan, deployment of the video monitoring systems and other monitoring technologies, and the resources the facility has available to commit to ensure adherence to the staffing plan. The statewide PREA Coordinator is also required to review any documentation for non-compliance with the staffing plan. During the onsite audit phase, SCI-Retreat's compliance manager indicated that the annual staffing survey review meeting is attended by the superintendent, PREA coordinator, and representative of the local union. Other staff is also permitted to attend. During the onsite audit phase, an interview with the PREA coordinator confirmed that he participated with the annual reviews at each facility during their scheduled staffing plan meeting.

Subsection (d):

Policy 6.3.1 Facility Security Procedures Manual, Section 19 (Managerial Visits/Inspections) requires that intermediate and higher level personnel conduct and document unannounced rounds of each housing unit once per week including unoccupied areas, and all other major areas of the facility at least once per month. Intermediate and higher level personnel are defined as the facility manager, deputies, majors, intelligence captain, security lieutenant, corrections superintendent's assistant, and the corrections classification program manager (PREA compliance manger). Additionally, policy 6.3.1, Section 19 maintains that staff

members are prohibited from informing anyone that these visits are occurring and if found to be alerting other staff or inmates to the unannounced rounds, will be subject to disciplinary action.

SCI-Retreat provided copies of the housing unit administration/management inspection sign-in logbooks during the pre-onsite audit phase that noted rounds were being conducted on a weekly basis of all housing units on each shift by intermediate and higher level personnel, and monthly documentation of all other major areas of the facility including those outside of the secure perimeter of the facility. Staff that is required to complete and document their rounds includes the Superintendent, Deputy for Facility Management, Deputy for Centralized Services, Major of the Guard, and the Classification Program Manager/PCM. During the onsite audit phase, the Auditor verified that intermediate and higher level personnel were conducting unannounced rounds by reviewing 1 year (2017-2018) of administration/management inspection sign-in logbooks in all housing units and other areas of the facility. The logs showed that intermediate and higher level personnel were completing their rounds at irregular intervals during the week.

Interviews with 14 random staff and informal interviews with housing unit staff during the onsite audit phase facility walkthrough confirmed that unannounced rounds were being conducted. All confirmed that they are prohibited by policy 6.3.1 from notifying other staff. Interviews with intermediate and higher level staff also verified that unannounced rounds were being completed per policy on a weekly basis.

Corrective Action: None

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>STANDARD 115.14- YOUTHFUL INMATES</p> <p>Subsection (a-c)</p> <p>Pennsylvania Department of Corrections policy DC-ADM008 PREA Procedures Manual Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) mandates that, “Upon initial reception to the Department, youthful inmates shall enter into an expedited classification process as outlined in Department policy 11.2.1, “Reception and Classification.” All male youthful inmates shall be transferred to SCI-Pine Grove within 24 hours of reception by the Department, and female youthful inmates under the age of 18 shall immediately be placed into the Youthful Inmate Unit at SCI-Muncy.</p> <p>The Pre-Audit Questionnaire submitted by SCI-Dallas/Retreat reported that inmates under the age of 18 are not housed at the facility. During the on-site review, the Auditor verified through the Department’s DOCNET, Basic Inmate Query that no youthful inmates under the age of 18 were being housed at the facility. Informal interviews with staff in the housing units and with the PREA Compliance Manager confirmed that no youthful inmate is housed at SCI-Dallas/Retreat. No youthful inmates, education and program staff who work with youthful inmates, or staff who supervise youthful inmates were interviewed specific to this PREA Standard.</p>

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008, PREA Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) 19 pages</li> <li>c. Policy DC-ADM 008, PREA Procedures Manual, Section 9 (Working with Transgender and Intersex Inmates) 6 pages</li> <li>d. Policy 6.3.1, Facility Security Procedures Manual, Section 30 (Searches) 32 pages</li> <li>e. Cross-Gender Search Validation Form (Attachment 2-D), Policy DC-ADM 008, PREA Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) 2 pages</li> <li>f. Memo from PREA Compliance Manager, Announcing Female Presence on Housing Units</li> <li>g. Memo from Executive Deputy Secretary to Superintendents on Gender Specific Posts (2015)</li> <li>h. Offender Searches PowerPoint, 47 slides</li> <li>i. Staff In-Service Training Roster for “Contraband and Searches” course</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. Random Inmates</li> <li>c. PREA Lieutenant</li> </ol> </li> <li>3. Site Review Observations <ol style="list-style-type: none"> <li>a. Facility walkthrough</li> </ol> </li> </ol> <p>Subsection (a):  Pennsylvania Department of Corrections policy DC-ADM 008 PREA Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) mandates that staff shall not conduct cross-gender strip searches except under exigent circumstances. Body cavity searches can only be conducted when performed by a physician. During the pre-onsite audit phase, SCI-Retreat reported that in the past 12 months, zero cross-gender strip or cross-gender visual body cavity searches were performed. Interviews conducted during the onsite audit phase with random staff (non-medical) and inmates confirmed that cross-gender strip or cross-gender visual body cavity searches are not allowed except under exigent circumstances and are not being conducted at SCI-Retreat.</p> <p>Subsection (b):  Policy 6.3.1 Facility Security Procedures Manual, Section 30 (Searches) maintains that female staff members may search female, male, transgender, or intersex inmates. Male staff members may search male, transgender, or intersex inmates housed in a male facility. Absent exigent circumstances, male staff members shall not search female, transgender, or intersex inmates housed in a female facility. During the pre-onsite audit phase, SCI-Retreat stated that they do not conduct cross-gender pat-down searches of female inmates as the facility only</p>

houses male inmates. This was confirmed by the Auditor during the onsite audit phase.

Subsection (c):

Policy DC-ADM 008 PREA Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) requires that all cross-gender strip searches be documented on the Cross-Gender Search Validation Form (Attachment 2-D). A copy of the form is then maintained by the security office. During the pre-onsite audit phase, SCI-Retreat stated that they do not conduct cross-gender strip searches of female inmates as the facility only houses male inmates.

Although Department policy 6.3.1 permits female staff to search male inmates, SCI-Retreat reported that no cross-gender strip searches or cross-gender visual body cavity searches by female staff has been conducted during this PREA audit period. During the onsite audit phase, the Auditor confirmed that no cross-gender strip searches or cross-gender visual body cavity searches of male inmates occurred in the past 12 months, as no Cross-Gender Search Validation forms were on file at the facility. This was also confirmed during interviews with 14 random staff, 22 random inmates who all indicated that they were not aware of any female officers conducting cross-gender strip searches. The PREA Lieutenant who was also interviewed stated that no female officers have conducted a strip search at the facility.

Subsection (d):

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

At the agency level, the Department's Executive Deputy Secretary also sent a memorandum (7/15/15) to all DOC Superintendents regarding gender specific posts. A plan of action was developed to remove the viewing capabilities from monitoring stations of cameras that had the potential to violate this PREA Standard (115.15) and provide justification for individual posts that were being requested to be gender specific by Facility Managers. A total of approximately 20 security posts were identified to where staff was either required to be gender specific (if one person post), or where one of the staff members had to be gender specific (if 2 or more staff on post). Examples of agency-wide gender specific posts include visiting room search officer, infirmary/dry cell, and transport and search team (at least one staff gender specific). During the onsite audit phase, the walkthrough of inmate housing, gymnasium, kitchen, programming, and other areas of the facility where inmates would be able to shower, perform bodily functions and change clothing showed that inmates had a great degree of privacy available to them. Privacy was also available in the shower and bathroom areas of E Dormitory's A and B housing units that housed 285 inmates on the first day of the onsite audit phase. During the onsite audit phase, the Auditor also viewed the shower areas in the housing units from the officer control stations that are located on a platform above the first floor in general population to ensure that staff did not have the ability to observe genitalia. The Auditor's view of these areas confirmed that staff did not have the ability to see inside the showers. Interviews conducted with 22 random inmates and 24 targeted inmates also confirmed that staff does not view them shower, perform bodily functions, or change clothes except during routine cell checks.

Policy also requires that staff of the opposite gender announce their presence when entering an inmate housing unit when either, a) the status quo of the gender supervision on a housing unit changes from exclusively same gender, to mixed or cross-gender supervision, or b) when

an opposite gender staff member is entering a housing unit and it is unknown to him/her whether any other opposite gender staff are present. The announcement is required for both custody and non-custody staff. SCI-Retreat also provided a memorandum addressed to staff from the PREA compliance manager that provide guidelines for female staff to announce their presence when entering a housing unit.

During the onsite audit phase, the Auditor did observe that either female staff made the cross-gender announcement when entering into the inmate housing units or the officer working control did. Approximately 85% of the inmates who were randomly interviewed indicated that female staff consistently announced their presence when entering the housing units. However, a small percentage did state that the announcement occurs occasionally. Custody staff that was randomly interviewed (14) stated that the announcement is consistently being completed by either the female staff member or by the officer in the control station on the unit.

Subsection (e):

Policy DC-ADM 008 PREA Procedures Manual, Section 9 (Working with Transgender and Intersex Inmates) prohibits the search or physical examination of a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined by conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

During the pre-onsite audit phase, SCI-Retreat reported zero such searches occurring in the past 12 months. A total of five (5) transgender inmates who were interviewed during the onsite audit phase confirmed that they have not been searched for the sole purpose of determining their genital status. Interviews with 14 random staff also confirmed that Department policy (DC-ADM 008, Section 9) prohibits them from searching a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Additionally, interviews with two (2) staff that perform screening for the risk of sexual victimization and one (1) intake worker also verified that inmates identifying as transgender or intersex are not searched to solely determine genital status.

Subsection (f):

Policy DC-ADM 008 PREA Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) requires that staff be trained in how to conduct cross-gender pat searches, and in searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. During the pre-onsite audit phase, SCI-Retreat reported 100 percent of staff has received training on conducting cross-gender pat-down searches, and searches of transgender and intersex inmates.

A PowerPoint presentation was also provided as validation of the training materials, as were staff in-service training rosters for the course titled "Offender Searches." A review of SCI-Retreat in-service records for 2017 confirmed that all staff in work status had been trained. The Auditor reviewed the training curriculum "Offender Searches" that was developed by the Department's Training Academy during the pre-onsite audit and found it to be appropriate and consistent with national standards for conducting inmate searches. The 14 random interviews with staff indicated that they were all trained within the past 12 months, confirming the staff in-service training rosters provided.

Corrective Action: None



115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents       <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008 Section 2, PREA Procedures Manual, (Sexual Abuse/Sexual Harassment Prevention and Training) 19 pages</li> <li>c. Policy DC-ADM 006 Section 1, Reasonable Accommodations for Inmates with Disabilities Procedures Manual (General Procedures)</li> <li>d. Policy DC-ADM 006 Section 2, Reasonable Accommodations for Inmates with Disabilities Procedures Manual (Accommodations)</li> <li>e. Policy DC-ADM 006 Section 3, Reasonable Accommodations for Inmates with Disabilities Procedures Manual (Specific Disabilities)</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Staff Interpreter (Spanish)</li> <li>c. Inmates with a Physical Disability (2)</li> <li>d. Inmates with a Cognitive Disability (2)</li> <li>e. Inmates who are Blind, Deaf, or Hard of Hearing (1)</li> <li>f. Inmates who are LEP (1)</li> </ol> </li> <li>3. Site Review Observations       <ol style="list-style-type: none"> <li>a. PREA signage throughout the facility (English and Spanish)</li> <li>b. Test telephone call to PROPIO language services contractor</li> </ol> </li> </ol> <p>Subsection (a):</p> <p>Pennsylvania Department of Corrections policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) provides for the access to information for Special Populations. Policy DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Procedures Manual Section 1 (General Procedures), DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Procedures Manual Section 2 (Accommodations), and DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Procedures Manual Section 3 (Specific Disabilities) also outline the Department’s approach to providing services to inmates with disabilities. In effect, these policies maintain that an inmate will not be denied services solely for reason of their disability. During the onsite audit phase, interviews were conducted with two (2) inmates identified with a physical disability, two (2) with a cognitive disability, one (1) which is hard of hearing, and one (1) with limited English proficiency. Each indicated that they are provided with access to facility services and are provided with material on their rights to be free from sexual abuse and sexual harassment, as well as information on how to report sexual abuse and sexual harassment.</p> <p>DC-ADM 008 PREA Procedures Manual Section 2 provides that the agency will ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department’s efforts to prevent, detect, and respond to sexual abuse and sexual</p>

harassment. Written materials are required to either be delivered in alternative formats that accommodate an inmate's disability or the information be delivered through alternative methods, such as reading it to the inmate or communicating through an interpreter, which ensures the understanding of the PREA-related material.

Although the current audit of SCI-Retreat did not include an interview with the Department's agency head (previously completed in 2017), the Secretary indicated that the Department maintains materials in Spanish and braille. A braille shop is operational at the agency's female prison. The state also maintains a contract for a sign language interpreter and a TTY system available for deaf and hard of hearing inmates and translators for PREA related matters.

Subsection (b):

For inmates who are limited English proficient, the Department requires facilities to take reasonable steps to ensure access to the efforts to prevent, detect, and respond to sexual abuse, including steps to provide qualified interpreters. It is the PREA compliance manager's responsibility to ensure that only staff members or qualified contractors that can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, provide translation for inmates. If a multi-lingual staff member is not available, then the current contracted translation service (PROPIO LS LLC) must be utilized.

Subsection (c):

Department policy also requires that facilities not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate's safety, the performance of first response duties or the investigation of the inmate's allegations. Justification for any use of an inmate interpreter must be documented.

Although the Agency Head was not interviewed during the audit of SCI-Retreat, notes from an earlier interview indicated that the Department of Corrections has a contract with a sign language interpreter, as well as access to PREA resources in braille to ensure equal opportunity and participation for inmates with disabilities to prevent, detect, and respond to sexual abuse and sexual harassment. One (1) inmate with limited English proficiency was interviewed with the assistance of an interpreter during the onsite phase of the PREA audit at SCI-Retreat. Additionally, one (1) inmate who was hearing impaired, two (2) with a physical disability, and two (2) inmates identified with cognitive disabilities were interviewed as well. Each indicated that that they had no problems reading the PREA information (e.g., handouts, video, posters) made available at the facility and knew how to access interpretation services via staff. Each was also able to clearly articulate how they could report sexual abuse or sexual harassment and were aware of their rights pursuant to the Prison Rape Elimination Act.

The Auditor's interview with SCI-Retreat's PREA compliance manager verified the information provided during the pre-onsite audit phase that there have not been any instances in the past 12 months where inmate interpreters, readers, or other types of inmate assistants have been used. SCI-Retreat provided a list of staff and qualified contractors who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. If necessary, the agency maintains a contract through 6/30/18 with PROPIO LS LLC for their language translation needs if no qualified staff or contractor is available. The Auditor was able to successfully test that the telephone number for PROPIO language services was operational. Interviews with random staff confirmed that they were not aware of any instance where an inmate interpreter was used to report an allegation of sexual abuse or sexual harassment. During the walk through of SCI-Retreat, the Auditor observed PREA posters displayed throughout the facility in Spanish as well as English. Information pertaining to the Prison Rape Elimination Act is also provided to inmates in Spanish and

English during the intake process.

Corrective Action: None

115.17	<b>Hiring and promotion decisions</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1273 360">The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li data-bbox="252 371 434 405">1. Documents <ol style="list-style-type: none"> <li data-bbox="252 416 849 450">a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li data-bbox="252 461 1375 539">b. Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 41 (Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies)</li> <li data-bbox="252 551 1331 629">c. Policy DC-ADM 008 Section 1, PREA Procedures Manual, (Sexual Abuse/Sexual Harassment Prevention and Training) 19 pages</li> <li data-bbox="252 640 1362 719">d. Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 3 (Employee Arrests – Felony, Misdemeanor, or Summary Offense)</li> <li data-bbox="252 730 1378 808">e. Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 40 (Conducting Pre-Employment Background Investigations)</li> <li data-bbox="252 819 1455 898">f. Policy 1.1.4 Centralized Clearances Procedures Manual, Section 4 (Centralized Clearance Check Procedures)</li> <li data-bbox="252 909 1011 943">g. Pennsylvania Department of Corrections Code of Ethics</li> <li data-bbox="252 954 1177 987">h. Pennsylvania Department of Corrections Application for Employment</li> <li data-bbox="252 999 683 1032">i. Position Vacancy Interest Form</li> <li data-bbox="252 1043 746 1077">j. PREA Current/Prior Employer Letter</li> <li data-bbox="252 1088 1018 1122">k. Centralized Clearance Check Information Request Form</li> <li data-bbox="252 1133 1168 1167">l. Sample of employee background checks and completed applications</li> </ol> </li> <li data-bbox="252 1200 418 1234">2. Interviews <ol style="list-style-type: none"> <li data-bbox="252 1245 810 1279">a. Administrative (Human Resources) Staff</li> <li data-bbox="252 1290 513 1323">b. PREA Lieutenant</li> <li data-bbox="252 1335 724 1368">c. Random selection of security staff</li> </ol> </li> </ol> <p data-bbox="252 1402 450 1435">Subsection (a):</p> <p data-bbox="252 1447 1477 1693">Pennsylvania Department of Corrections policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 41 (Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies) maintains that the Department will ensure that any job applicant who has had adverse contact with a criminal justice agency be evaluated as to his/her suitability for employment. Consistent with PREA, the Department shall not hire or promote anyone who:</p> <ol style="list-style-type: none"> <li data-bbox="252 1749 1477 1951">a. 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) 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;</li> <li data-bbox="252 2007 1477 2119">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; and/or</li> </ol>

c. has been convicted of any offense under the following (or equivalent out of state offense):

1. Title 18 Pa. C.S.A. Chapter 31 – Sexual Offenses; or
2. Title 18 Pa. C.S.A. Chapter 59 – Public Indecency.

Also, consistent with the PREA, the Department considers any incidents of sexual harassment in determining whether to hire or promote anyone. During the pre-onsite audit phase, SCI-Dallas provided sample copies of personnel files that included 1) PREA Current Prior Employer Letter (Attachment 40-B, Policy 4.1.1 Section 40-Conducting Pre-Employment Background Investigations), 2) Position Vacancy Interest Form, 3) Application for Employment (including Consent to Release Information for Prison Rape Elimination Act Compliance form) and, 4) Centralized Clearance Check Information Request Form.

During the onsite review, the Auditor interviewed an administrative (Human Resources) staff member whose duties in human resources have been consolidated to oversee two facilities (SCI-Dallas and SCI-Retreat). The Auditor was informed that all hiring and background checks are now completed by the agency at the Department's central office. The Auditor was able to review approximately seven (7) additional personnel records and accompanying forms that were randomly selected from the human resource staff members office that document the application process. The interview with human resources confirmed that the forms were a mandatory component of the application process to be hired.

Subsection (b):

Policy 1.1.4 Centralized Clearances Procedures Manual Section 4 (Centralized Clearance Check Procedures) requires that consistent with the Prison Rape Elimination Act (PREA), prior to the engagement of any contractors, the contractor and all of the contractor's employees and/or subcontractors that may have contact with inmates will be investigated to ensure that the Department does not enlist the services of any person(s) who has either engaged in sexual abuse in a prison, jail, lockup, community facility, juvenile facility, or other institution, as defined in 42 U.S.C. §1997, and/or 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. The Department is required to also consider any incidents of sexual harassment when determining whether to enlist the services of any contractor who may have contact with inmates.

In addition, Department policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 40 (Conducting Pre-Employment Background Investigations) requires the consideration of any incidents of sexual harassment in determining whether to hire or promote, including contractors or volunteers who may have contact with inmates. The PREA Current/Prior Employer Letter (Attachment 40-B, Policy 4.1.1 Section 40-Conducting Pre-Employment Background Investigations) is also used by the agency for potential contractors. The interview with human resources during the onsite audit phase confirmed that all applicants for employment, including contractors, are required to sign a consent release for a criminal background check to be completed.

Subsection (c):

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 40 (Conducting Pre-Employment Background Investigations) stipulates that human resource offices submit a background check request for all prospective new hires and rehires that have been separated for more than 60 days to the Office of Special Investigations and Intelligence (OSII). SCI-Retreat requires all prospective employees or contractors to disclose any prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. This was also confirmed during the Auditor interview with human resources during the onsite audit phase.

Human Resources also indicated that when an employee or contractor reports having been employed by another Department facility and is requesting employment at SCI-Retreat, contact is made with the prior facility to inquire into past discipline, with the PREA Current/Prior Employer Letter sent and returned completed. According to human resources, the Commonwealth of Pennsylvania maintains a human resources computer program that allows any state agency to “flag” any employee or contractor who has resigned their position in lieu of termination, including for sexual abuse.

The Office of Special Investigations and Intelligence conducts a full background investigation, and notifies the facility’s Human Resources of the results. As noted in the comments in subsection (a) of Standard 115.17, all hiring and background checks are now completed by the agency at the Department’s central office.

The information provided by SCI-Retreat during the pre-onsite audit phase included documentation of the agency’s background check packet that included the Application for Employment, Centralized Clearance Check Information Request form, PREA Current Prior Employer Letter, and Position Vacancy Interest form. SCI-Retreat reported 30 individuals hired in the past 12 months who may have contact with inmates who have had a criminal background record check completed.

Subsection (d):

Policy 1.1.4 Centralized Clearances Procedures Manual Section 4 (Centralized Clearance Check Procedures) maintains that prior to the engagement of any contractors, the contractor and all of the contractor’s employees and/or subcontractors that may have contact with inmates will be investigated to ensure that the Department does not enlist the services of any person(s) who has either engaged in sexual abuse in a prison, jail, lockup, community facility, juvenile facility, or other institution, as defined in 42 U.S.C. §1997, and/or 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. The Department is required to also consider any incidents of sexual harassment when determining whether to enlist the services of any contractor who may have contact with inmates.

Additionally, policy 1.1.4 provides that, “If a contractor or the contractor’s employee or subcontractor indicates on the Centralized Clearance Check Information Request Form (Public) that he/she has worked in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, as defined in 42.U.S.C. §1997, the Requestor shall send a

PREA Current/Prior Employer Letter (Attachment 4-A) to that candidate's previous employer, wait two weeks for a response from the employer, document the request for information, and provide that documentation to the facility Security Office." Contract service providers, volunteers, and PA Prison Society Official Visitors may be approved for a period of access up to 24 months. All other recurring visitors may be approved for a maximum of 12 months.

In the past 12 months, SCI-Retreat reported 13 contracts for services where criminal background record checks were conducted on all staff covered in the contract that might have contact with inmates. All 13 requests had a criminal background check conducted, representing a 100 percent completion rate.

Subsection (e):

Policy 1.1.4 Centralized Clearances Procedures Manual Section 4 (Centralized Clearance Check Procedures) stipulates that the Centralized Clearance Unit (CCU) is responsible for conducting criminal history checks on all contractors every two (2) years.

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 3 (Employee Arrests - Felony, Misdemeanor, or Summary Offenses) stipulates that employees charged with criminal misconduct shall be dealt with appropriately, which is dependent upon the seriousness of the charge and any resultant violations of the Department of Corrections Code of Ethics, as well as the Governor's Code of Conduct. All Department employees are cross-checked against the Justice Network (JNET) system on a daily basis to identify employees that have had a negative contact with law enforcement. If an employee has a negative contact with law enforcement, JNET sends an alert to the agency's central office who then notifies the facility.

During the pre-onsite audit phase, SCI-Retreat provided documented examples of the JNET report that is sent to the agency. The Auditor's interview with human resources also confirmed the use of the JNET system. Notification to the agency via JNET is in "real-time," thus exceeding the requirement of this subsection of Standard 115.17 of conducting documented background checks for employees at least every five (5) years.

Subsection (f):

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 38 (Recruitment, Selection, and Placement for Non-Civil Service Positions) contains the agency's Application for Employment (Attachment 38-A) and Background Investigation Questionnaire (Pages 1-8). Both contain questions about an applicant's previous misconduct as described in paragraph (a) of this section. Additionally, policy 4.1.1 Section 3 (Employee Arrests - Felony, Misdemeanor, or Summary Offenses) maintains that the employee is responsible for reporting any negative contact with law enforcement to his/her supervisor, security, or designee. Further, the employee is required to report such contact as soon as possible or no later than his/her next scheduled work day.

The Employee Code of Ethics handbook also requires the applicant to disclose any previous misconduct. During the Auditor's interview with human resources it was explained that the application process for staff and contractors is the same. All staff is required to sign a consent release, provide any criminal history, and affirm that the information being provided is

accurate and complete. Random interviews with staff confirmed that employees are required to notify their supervisor of any negative contact with law enforcement.

Subsection (g):

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 38 (Recruitment, Selection, and Placement for Non-Civil Service Positions) contains the agency's Application for Employment (Attachment 38-A) and Background Investigation Questionnaire (Pages 1-8). The Application for Employment contains the "Consent to Release Information for Prison Rape Elimination Act Compliance" which requests that the applicant (staff or contractor) authorize the Department of Corrections to investigate and ascertain any and all information concerning their prior employment as it relates to sexual abuse and sexual harassment. The consent form maintains that if the applicant does not desire to sign the authorization they will not be hired for a position that requires contact with inmates without conducting a background investigation compliant with the Prison Rape Elimination Act.

The Background Investigation Questionnaire also maintains an "Oath and Signature" section that states, "I do solemnly swear (or affirm) that this Application and any attachments contain no misrepresentation or falsification, omission or concealment of material fact, and that the information given by me is true and complete to the best of my knowledge and belief. I understand that any material omission or provision of materially false information will be grounds for non-selection or discipline, up to and including termination of employment." Human resources also confirmed that all background checks completed by the Office of Special Investigations and Intelligence review applications for misrepresentation or falsification, omission or concealment of material fact and are grounds for non-employment or termination.

Subsection (h):

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 40 (Conducting Pre-Employment Background Investigations) requires the agency to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receipt of a request from another facility for whom the person has applied to work. The policy also stipulates that human resource offices are responsible for sending the PREA Consent to Release of Information Form, along with the PREA Current/Prior Employer Letter to the applicant's prior employers, receiving and reviewing their responses, and determining whether the applicant may be hired.

Upon a former employee signing the "Authorization to Obtain Information/Waiver" form that is included in the application packet, the applicant has authorized the Department to release their Official Personnel Folder to the Department if they were a former Commonwealth employee. Human resources confirmed that this process occurs, and indicated that SCI-Retreat receives these requests from other agencies on a regular basis and that they have complied according to Department policy.

Corrective Action: None

115.18	<b>Upgrades to facilities and technologies</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008 Section 2, PREA Procedures Manual, (Sexual Abuse/Sexual Harassment Prevention and Training) 19 pages</li> <li>c. Perimeter Intrusion Detection System (PIDS) meeting minutes</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Superintendent</li> <li>b. PREA Compliance Manager</li> </ol> </li> <li>3. Site Review Observations <ol style="list-style-type: none"> <li>a. Facility walkthrough</li> </ol> </li> </ol> <p>Subsection (a):  Pennsylvania Department of Corrections policy DC-ADM008 PREA Procedures Manual Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) requires that when designing or acquiring any new facility and in planning any substantial expansion or modification of an existing facility, it is mandatory to consider the effect of the design, acquisition, expansion, or modification on the ability to protect inmates from sexual abuse. During the pre-onsite audit phase, SCI-Retreat reported that the facility has not made a substantial expansion or modification since their last PREA audit on June 15-17, 2015. During the onsite audit phase, the Auditor did not observe any new structures to the physical plant. Interviews with the superintendent and PREA compliance manager confirmed that SCI-Retreat has not acquired a new facility or made any substantial expansion or modification since the last PREA audit of June, 2015.</p> <p>Subsection (b):  Pennsylvania Department of Corrections policy DC-ADM008 PREA Procedures Manual Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) requires that the installation or updating of video monitoring, electronic surveillance, or other technology, the Department will consider how such technology may enhance the ability to protect inmates from sexual abuse. During the pre-onsite audit phase, SCI-Retreat reported that cameras were added to the facility since CY 2016 at the following locations: Administrative Treatment Hallway, Administrative Treatment Hallway/F Unit 1035 door, Lobby, E Unit B Side (front), E Unit B Side (back), E Unit B Side (center), E Unit A Side (front), E Unit A Side (back), E Unit A Side (center), Three (3) in Officer’s Dining Hall.  In addition, SCI-Retreat installed a total of 28 mirrors during CY 2017 in the following areas to increase inmate observation: Warehouse, Gym/Activities, Garage, Commissary, Powerhouse, Kitchen, Library, and Barber Shop.</p> <p>It should also be noted that SCI-Retreat maintains a biometric system that monitors the</p>	

entrance and egress of staff from the facility. SCI-Retreat also conducts monthly Perimeter Intrusion Detection System (PIDS) meetings to ensure that video monitoring/electronic surveillance systems and other monitoring technologies are operational in order to enhance their ability to protect inmates from sexual abuse. The PREA compliance manager attends the monthly PIDS meetings.

Corrective Action: None

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.21-Retreat</p> <p>1.Policy and Documents Reviewed:</p> <ul style="list-style-type: none"> <li>• -Completed Pre-Audit Questionnaire submitted by SCI Retreat</li> <li>• -Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA)</li> <li>• Procedures Manual</li> <li>• -MOU with Pennsylvania State Police</li> <li>• -MOU with Victim Resource Center</li> </ul> <p>2.Interviews:</p> <ul style="list-style-type: none"> <li>• -SCI Retreat PREA Investigative Lieutenant</li> <li>• -Victim Crime Response Director</li> <li>• -An inmate who reported contact sexual abuse.</li> <li>• Wilkes-Barre General Hospital, Todd Burda, RN</li> </ul> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>SCI Retreat staff are responsible for conducting administrative investigations pertaining to allegations of sexual abuse and sexual harassment in confinement, including inmate-on-inmate sexual abuse or staff sexual misconduct. PA DC Policy DC-ADM 008 Section 5— Investigating Allegations of Sexual Abuse and Sexual Harassment. Randomly sampled staff stated they were aware and understood the department policy for obtaining usable physical evidence, and whom was the primary investigator of allegations of sexual misconduct. Evidence collection kits are made available to first responder staff and medical staff to aid their efforts in collecting timely usable evidence. DC-ADM 008 states in part that "Investigators shall gather and/or preserve direct and circumstantial evidence, including any available physical, DNA, and any electronic monitoring data; interview alleged victims, suspected abusers, and witnesses; and shall review prior complaints and reports if sexual abuse involving the suspected abusers". There were evidence boxes stored in the Medical area of the facility. Each box was not secured but was behind a locked door. This auditor discussed with the PREA Lieutenant securing the lids to the evidence boxes to ensure nothing was corrupted prior to their use to ensure no unwanted transfer of DNA or other material. The PREA Lieutenant said he understood the reasoning would do so. Each evidence box contained step by step instructions as to how to collect physical evidence such as clothing, instructions for interviews of alleged inmate victims and suspects, directions as to who to report to as far as chain of command with in the facility. The instructions also include reminders to collect video if possible.</p> <p>First responders carry a pocket guide/calendar guide which provides instructions as to who to notify within the facility, separate inmates, take the alleged victim inmate to medical for evaluation, secure the scene etc. Responsibility for conducting criminal investigations is under the jurisdiction of the Pennsylvania State Police (PSP). There is a current signed memorandum of understanding outlining the scope of responsibility and necessity to comply with the applicable PREA standards. Per the PREA Lieutenant, PSP is contacted with all</p>

allegations of sexual abuse and sexual harassment. The PSP investigator provides guidance as to whether a SANE is appropriate or not. The PSP and SCI Retreat, as well as PA DOC uses a 96-hour guide as far whether to have a SANE exam done or not.

Subsection (b)

There are no youth housed at SCI Retreat. This was verified by seeing the population report. No one under the age of 18 is housed at SCI Retreat. The uniformed evidence protocol was adapted from "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents".

Subsection (c)

SCI Retreat quantifies sexual abuse as "contact" or "non-contact", only those deemed "contact" are given access to forensic medical examinations at an outside facility.

SCI Retreat offers all inmates who experience contact sexual abuse access to forensic medical examinations without financial cost to the victim. This expectation is articulated in DC-ADM 008, stating in part that "The alleged victim shall be evaluated by facility medical personnel immediately, when there is an allegation of sexual abuse that involved physical contact, to ensure the absence of any injury requiring urgent treatment. The medical staff shall document any injuries on the DC-457, Medical Incident/Injury Report in accordance with Department policy 13.2.1,

DC-ADM 008 Section 6 says in part, "Treatment services shall be provided to the alleged victim without financial cost and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident".

SCI Retreat medical staff are not responsible for conducting forensic examinations of inmates. Inmates are taken to Wilkes- Barre General Hospital for a SANE/SAFE exam.

There is currently no signed MOU in place between Wilkes- Barre General Hospital and SCI Retreat although SCI Retreat Administration has attempted to do so per the PCM. An interview with Todd Burda, MBA, BSN, RN from Wilkes-Barre General Hospital, verified that they have SANE/SAFE staff on or available at the hospital. An interview with Medical staff and inmates who have reported sexual abuse indicate there is no charge to the inmate for hospital visits for SANE/SAFE exams. Inmates from SCI-Retreat are seen here for all SANE/SAFE exams These staff are on call and will arrive within the hour if they are not currently at the hospital.

Subsection (d)

SCI Retreat entered into an MOU with the Victim Resource Center (VRC) in Wilkes Barre, Luzerne County, and secured services of qualified staff as a victim advocate service provider. The MOU was uploaded into the OAS.

The VRC Director indicated during the interview that an advocate is available to meet with the victim during a SANE exam upon request. The advocate indicated that services have been provided to inmates during the past calendar year. Follow- up care is provided to the inmates on an as needed basis.

One inmate interviewed indicated that an advocate who was not employed by corrections was available and met the inmate at the hospital and was very helpful.

The Victim Resource Center provides services for victims of sexual assault and other crimes in Luzerne County PA. The Director stated that staff employed by this agency are qualified to serve in this role and received education concerning sexual assault and forensic examination issues in general. They have assisted in training SCI Retreat staff about victim dynamics in regard to sexual abuse. Services are limited to sexual abuse victims at SCI Retreat.

Subsection (e)

When requested by the victim, a victim advocate from VRC accompanies and supports the

victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. This was corroborated by the VRC Director. There was corroboration through one inmate interview. The MOU agreement signed with VRC is consistent with this practice. Follow up and on-going care is provided to the inmates as needed.

Subsection (f)

SCI Retreat is responsible for conducting administrative investigations of sexual abuse and sexual harassment.

Allegations of a potentially criminal nature are referred to Pennsylvania State Police (PSP) for investigation. The agreement with PSP had been signed on the Agency level on February 16, 2017. A portion of the MOU states, "The PSP will develop a policy for conducting criminal investigations of sexual abuse allegations as required by 28 C.F.R. Part 115, including but not limited to SS 115.22 and 115.71, and review allegations of sexual crimes committed within state correctional facilities and: Perform a criminal investigation when appropriate: Refer cases to the prosecutorial agency having jurisdiction when such referral is consistent with its policies, procedures and practices Investigative staff of SCI Retreat reported that all allegations of contact sexual abuse are referred to PSP, regardless of whether there is a potential for violation of criminal statutes. This was verified through the review of a random sample of investigatory files, and interview with the investigative staff.

Subsection (g)

NA

Subsection (h)

NA

Corrective Action: None

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Pennsylvania Department of Corrections Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li> <li>b. Memorandum of Understanding (MOU) with Pennsylvania State Police (PSP)</li> <li>c. WebTas Entries</li> <li>d. Random criminal and administrative investigations.</li> <li>e. Pre-Audit Questionnaire (PAQ)</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Investigative staff</li> <li>b. PSP staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Web Tas</li> <li>b. Random criminal and investigative files</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.22 (a). SCI Retreat has adopted a comprehensive agency policy. SCI Retreat ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Agency policy DC-ADM 008, Section 5 general responsibilities states in part that every report, complaint, or allegation of sexual abuse and sexual harassment, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively.</p> <p>The Pennsylvania DOC employs a tracking system, WebTas, to ensure accountability, progress and follow through on all allegations, in accordance with DC-ADM 008. WebTas is a web-based application designed to track all incidences of sexual abuse and sexual harassment for U.S. Department of Justice reporting purposes. WebTas entries go directly to Pennsylvania DOC Office of Special Investigations and Intelligence (OSII) for final review. The auditor conducted interviews with investigative staff responsible for conducting sexual abuse, sexual harassment and retaliation investigations at SCI Retreat. The auditor also reviewed a random sampling of 10 administrative and criminal investigative files and found that investigations were completed. The auditor looked at the SCI investigation spreadsheet where SCI investigative staff record allegations of sexual abuse, sexual harassment and retaliation. There were 55 entries for the past 12-months. Of these 55 investigations there were 27 allegations of sexual abuse, 24 allegations of sexual harassment and 18 allegations that SCI retreat calls non- contact sexual abuse. Ten of the sexual abuse investigations were conducted by the Pennsylvania State Police (PSP). One of these investigations is still open with the PSP where charges may be referred for prosecution. Of the nine other investigations that were investigated by PSP there were no charges filed. The auditor later interviewed a representative from the PSP. The PSP investigator confirmed that they have referred investigations for prosecution, but no charges were filed. The SCI Retreat investigations staff</p>

told the auditor that they separate out contact sexual abuse and non-contact sexual abuse for allegations towards staff. Contact abuse means physical contact. Non- contact means the allegation is sexual in nature without contact.

115.22 (b). PA DOC policy DC-ADM 008 states in part, if a case is being investigated for criminal charges, the department investigators shall suspend the administrative investigation and allow the criminal investigation to take precedence. The department investigators and/or Office of Special Investigations and Intelligence (OSII) shall coordinate with the criminal investigator/District Attorney's Office (as applicable) to determine when to resume the administrative investigation so as to avoid interference with the criminal investigation. The auditor observed that the agency's policy regarding outside referrals is made available on the Pennsylvania DOC website. Additionally, memorandums of understanding are completed between the agency and PSP outlining responsibilities of each agency as they relate to investigations of allegations of sexual abuse and sexual harassment. All referrals to outside law enforcement are documented and included in the investigation packet. The auditor noted through review of 10 investigative files and through interviews that SCI Retreat follows provisions of policy DC-ADM 008 by referring all allegations of sexual abuse and sexual harassment to the PSP. These referrals were included in the investigatory files that were reviewed by the auditor.

115.22 (c). The agency's policy regarding outside referrals is made available on the Pennsylvania DOC website which the auditor observed. Additionally, memorandums of understanding are completed between the agency and PSP outlining responsibilities of each agency as they relate to investigations of allegations of sexual abuse and sexual harassment. The auditor was provided a copy of the current MOU between the two agencies.

115.22 (d). PSP and Pennsylvania DOC have a signed MOU dated February 16, 2017. A copy of the current MOU was provided to the auditor and staff from both agencies confirmed that the provisions within the MOU outlining each agencies duties and responsibilities do occur and are part of their working practice.

Corrective Action: None

115.31	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. PA DOC Agency Procedures Manual; DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. Participant Basic Training Guide</li> <li>c. Individual employee training transcripts</li> <li>d. PREA Training and Understanding Verification Form</li> <li>e. 2017 Basic Training Lesson Plan</li> <li>f. Handout 1 – Sexual Abuse and Sexual Harassment</li> <li>g. 115.31 PREA Essentials (Staff Refresher training)</li> <li>h. PA DOC PREA video</li> <li>i. Rodney Hulin Story Video</li> <li>j. Post Orders</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Specialized Staff</li> <li>c. Random Staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. SCI Retreat PCM reinforces staff and inmate awareness and understanding of the PREA standards by creating a PREA stenciled wall in large colorful letters in one of the main corridors of the facility outside the PCM’s office. The “PREA” stenciling draws further attention to a large bulletin board which is dedicated to providing further information in both English and Spanish stating that “SCI Retreat has a zero tolerance policy against sexual abuse and sexual harassment”, postings define what sexual abuse and sexual harassment is and provides information on how to report sexual abuse and sexual harassment.</li> <li>b. Numerous PREA posters were observed throughout the facility in staff, inmate and public areas, informing the reader that the facility has a zero tolerance for sexual abuse and sexual harassment (English and Spanish versions) and how to report these types of incidents.</li> <li>c. Several times per day on the inmate TV system, a PREA educational video is played “PREA What You Need to Know”, created by Just Detention International, this was observed by the auditor when onsite. Additionally, the Victims’ Resource Center information, with contact information is also made available daily on the inmate TV.</li> <li>d. During informal contacts, I observed medical staff referring to their “pocket” PREA – Medical Staff reference cards which assist staff in responding to an allegation of sexual abuse; which occurred within the past 96 hours or when more than 96 hours.</li> <li>e. During informal contacts, I observed correctional officers and non-uniformed staff referring to their “pocket” PREA – Immediate Response Procedures cards. This card outlines the staff response duties upon witnessing or receiving a report of sexual abuse.</li> <li>f. All of the correctional officer post orders have information stating the agency has a zero tolerance for sexual assault and sexual abuse and for retaliation for anyone reporting sexual</li> </ol> </li> </ol>

abuse or sexual harassment. Staffs are required to sign and acknowledge their post orders. This was observed in several areas of the facility by the auditor when on site.

g. Staff received an annual "color groups calendar" to track their assigned work schedule throughout the year. Included in this "on person" calendar is additional PREA information; the employee's duty to report any knowledge of sexual abuse, sexual harassment and by what means they may report.

h. The PCM office staff has created and maintains a "What's the Scoop?" email distribution once a month to all staff. This is generalized information regarding PREA and to keep it fresh on everyone's mind. The agency also provides and makes available to all staff a comprehensive PREA pamphlet (informational overview of most if not all of the PREA standards).

#### 4. Findings (By Provision):

115.31 (a) 1-10. SCI Retreat has adopted a comprehensive written policy DC-ADM 008 and has designated the PREA Compliance Manager (PCM), in conjunction with the training coordinator at each facility, who shall ensure that all employees who have contact with inmates receive training on the agency's zero tolerance policy against sexual abuse and sexual harassment within the department.

The auditor reviewed the agency 2017 Basic Training (BT) lesson plan and the Participant Basic Training Guide which are utilized to educate all new staff that will have contact with inmates on how to fulfill their responsibilities under sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. The training resources state that inmates have the right to be free from sexual abuse and sexual harassment and the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment. All employees receive education regarding the dynamics of sexual abuse and sexual harassment in confinement, how to detect and respond to signs of threatened and actual sexual abuse and how to avoid inappropriate relationships with inmates. Additionally, new employees are provided training on how to communicate effectively and professionally with inmates, including lesbian, gay, bi-sexual, transgender, intersex, or gender nonconforming inmates. Lastly staff is instructed how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Staffs who were interviewed as random and specialized staff reported they received training consistent with each of the ten elements listed above. Staff were able to articulate training content, had knowledge of the agency's zero tolerance for sexual abuse and sexual harassment policy, that all staff and inmates have a right to be free from retaliation for reporting sexual abuse and sexual harassment and were familiar with their reporting responsibilities.

115.31 (b) 1-2. SCI Retreat has adopted a comprehensive written policy DC-ADM 008 which in part states (p. 2-15) that staff shall receive training that shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only female inmates, or vice versa. Through interviews with staff, it is reported during the past 12 months, no staff transferred to SCI Retreat from a female inmate facility. They further state that training materials are applicable to both male and female staff and there is no specific additional training that would be received for staff arriving from a female facility. Records reveal (consistent with staff's

account) no female staff have transferred or arrived at SCI Dallas from a female inmate facility, it is recommended the facility develop a training curriculum tailored to male inmates. This should include the agency/facility policies specific to limits of cross gender viewing and searches at a minimum.

115.31 (c) 1-3. SCI Retreat has adopted a comprehensive written policy DC-ADM 008 which in part states (p. 2-15) that beginning in 2016 and every even year thereafter, the annual staff PREA education shall be provided in the form of refresher of the initial Basic Training. Beginning in 2017 and every odd year thereafter, the annual PREA education shall be provided in the form of update to the agency PREA Procedures Manual for all staff. The agency utilizes an internet based training management system, Learning Solutions (LSO) that tracks staff training and creates an employee training record. This software has the ability to run reports and therefor can track who, when and which employee has completed training or has training past due.

All staff has access to a yearly pocket sized calendar which contains PREA - Immediate Response Procedure educational information. Correctional officers have at each of the facility posts, post orders that contain "PREA – Immediate Response Procedures" that staff have access to daily and are required to sign that they have read and understand the operations of the post.

115.31 (d). SCI Retreat has adopted a comprehensive written policy DC-ADM 008, which states (p. 2-15) that staff shall be required to verify they have received the training information and understand the included items by signing the PREA Training and Understanding Verification Form. The statement on the form for which the employee is required to sign reads "I acknowledge on this date \_\_\_ I received and understand the training on the Prison Rape Elimination Act (PREA). I understand that the Department of Corrections maintains a zero tolerance policy in regard to inmate sexual abuse, sexual harassment, and retaliation. I have a statutory obligation to report ALL forms of sexual abuse and sexual harassment." The exception to signing the hardcopy form is when training is completed through web-based training, and then an electronic signature is captured and recorded. The PREA Training and Understanding Verification Form shall be kept in the staff member's training file. Electronic signatures are captured and maintained in the agency's LSO system, or known as the Employee Training Transcript.

The auditor asked staff if there was any means or process being utilized that demonstrated that employees receiving PREA training understood the training information provided? Staff responded the PREA Training and Understanding Verification Form are utilized. The auditor recommends enhancing the current system by incorporating a pre-test, posttest or quiz. This would assist identifying individuals in need of remedial training and for the revision of training curriculum and lesson plans.

Corrective Action: None

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.32 Volunteer and contractor training</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. PA DOC Agency Policy, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. PA DOC Contractors/Volunteers PREA Training</li> <li>c. Contractor/Volunteer hours of work</li> <li>d. PREA Training Understanding and Verification Form, for classroom training</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Contractors and volunteers</li> <li>b. PREA Compliance Manager</li> <li>c. Training personnel</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. SCI Retreat PCM reinforces staff and inmate awareness and understanding of the PREA standards by creating a PREA stenciled wall in large colorful letters in one of the main corridors of the facility outside the PCM’s office. The “PREA” stenciling draws further attention to a large bulletin board which is dedicated to providing further information in both English and Spanish stating that “SCI Retreat has a zero tolerance policy against sexual abuse and sexual harassment”, postings define what sexual abuse and sexual harassment is and provides information on how to report sexual abuse and sexual harassment.</li> <li>b. Numerous PREA posters were observed throughout the facility in staff, contractor, volunteer, inmate and public areas, informing the reader that the facility has a zero tolerance for sexual abuse and sexual harassment (English and Spanish versions) and how to report these types of incidents.</li> </ol> </li> <li>4. Findings (By Provision): <p>115.32 (a) 1-2. SCI Retreat has adopted a comprehensive written policy DC-ADM 008 and has designated the PREA Compliance Manager (PCM), in conjunction with the training coordinator at each facility, who shall ensure that all volunteers and contractors who have contact with inmates receive training on their responsibilities under the agency’s zero tolerance policy against sexual abuse and sexual harassment prevention, detection, and response policies and procedures. This was corroborated during interviews with volunteers and contractors. The facility reports that 121 full and part-time volunteers and contractors have contact with inmates. Two contractors/volunteers were interviewed during the onsite phase of the audit. These individuals were selected for an interview based on their schedule and availability while at the facility in relationship to the schedule of the auditors.</p> <p>115.32 (b) 1-2. SCI Retreat has adopted a comprehensive written policy DC-ADM 008 that</p> </li> </ol>

states (p. 2-17) during a contractor/volunteer orientation session (prior to having unsupervised contact with inmates) they shall receive training (and annual training reflective of the level of contact that they have with inmates) on the agency's zero tolerance policy regarding sexual abuse and sexual harassment and informed on how to report incidents or suspicions of sexual abuse sexual harassment. The training curriculum was reviewed by the auditor and was able to confirm all of the elements of the standard were present within the training materials.

For contractors and volunteers who have a high level of contact, five hours or more per week with inmates, they shall have the same training staff members receive during pre-service and annual training. 17 contractors/volunteers are reported to have more than five hours of contact with inmates per week. The auditor reviewed 17 training records and for those who participated in classroom training observed the PREA Training Understanding and Verification Form, web-based training the electronic training record system viewed.

For volunteers and contractors who have less than five hours per week, on average with inmates, they shall receive a brief orientation by the volunteer/contractor designee to include information on the Department's zero tolerance policy, how to make a report of sexual abuse and sexual harassment, and to whom to make the report.

Contractors and volunteers who were interviewed referenced their PREA pocket cards as a resource to explain what action they would take in response to having suspicion of, witnessing or having information reported to them specific to sexual abuse and sexual harassment. These individuals stated they had received training specific to the agency's zero tolerance policy and how to make a report of sexual abuse or sexual harassment.

115.32 (c). SCI Retreat has adopted a comprehensive written policy DC-ADM 008, which states (p. 2-17) that all contractors and volunteers shall be required to sign and acknowledge the PREA Training and Understanding Verification Form. The statement on the form for which the employee is required to sign reads "I acknowledge on this date \_\_\_\_ I received and understand the training on the Prison Rape Elimination Act (PREA). I understand that the Department of Corrections maintains a zero tolerance policy in regard to inmate sexual abuse, sexual harassment, and retaliation. I have a statutory obligation to report ALL forms of sexual abuse and sexual harassment." The exception to signing the hardcopy form is when training is completed via a web-based means, and then an electronic signature is captured and recorded. The PREA Training and Understanding Verification Form shall be kept in the staff member's training file. Electronic signatures are captured and maintained in the agency's LSO system, or known as the Employee Training Transcript.

Agency policy further states the facility volunteer coordinator shall be responsible for documenting the PREA training that each volunteer has received and maintain the documentation in the volunteer's file. The PREA compliance manager is responsible for maintaining PREA Training and Understanding Verification Forms for all contractors and volunteers. PREA training shall be effective for a period of one year. The PCM verified this for the auditor while conducting the site review that this is the practice at SCI Retreat.

The auditor asked staff if there was any means or process being utilized that demonstrated

that contractors/volunteers receiving PREA training understood the training information provided? Staff responded the PREA Training and Understanding Verification Form was the current means being utilized. The auditor recommends enhancing the current system by incorporating a pre-test, posttest or quizzes. This would assist identifying individuals in need of remedial training and for the revision of training curriculum and lesson plans.

Corrective Action: None

<b>115.33</b>	<b>Inmate education</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.33 Inmate education</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. PA DOC Agency PREA Procedures Manual; DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. PA DOC Agency Reception and Classification Procedures Manual</li> <li>c. Sexual Assault Awareness Informational Handout</li> <li>d. PREA Poster (English and Spanish); ways to report and zero tolerance information</li> <li>e. National PREA Resource Center, Inmate Education Facilitator’s Guide, PREA: What You Need to Know, Notification of Curriculum Use, February 2014</li> <li>f. Just Detention International’s DVD; What You Need to Know</li> <li>g. PREA Inmate Education Verification Form</li> <li>h. Inmate Handbook 2017 (English and Spanish)</li> <li>i. SCI Retreat Inmate Handbook Supplement, December 1, 2017</li> <li>j. DBA PROPIO LANGUAGE SERVICES Contract (translators)</li> <li>k. Mental Health Contact Note form, Attachment 1-G, (effective 6/30/16)</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Specialized Staff</li> <li>c. Random Staff</li> <li>d. Targeted Inmates</li> <li>e. Random Inmates</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Inmate Cumulative Adjustment Record software system</li> <li>b. PA DOC PREA Prevention Through Awareness posters (English and Spanish)</li> <li>c. PREA stenciled wall and PREA specific bulletin board (visible/accessible to staff and inmates)</li> <li>d. PREA information in officer post orders</li> <li>e. PREA video on inmate TV system</li> <li>f. PREA Audit Announcement posters on inmate TV and throughout facility</li> </ol> </li> <li>4. Findings (By Provision):</li> </ol> <p>115.33 (a) 1-2. SCI Retreat has adopted a comprehensive written policy DC-ADM 008, which states (p. 2-18) all inmates shall receive information explaining the agency’s zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse, sexual harassment or retaliation, and what to do if he is the victim of sexual abuse, sexual harassment, or retaliation.</p>	

The policy further states medical staff shall provide a copy of the Sexual Assault Awareness Information handout to the inmate immediately upon intake. The SCI Retreat intake process was observed by the auditors during the onsite phase of the audit. The process consists of intake staff providing each inmate (within hours of arrival to the facility) a copy of the agency inmate handbook. The handbook provides information (pp. 7-8) on the agency's zero tolerance policy of sexual abuse or sexual harassment and the methods of reporting for inmates. Zero tolerance means that anyone who engages in, fails to report, or knowingly condones sexual abuse or sexual harassment of an inmate shall be subject to disciplinary action to and including termination and may be criminally prosecuted. The handbook informs the inmate that inmates and staff, who report sexual abuse or sexual harassment or cooperate in a "PREA investigation", shall be protected from retaliation.

When an inmate arrives at SCI Retreat, he/she will be seen by a medical or mental health professional (at least one of which is always on site) who will provide the inmate a copy of the agency Sexual Assault Awareness Information handout. The handout informs the inmate that any form of sexual abuse or sexual harassment will not be tolerated and provides the following reporting information:

- Tell any Department of Corrections Staff Member that you trust.
- Make a written request to any staff member.
- Send a written report to the Sexual Abuse reporting address:  
BCI/PREA Coordinator, 1800 Elmerton Ave., Harrisburg, PA 17110
- Go online to [www.tipsubmit.com](http://www.tipsubmit.com) to file an anonymous report.
- Have your family notify the facility, contact the PA State Police or file a report at [www.tipsubmit.com](http://www.tipsubmit.com).

The PREA coordinator shared with the auditor a copy of an email communication that was sent to the state's PREA compliance managers dated May, 2017. The memo, in part, shared that the information on [www.tipsubmit.com](http://www.tipsubmit.com) has been deleted from Attachments 2-G (Sexual Assault Awareness Information handout). This website is no longer offered as a means to submit information. If you have posters with this information, it is acceptable to cross it off the poster.

The inmate information, containing the [www.tipsubmit.com](http://www.tipsubmit.com) for anonymous reporting and for inmate family members to report was being distributed at intake when the auditor was conducting the onsite portion of the audit and was uploaded to the National PREA Resource Center's Online Auditor System (OAS) for the auditors review (Dec. 2017). Also provided in the OAS was a PREA poster (English and Spanish) with the [www.tipsubmit.com](http://www.tipsubmit.com) information present. The auditor is recommending corrective action that staff prepare a communication accessible to all inmates (written and via the inmate TV channel) and staff clarifying the reporting process and ensure that only updated or the current version of the Sexual Assault Awareness Information handout is being distributed.

An asterisk marked comment on the inmate information Sexual Assault Awareness Information handout reads "\* If someone is a known or believed to be LGBTI, it does not mean that they are automatically agreeing to sexual acts." When updating the Sexual Assault Awareness Information handout, staff should remove this statement. It is offensive and may be interpreted as reinforcing a negative stereotype; it does not promote a sexually safe environment or provide for effective, professional communication with LGBTI individuals.

The agency Sexual Assault Awareness Information handout advised the inmate when they have first arrive at a facility, the means for reporting is to “tell a staff member you trust”. The likely hood of knowing “who to trust” for reporting sexual abuse or sexual harassment is not realistic and to be advised to write to any staff person is further challenging when you are new to a facility. The auditor recommends the facility work to develop a means for inmates, staff and the public to privately, confidentially, anonymously and in an expeditious manner be able to report sexual abuse, threats of imminent danger of being sexually abuse, sexual harassment and retaliation via a phone to someone/agency outside the facility/agency who can receive this information and report back timely to the facility and or agency for investigation.

Based on the handout information provided to inmates, currently the only timely means for an inmate to report if in imminent danger of sexual abuse, sexually assaulted, sexually harassed or retaliated against would be to verbally report to staff at the facility, make a written request to staff at the facility or to write to the Pennsylvania State Police based on the Sexual Assault Awareness Information handout provided to inmates at intake.

All inmates receive information at the time of intake (prior to receiving a housing unit assignment) about the agency’s zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. A mental health professional (medical staff in the absence of a mental health staff) meets with the inmate during the initial intake process and provides the inmate a copy of the Sexual Assault Awareness Information handout. After meeting with the inmate staffs complete the Mental Health Contact Note form, which documents that the “Sexual Assault Awareness Pamphlet” was provided to the inmate and reviewed. The Mental Health Contact Note form is placed in the inmate’s confidential medical file and a copy provided to the PREA compliance manager’s office to track that all inmates arriving to SCI Retreat are provided information on how to report incidents of sexual abuse or sexual harassment. This process was corroborated by interviewing specialized staff, targeted and random inmates during the onsite phase of the audit. Additionally a phone call interview was conducted during the evidence review and interim report phase of the audit with a specialized staff member.

The facility reported the number of inmates admitted during the past 12 months was 500 and all 500 inmates received information on the agency’s zero tolerance policy, how to report incidents or suspicions of sexual abuse or sexual harassment. The means for inmates in PA DOC to report incidents of sexual abuse or sexual harassment are messaged consistently from one facility to the next by means of the Sexual Assault Awareness Information handout.

Interviews conducted with specialized staff, inmates who had completed the intake process in the past six months, including the auditor’s observations of the intake process corroborated the policy is aligned with the institution practice. Additionally, a random sampling of the Mental Health Contact Note (attachment 1-G) was reviewed in the medical unit by the auditor and found that comparing random intake movements on a particular day showed that the arriving inmates had had completed Mental Health Contact notes which document that the inmate has received the PREA pamphlet (Sexual Assault Awareness Information handout).

115.33 (b) SCI Retreat has adopted a comprehensive written policy DC-ADM 008, which

states (p. 2-18) within 30 days of reception, additional PREA educational information shall be provided to all inmates. All inmates shall be shown a video regarding their rights to be free from sexual abuse, sexual harassment and from retaliation for reporting such incidents. They shall also be provided information on how to report incidents. Inmate education may be provided to inmates individually or in groups. SCI Retreat's PREA compliance manager facilitates these monthly sessions in person utilizing the National PREA Resource Center Inmate Education Facilitator's Guide PREA: What You Need to Know and is available to answer inmate questions. Staff remains in the room during the playing of the video What You Need to Know. Staff is available to answer inmate questions. Staff remains in the room to observe and monitor inmate reactions. Staff and inmates acknowledged the above process occurs when the auditors conducted interviews and during informal interactions and discussions while onsite at the facility.

The facility reports that 492 of the 500 inmates received at SCI Dallas in the past 12 months have received comprehensive education and information within 30 days of their arrival to SCI Retreat. Of the 500 intakes, eight inmates were transferred or released prior to 30 days from their arrival date and therefore did not receive the comprehensive PREA education. Additionally the agency policy, DC-ADM 008 (p. 19) states that during the inmate's annual review, the counselor shall discuss issues related to sexual abuse in prison and offer the inmate an opportunity to discuss related concerns. The counselor shall provide a Sexual Assault Awareness Informational handout at the time of the inmate's annual review. During the onsite review, the auditor met with three specialized staff and interviewed numerous random inmates that corroborate the policy with the facility's practices. The auditor reviewed approximately 12 records that were provided during the pre-onsite audit phase and eight random records while on site with staff assistance accessing automated inmate case notes system with staff. A random day within 8 separate months was selected reviewing new inmate arrivals to the facility. A random inmate was selected from that day's intake list and then a review of the ICAR system was reviewed to determine if the randomly selected inmate had received a comprehensive PREA education within 30 days. All records selected confirm that the inmate had received training consistent with agency policy.

115.33 (c) 1-4. Facility staff and the PREA coordinator state that all PA DOC facilities have adopted the agency's DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training. As a result all reporting mechanisms and means to report sexual abuse and sexual harassment and retaliation for reporting such incidents are universal from one facility to the next.

115.33 (d) 1-5.

The facility has PREA education information posters displayed throughout the facility printed in Spanish and English languages and a PREA educational video plays several times daily on the inmate TV system (referred to as "FYI" TV station) with subtitles in Spanish and English. If an inmate arrived at the facility and had any disabilities or Limited English Proficiency challenges, the facility is prepared to assign staff to meet with the inmate utilizing the National PREA Resource's PREA facilitator's guide titled, PREA What You Need to Know to provide PREA education. SCI Retreat also has a contract with a translation service to assist non-English speaking and or reading inmates who can assist in providing education on the agency's zero tolerance policy and how to report incidents of sexual abuse and sexual harassment. The facility also has PREA inmate education information available in braille.

115.33 (e) SCI Retreat has adopted a comprehensive written policy DC-ADM 008, which states (p. 2-19) sexual abuse, sexual harassment, and retaliation training shall be documented by the inmate signing the PREA Inmate Education Verification form (attachment 2-J). This form shall be filed in the DC-14 in accordance with Section 1 of the PA DOC procedures manual. Participation in the PREA inmate education session shall be documented in an Inmate Cumulative Adjustment Record (ICAR).

The auditor randomly selected inmate records within ICAR system and found compliance with the agency policy requiring documentation of inmate's attendance of these PREA education sessions. The auditor also observed ICAR entries by the counselor during the inmate's annual review session; "Inmate was offered a copy of the sexual abuse prevention pamphlet and asked if he had any questions about PREA?"

115.33 (f) PREA information is continuously made available to inmates in many ways:

- Inmate Handbook 2017; which includes the agency's zero tolerance policy, definitions of sexual abuse and sexual harassment, how to report sexual abuse, sexual harassment and an inmate's right to be free from retaliation for reporting incidents and how to access free victim support services (English and Spanish versions of the handbook).
- DVD - PREA: What You Need to Know; played daily on the inmate TV system
- Sexual Assault Awareness Information handout made available to any inmate upon transfer from one facility to another.
- PA DOC PREA Posters located throughout the facility written in English and Spanish; describes zero tolerance for sexual abuse or sexual harassment and informs how an inmate can report sexual abuse or sexual harassment.
- PREA Bulletin Board; located in main hallway of facility accessible by staff and inmates. Provides information on agency's zero tolerance policy for sexual abuse, sexual harassment or retaliation for reporting incidents and how to report sexual abuse or sexual harassment (English and Spanish).
- Inmate's annual review; a counselor meets annually with the inmate and will provide PREA information in writing. Staff is available to answer any questions specific to PREA.

The auditor had an opportunity to view all the above resources and activities during the onsite phase of the PREA audit and had multiple discussions with both staff and inmates in regards to these resources. Inmates were readily able to articulate how they could locate or reference a means to report incidents of sexual abuse or harassment.

Corrective Action:

1. Update or replace the agency Sexual Assault Awareness Information handout, attachment 2-H specific to the following:

- a. Remove the reference to [www.tipsubmit.com](http://www.tipsubmit.com) to file an anonymous report of sexual abuse, sexual harassment and replace with current information that allows for anonymous inmate reporting.
- b. Remove the asterisk marked comment on the inmate information Sexual Assault Awareness Information handout that reads "\* If someone is a known or believed to be LGBTI, it does not mean that they are automatically agreeing to sexual acts."
- c. Provide a revision/effective date on the handout.
- d. Place the agency's policy reference to the handout: Sexual Assault Awareness Information on the handout (top/title area).

e. Utilize definitions consistent with the PREA Standards:

- i. Sexual Abuse
- ii. Sexual Harassment
- iii. Voyeurism

2. Educate staff and inmates on the revised handout.

a. Provide documentation that demonstrates staff and inmates have been informed and educated on the revision/replacement of the Sexual Assault Awareness Information handout and the information contained within the handout.

#### POST INTERIM CORRECTIVE ACTIONS:

Following the issuance of the interim report, the PREA audit team coordinated multiple conference calls with the Pennsylvania Department of Corrections (PA DOC) PREA coordinator to discuss the process of revising the agency's Sexual Assault Awareness Informational Handout (Attachment 2-H) that was being utilized at SCI-Retreat. In particular, the auditor requested that "Attachment 2-H" remove the reference to [www.tipsubmit.com](http://www.tipsubmit.com) and replace with current information that permits anonymous inmate reporting, remove the comment that reads "If someone is a known or believed to be LGBTI, it does not mean that they are automatically agreeing to sexual acts," and utilize definitions consistent with the PREA Standards.

In May, 2018, the PA DOC provided the PREA audit team with a revised "Attachment 2-H" that removed the reference to the tipsubmit website, LGBTI statement, and revised the definitions to reflect those consistent with the PREA Standards. In June, 2018 a bulletin was finalized and signed by the PA DOC Secretary on the changes being made to department policy DC-ADM 008, Section 2, Sexual Abuse/Sexual Harassment Prevention and Training (Attachment 2-H). Additionally, the name of Attachment 2-H was revised and retitled, PREA Intake Handout (Attachment 2-H).

On July 23, 2018, members of the Wisconsin PREA audit team conducted a post-onsite audit at SCI-Retreat to review the completion of the revised Attachment 2-H. During the second on-site audit, 10 inmates were interviewed who were randomly selected from the facility's admission database for June and July, 2018 in order to verify that the revised Attachment 2-H was being distributed to the inmate population. All inmates verified that they had received a copy of the PREA Intake Handout (Attachment 2-H). The auditors also verified that copies of the form were readily available within the intake area.

Based upon the revision to the PA DOC's Attachment 2-H, bulletin revision, and on-site verification of the form's dissemination to inmates, and through inmate interviews, the auditor determines that SCI-Retreat has demonstrated compliance with the provisions of this standard.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.34 Specialized training: Investigations.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 5 – Investigating Allegations of Sexual Abuse and/or Sexual Harassment</li> <li>c. National PREA Resource Center’s Investigators Training; Utilizing Modules 1 – 5 <ol style="list-style-type: none"> <li>i. PREA Update Investigation Standards</li> <li>ii. Trauma Victim Responses.pdf</li> <li>iii. First Response Evidence Collection.pdf</li> <li>iv. Prosecutorial Collaboration.pdf</li> <li>v. Investigations Agency Culture.pdf</li> </ol> </li> <li>d. PREA Grant Project: Sexual Assault Investigator Training -7 modules; Dec. 2017</li> <li>e. Employee training transcripts of those assigned to conduct sexual abuse/sexual harassment investigations</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Specialized Staff</li> <li>c. Random Staff</li> <li>d. Targeted Inmates</li> <li>e. Random Inmates</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Evidence collection and preservation response kit utilized for incidents of allegations sexual abuse.</li> </ol> </li> <li>4. Findings (By Provision):</li> </ol> <p>115.34 (a) SCI Retreat has adopted a comprehensive written policy DC-ADM 008, which states that any staff designated to conduct sexual abuse investigations shall receive training to include but not limited to; interviewing sexual abuse victims, proper use of Miranda warnings, the Garrity rule, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral. In 2017 the PA DOC adopted a comprehensive special investigations training program which was developed by the Massachusetts Department of Corrections by means of a technical assistance National PREA Resource grant. This seven part training curriculum was reviewed by the auditor during the pre-onsite audit phase. The lesson plan and training curriculum are utilized to provide education and instruction to those staff assigned to investigate sexual abuse allegations in a confinement setting.</p>

115.34 (b) The comprehensive training curriculum utilized to train staff assigned to investigate allegations of sexual abuse and sexual harassment includes but is not limited to; interviewing sexual abuse victims, proper use of Miranda warnings, the Garrity rule, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral. The training is a 12 hour course conducted in two consecutive days.

115.34 (c) 1-2. All of the SCI Retreat investigators responsible for conducting investigations of sexual abuse or sexual harassment in a confinement setting completed specialized investigations training in 2017 according to their training records. The auditor reviewed all of the investigators training records during the pre-onsite audit phase which the facility staff provided in the OAS. Two of the investigators that were interviewed during the onsite review, confirmed that they had received specialized investigations training specific to the elements of this standard.

Corrective Action: None

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.35 Specialized training: Medical and Mental health care.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. Medical and Mental Health training roster 2017</li> <li>c. PREA Training and Understanding Verification Form, classroom</li> <li>d. In-service Training Roster</li> <li>e. PREA Medical and Mental Health Care PREA Standards, Lesson Plan 2017 revised</li> <li>f. PREA Medical and Mental Care Standards, Participant Guide</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Specialized Staff</li> <li>c. Targeted Inmates</li> </ol> </li> <li>3. Site Review Observations:</li> <li>4. Findings (By Provision):</li> </ol> <p>115.35 (a) 1-3 SCI Retreat has adopted a comprehensive written policy DC-ADM 008 (p. 2-16) that states all staff (full time, part-time, licensed, non-licensed and contract) providing medical and mental health services to inmates shall receive training on working with victims of sexual abuse and sexual harassment. This specialized training shall include but not be limited to: how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>The auditor reviewed the training materials specific to the medical and mental health care providers training and found both the training curriculum and the staff’s user guide met the criteria of this portion of the standards requirements.</p> <p>Both medical and mental health staff that was interviewed were able to articulate their knowledge and responsibilities of how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>115.35 (b) SCI Retreat facility medical staff does not conduct forensic exams. The community hospital provides these services as necessary.</p>

115.35 (c) Staff report that all 34 medical and mental health care providers that provide these services to inmates have received agency training of how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

115.35 (d) The auditor was able to view training sign in logs and employee PREA Training and Understanding Verification forms specific to specialized medical training, training required of all employees who have contact with inmates (§115.31) and training for those contracted staff who have contact with inmates (§115.32). During the pre-onsite audit phase, the auditor reviewed 17 training records provided in the OAS that reflect the medical and mental health care staffs have received the appropriate PREA training per the requirements of the standard.

Corrective Action: None

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.41 Screening for risk of victimization and abusiveness</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. PREA Risk Assessment Tool (PRAT)</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. PREA Compliance Manager</li> <li>c. Specialized Staff</li> <li>d. Random Staff</li> <li>e. Targeted Inmates</li> <li>f. Random Inmates</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Administration of the PRAT for an initial assessment</li> <li>b. Generating the 30 day PRAT re-assessment report process</li> </ol> </li> <li>4. Findings (By Provision):</li> </ol> <p>115.41 (a) PA DOC has adopted a comprehensive agency written policy DC-ADM 008 (p. 10) that states all inmates shall be assessed during the intake screening process to include upon receipt into another facility for risk of being sexually abused by other inmates or sexually abusive toward other inmates. The auditor reviewed initial risk assessments and 30 day risk re-assessment documents during the pre-onsite phase of the audit provided by the facility via the Online Audit System (OAS) when (one of each) was being conducted. The results of risk assessments were observed by the auditor with specialized staff within the automated WebTAS (inmate information software) system. The agency’s automated PREA Risk Assessment Tool (PRAT) results and scores provide information within the WebTAS inmate information system. Based on interviews and site observations, all inmates are screened during the intake process for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</p> <p>115.41 (b) 1-2 SCI Retreat has adopted a comprehensive agency written policy DC-ADM 008 (pp.10-11) that states all inmates shall be assessed during the intake screening process for risk of being sexually abused by other inmates or sexually abusive toward other inmates. The initial assessment is conducted within 72 hours of reception.</p> <p>During the onsite review, the auditor met with two different staff that has been provided security access and have designated job duties for a “need to know” access to the WebTAS</p>

system. The review consisted of utilizing the inmate movement history, verifying when (date) staff administered the initial risk assessment utilizing the PRAT. Of the 10 random inmates selected from various months in 2017, records consistently showed that inmates received their initial assessment on the same day they arrived at the facility. Thus the auditor corroborated the facility practices were compliant with the agency policy and with these two elements of the standard.

115.41 (c) SCI Retreat has adopted an agency written policy DC-ADM 008 (pp.10-11) that states in part the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT). The tool will be an objective instrument that shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization or abusiveness:

(1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.

The agency PRAT is comprised of 22 questions. Of the 22 questions, the auditor has determined some of questions are compound questions. In those circumstances, it is unclear which question the inmate is responding to and how the tool is scoring one response for two different questions? Additionally, some of the questions are not objective. The following is a list of questions with their corresponding number within the PRAT:

1. Have you ever been convicted of a crime using force or threat of force?
2. Did your current offense involve either personal violence or any sexual act?
6. Does the inmate appear to be: (staff selection options; Heterosexual, Homosexual or Bi-Sexual).
9. Have you ever been physically victimized or sexually victimized before this incarceration?
10. Have you ever victimized someone either physically or sexually before this incarceration?
18. Does the inmate appear to have a developmental disability?

115.41 (d) 1-10 SCI Retreat has adopted an agency written policy DC-ADM 008 that states in part the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT). The PRAT shall consider at a minimum, the 10 criteria listed in 115.41 (c) above.

The PRAT tool asks the three following questions in an effort to meet the elements of the provisions above:

5. Which of the following describes your sexual orientation? Response options: Heterosexual, Homosexual, Bi-sexual or No Response.
6. Does the inmate appear to be: Heterosexual, Homosexual or Bi-Sexual?
8. Which of the following is how you describe your gender identity? Response options:
  - Cisgender – meaning you identify with the sex you were born as.
  - Transgender – meaning you identify with the opposite sex you were born as.
  - Gender nonconforming – meaning you look or behave opposite than society expects for your

sex.

- Intersex – meaning you were born with a combination of both male and female sex organs.
- No response

The use of homosexual is an out dated term and pejorative. The agency should adopt and incorporate terms and definitions (when available) consistent with the PREA standards (lesbian, gay, transgender, gender nonconforming, intersex). One cannot determine an inmate's sexual orientation by their physical appearance or mannerisms; this is an internal emotion, romantic or sexual desire of another. Intersex means a person who's sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometime referred to as disorders of sex development, and thus is a medical condition.

In an effort to create a more inclusive, respectful and professional interaction with all inmates, the agency should update their terminology and definitions within the PRAT. It is imperative that staff strive to develop a professional and non-judgmental rapport with the inmate in encourage honest, complete and accurate responses. The information obtained from inmates will be used to inform housing, bed, work, education, and program assignments with the goal of keeping separate those at high risk of being sexually victimized from those of at high risk of being sexually abusive.

115.41 (e) SCI Retreat has adopted an agency written policy DC-ADM 008, that states in part the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT). The following questions are part of the PRAT tool and the number below corresponds to the number of the question within the PRAT:

1. Have you ever been convicted of a crime using force or threat of force?
2. Does your current offense involve either personal violence or any sexual act?
10. Have you ever victimized someone either physically or sexually before this incarceration?
12. Have you ever sexually victimized anyone while incarcerated?
13. Did any of your current or prior offenses involve sexually victimizing a child victim?
14. Did any of your current or prior offenses involve sexually victimizing an adult victim?

The auditor reviewed the PRAT questions during the pre-onsite phase of the audit (in hard copy form) and again with specialized staff during the onsite phase of the audit. When viewing the agency's WebTAS system, 22 questions are programmed into the software, changes/deletions of questions cannot occur. The auditor determined through inmate interviews that the above questions are utilized when staff administers the PRAT. These questions are used to assess an inmate's for risk of being sexually abusive.

115.41 (f) 1-2 SCI Retreat has adopted an agency written policy DC-ADM 008, that states in part the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT). The PRAT shall be completed in the agency's WebTAS system, which is the agency's automated electronic inmate information software. A reassessment shall be conducted between day 20 and 30 of every inmate's arrival to the facility.

The auditor was able to interview specialized staff who demonstrated for the auditor how they perform a weekly query in the WebTAS system for PRAT reassessments are due to be completed and or overdue (did not occur during the past 12-month review period). An email

communication is sent to staff responsible for completing the reassessments and when the reassessment has been conducted, the WebTAS system automatically assigns the date and time completed within the system.

During the onsite phase of the audit, the auditor and a specialized staff member were reviewing information within WebTAS and the auditor noticed a screen that listed an inmate from the facility as having a 30 day reassessment risk screening overdue by 453 days. This was shared with the PCM and agency PC. It was explained that there is a “glitch” in the software system that periodically provides false data as a result of an inmate movement. In this particular case, the inmate had been at the facility and departed while the audit team was onsite. Therefore, the data in WebTAS stating the inmate’s risk re-assessment was past due and inaccurate. When staffs were asked how often and what type of “errors” occurs in the system, staff were unable to quantify the occurrences or explain in detail any other performance issues. The auditor recommends developing a tracking system or log to record software system errors. This would assist in monitoring the software’s performance and provide documentation of corrective action taken in response to system errors.

The auditor reviewed five random records in WebTAS with staff to determine if those five inmates had received a risk reassessment within 30 days of arriving at SCI Retreat. The records showed that between 20 and 30 days, a PRAT had been administered to the five inmate files that were reviewed. During random inmate interviews, confirmed that they had received a PRAT with their counselor within the first month of arriving to the facility.

115.41 (g) SCI Retreat has adopted an agency written policy DC-ADM 008, that states in part the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT). Six inmate files were reviewed during the pre-onsite audit phase and an additional five investigative file reviews occurred during the onsite audit review. These were investigations of allegations of sexual abuse or sexual harassment. All the files included documentation noting that a risk assessment “other” had been completed and the inmate had therefore been reassessed for being at high risk of being sexually victimized/sexually abusive. The PCM confirmed this process is in place and routinely occurs when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may bear on the inmate’s risk of sexual victimization or abusiveness. The check box “other” is the means used to state this type of review has occurred distinguishing it from an initial risk assessment or re-assessment.

As stated in the agency policy, an inmate’s risk level shall be reassessed by the PREA compliance manager, utilizing the PRAT, when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate’s risk of victimization or abusiveness. The auditor corroborated that the facility practices were consistent with the agency policy and this element of the standard.

115.41 (h) SCI Retreat has adopted an agency written policy DC-ADM 008, that states in part the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT). Inmates shall not be disciplined for refusing to answer, or for not disclosing completed information in response to the questions regarding prior victimization, disabilities, their perception of vulnerability, or their sexual orientation.

The auditor had several informal conversations with staff that are trained and responsible for administering a risk assessment, to include the PCM. All stated if an inmate refuses to answer the PRAT questions, the staff member administering the tool shall document that the inmate refused to answer the questions. The staff member shall also discuss with the inmate the importance and reason for honestly answering the questions on the risk assessment for safety purposes.

115.41 (i) The agency has developed a PREA Risk Assessment Tool (PRAT) training curriculum to deliver training for staff who administer the PRAT. Staffs who participate in the training are provided a PREA Risk Assessment Tool User Guide. Included in the user guide is a section that is titled "Confidentiality". The information and instruction provided to staff includes:

- Security access controls limit editing and view access to the PRAT electronic data.
- Access to the data/printed reports must be handled with caution so the information is not used to the inmate's detriment.
- Information will only be shared with other staff that has a "need to know".
- Staff shall not divulge the inmate's PRAT score to the inmate nor the inmate's PRAT classification.

During the onsite audit review, the auditor met with two staff who administers the PRAT. They were able to demonstrate the security features of the WebTAS system specific to the PRAT. Once staff completes a PRAT by "submitting" the assessment, the user can no longer access the report completed. Staff identified by their job responsibilities/classification and are trained in the use of the PRAT are the only individuals authorized by the agency system to log into and access the PRAT data and information. Security settings are established in the software and access to this sensitive information is accomplished by password protection controls.

Corrective Action:

1. Adopt terms and definitions current and consistent with the PREA standards and in training information provided by the National PREA Resource Center for use in agency policy, objective screening instrument, training curriculum and staff user guide.
2. Eliminate compound assessment questions and replace with singular.
3. Develop a training curriculum that informs staff on the importance and means by which to have effective and professional communication with LGBTI inmates. This requires a basic understanding of:
  - Sexual orientation;
  - Gender identity;
  - Gender expression;
  - How sex is assigned at birth;
  - Staff's own gaps in knowledge and cultural beliefs;
  - How the above factors may impact the ability to conduct effective interviews and assessments;
4. Request technical assistance from the National PREA Resource Center (PRC) to develop an objective risk screening instrument. The PRC provides technical assistance when awarded at no cost.
5. Establish oversight and monitoring of the WebTAS to assess "glitches" in the system

**POST INTERIM CORRECTIVE ACTIONS:**

Following the issuance of the interim report, the PREA audit team coordinated multiple conference calls with the Pennsylvania Department of Corrections (PA DOC) PREA coordinator to discuss the process of revising the PREA risk assessment tool (PRAT) that was being utilized at SCI-Retreat. Upon agreement between the PREA audit team and the Pennsylvania Department of Corrections, a request for technical assistance was issued to the PREA Resource Center. Ms. Bernadette Brown was selected by the PRC as the consultant for the revision of the PRAT.

In coordination with Ms. Brown, the PREA audit team and PA DOC agreed to the recommended changes to the PRAT. A final version of the PRAT was provided to the PREA audit team on May 9, 2018. The PA DOC then conducted five webinar training sessions for agency staff involved with the PRAT on May 23-25, 2018. Training records were also provided by SCI-Retreat to verify that the training had been completed. The revised PRAT was deployed on the PA DOC WebTAS on May 24, 2018. In June, 2018 a bulletin was finalized and signed by the PA DOC Secretary on the changes being made to department policy DC-ADM 008, Section 2, Sexual Abuse/Sexual Harassment Prevention and Training, PREA Risk Assessment Tool (PRAT) (Attachment 2-E).

On July 23, 2018, members of the Wisconsin PREA audit team conducted a post-onsite audit at SCI-Retreat to review the completion of the revised PRAT. During the second on-site audit, a Registered Nurse who completes the initial assessment and a counselor who conducts reassessments were interviewed. Additionally, 10 inmates were interviewed who were randomly selected from the facility's admission database for June and July, 2018 in order to verify that the revised PRAT was being utilized. Similarly, the PRAT's for these inmates were also reviewed on the agency's WebTAS to confirm the use of the revised PRAT. The auditors were also able to observe a PRAT being completed with an inmate and counselor.

Based upon the revision to the PA DOC PRAT, staff training, bulletin revision, and on-site verification of the PRAT's use through WebTAS, staff and inmate interviews, the auditor determines that SCI-Retreat has demonstrated compliance with the provisions of this standard.

115.42	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 9 – Working with Transgender and Intersex Inmates</li> <li>c. PREA Risk Assessment Tool (PRAT)</li> <li>d. Gender Review Committee (GRC) Checklist form</li> <li>e. Institutional High Risk/Sexual Predator list</li> <li>f. Institutional High Risk Victim list</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Specialized Staff</li> <li>c. Targeted Inmates</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. WebTAS system records (PRAT reports and information)</li> </ol> </li> <li>4. Findings (By Provision):</li> </ol> <p>115.42 (a) SCI Retreat has adopted a comprehensive agency written policy DC-ADM 008 (pp. 10-13) that states all inmates shall be assessed for risk of being sexually abused by other inmates or sexually abusive toward other inmates. Staff use the PREA Risk Assessment Tool (PRAT) results to make these assessments. The information received through the administration of the PRAT questions shall be used to inform housing, bed placement, work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive.</p> <p>The auditor discussed the practicality and use of the PRAT with numerous staff within the facility. There is a clear understanding and process established that staff shall not make a housing unit, bed, work, program or education assignments without prior approval from the program, work supervisor and or unit manager of the housing unit etc. The approval of these types of moves or assignments is provided to those management and department heads that have access to viewing the confidential and restricted information in the Unit Management System WebTAS (inmate electronic information system). The WebTAS has user security roles built into to the software allowing only staffs that has a working need to know access to restricted screens and information within the system; WebTAS.</p> <p>115.42 (b) The auditor discussed the use of the PRAT information with numerous staff within the facility and held specialized staff interviews while onsite. Staff was able to articulate the</p>

important safety and security needs for assessing each individual inmate for being at high risk of sexual victimization and or high risk of being sexually abusive. Additionally staff shared that when an inmate is identified of being at high risk of sexual victimization; staff is responsible for keeping separate an inmate who is at high risk for being sexually abusive (housing, program, work assignments). An example would be that an inmate of being high risk for sexual victimization would not be celled together with an inmate who has been identified as high risk for sexual abusiveness.

There is a clear understanding and process established that line staff shall not make an inmate housing, bed, work, and program or education assignment without prior approval from the program, work supervisor, or unit manager as appropriate. The approval of these types of moves or assignments is provided to those management and department heads that have security controlled access to viewing the confidential and restricted information in the inmate electronic information system.

115.42 (c) SCI Retreat has adopted a comprehensive agency written policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section – 9 Working with Transgender and Intersex Inmates (p. 9-2). Once an inmate has been identified as transgender or intersex individual, immediate notification shall be sent to the PREA Compliance Manager (PCM).

The PCM shall meet privately with the inmate within five days of notification and complete the Gender Review Committee (GRC) Checklist.

Within five business days of meeting with the inmate, the PCM shall schedule a meeting of the Gender Review Committee. The purpose of the GRC is to make individualized determinations about transgender or intersex inmates' housing and programing assignments to ensure their safety. Targeted inmates, who were interviewed by the auditors regarding this process, stated they had participated in the GRC sessions and felt their comments and feedback were heard and taken seriously. They also stated they were asked about their safety specific to their housing, work and program assignments. The auditor reviewed five GRC files and found that all questions had written responses, to include comments from the inmate and staff signatures with dates as required per the form and policy.

115.42 (d) SCI Retreat has adopted a comprehensive agency written policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section – 9 Working with Transgender and Intersex Inmates (p. 9-2). Policy states, once an inmate has been identified as transgender or intersex individual, immediate notification shall be sent to the PREA Compliance Manager (PCM).

The PCM shall meet privately with the inmate within five days of notification and complete the Gender Review Committee (GRC) Checklist. Following the initial assessment, the inmate shall be reassessed every six months to review any threats to safety experienced by the inmate.

The auditor received confirmation from the PCM and other staff who participate on the GRC that the above outlined process occurs. Documentation review (five files) of the GRC checklist and interviews with inmates further corroborated these processes.

115.42 (e) SCI Retreat has adopted a comprehensive agency written policy DC-ADM 008,

Prison Rape Elimination Act (PREA) Procedures Manual Section – 9 Working with Transgender and Intersex Inmates (p. 9-3). The policy states in part that a transgender/intersex inmate's own views, with the respect to his/her own safety shall be given serious consideration.

When completing the Gender Review Committee (GRC) Checklist, one of the questions asked of the inmate is under the Safety/Security Considerations: "Explain whether your current housing placement represents a safety or security concern." The inmate's response is recorded on this form to include staff's recommendations and responses. The auditor reviewed five GRC files which contained comments/quotes from the inmate in response to the questions on the GRC checklist. Some of those questions are as follows:

- Gender at birth?
- Which gender do you identify as?
- How long have you been living as that gender?
- Have you had a gender-affirming surgery?
- Explain whether your current housing placement represents a safety or security concern.
- Does the inmate present as gender non-conforming?
- Does the inmate concur with the GRC recommendations for housing placement?
- The auditor observed a common question asked of the inmate "do you want separate showering times?"

Each of the inmates of the targeted population interviewed stated they felt safe at the facility and felt they could and would contact staff if they had sexual safety concerns.

115.42 (f) SCI Retreat has adopted a comprehensive agency written policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section – 9 Working with Transgender and Intersex Inmates (p. 9-6). The policy states in part that transgender/intersex inmates shall be given the opportunity to shower separately and privately from other inmates. The auditor observed on several of the GRC checklist forms that the PCM had inquired if the current shower procedures were adequate or if the inmate wanted the opportunity to shower at a different time (to provide privacy). The facility may also make housing unit assignments that allow for single showering in a one person shower stall that provides privacy from staff and inmates which was observed during the onsite audit. This auditor corroborated that transgender and intersex inmates are offered an opportunity to shower separately from other inmates when targeted inmates were interviewed and specialized staff. The auditor also observed documentation on the GRC checklist form that inmates are offered an opportunity to shower separately from other inmates and the inmate's response was documented.

115.42 (g) SCI Retreat has adopted a comprehensive agency written policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section – 2 (p. 2-13) the policy states that the department shall not place lesbian, gay, bi-sexual, transgender and intersex (LGBTI) inmates 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 judgement for the purpose of protecting LGBTI inmates.

Interviews with PCM, specialized staff and targeted inmates during the onsite portion of the audit, corroborated that LGBTI inmates are not housed in a dedicated unit or housing area

within the facility. During the onsite review of the facility, the auditors did not observe any segregation or separation of LGBTI inmates into dedicated units or wings. Those that identified as LGBTI were intermingled within the inmate general population of the facility. The agency PC and the facility PCM reports SCI Retreat is not under any decree or order to separately house LGBTI inmates.

Corrective Action: None

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.43 Protective custody.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training</li> <li>b. DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 1 – Placement in Administrative Custody Status</li> <li>c. Initial Response Check List – Alleged Victim form</li> <li>d. Administrative Custody Services Access Restriction form</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Specialized Staff</li> <li>c. Random Staff</li> <li>d. Targeted Inmates</li> </ol> </li> <li>3. Site Review Observations:</li> <li>4. Findings (By Provision):</li> </ol> <p>115.43 (a) 1-2 SCI Retreat has adopted a comprehensive written policy DC-ADM 008 (p. 2-6), which states that an inmate at a high risk for sexual victimization or an inmate who has allegedly suffered sexual abuse shall not be placed involuntarily in Administrative Custody (AC) as a means of protection unless an assessment of all available alternatives has been made by psychology and security staff in conjunction with the facility manager/designee, and a determination has been made that there is no other available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the inmate in involuntary AC for less than 24 hours while completing the assessment.</p> <p>The PREA compliance manager and other specialized staff report that zero inmates were placed in involuntary segregated status/AC during the past 12 months as a result of being at a high risk for sexual victimization or when an inmate alleged sexual abuse. This was further corroborated through inmate interviews during the onsite portion of the audit.</p> <p>115.43 (b) 1-3 SCI Retreat has adopted a comprehensive written policy DC-ADM 008 (p.2-6), which states that when an inmate at a high risk for sexual victimization or an inmate who has allegedly suffered sexual abuse and a determination has been made that there is no other available alternative means of separation from likely abusers or the assessment cannot be conducted immediately, the facility may hold the inmate in involuntary AC for less than 24 hours.</p>

Access to programs, privileges, education, or work opportunities shall be afforded to that inmate to the extent possible. If the facility restricts access to these opportunities, the facility shall document in the Involuntary Administrative Custody Services Access Restriction form. The form requires staff to document; the opportunities that have been limited, the duration of the limitation and the reasons for such limitations.

The PREA compliance manager and other specialized staff report that zero inmates were placed in involuntary segregated status/AC during the past 12 months. Not for any period of time as a result of being at a high risk for sexual victimization or when an inmate alleged sexual abuse. This was further corroborated through inmate interviews during the onsite portion of the audit.

115.43 (c) The PREA compliance manager and other specialized staff report that zero inmates were placed in involuntary segregated status or AC during the past 12 months as a result of being at a high risk for sexual victimization or when an inmate alleged sexual abuse. This was further corroborated through inmate interviews during the onsite portion of the audit.

115.43 (d) SCI Retreat has adopted a comprehensive written policy DC-ADM 008, Section 1 - Placement in Administrative Custody (p.1-2), which states that when an inmate at a high risk for sexual victimization or an inmate who has allegedly suffered sexual abuse would be placed involuntarily in AC, this would occur only until an alternative means of separation from likely abusers can be arranged and such assignment shall not ordinarily exceed 30 days.

If an involuntary AC placement is made, the facility shall clearly document on the DC-141, Part 1 Report the following; basis for the staff member's concern for the inmate's safety, other alternative means of separation that were explored and the reason why no alternative means of separation can be arranged.

115.43 (e) SCI Retreat has adopted a comprehensive written policy DC-ADM 008, Section 1 - Placement in Administrative Custody (p.1-2), which states at least every 30 days, the Program Review Committee (PRC) shall ensure each such inmate is reviewed to determine whether there is a continuing need for separation from the general population. This review shall be documented on the DC-141, Part 3 Report form. PRC review of PREA related cases shall include the PREA compliance manager as a member of the reviewing committee.

The specialized staff report no such placement or review has occurred in the last 12 months.

Corrective Action: None

115.51	<b>Inmate reporting</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>§115.51 – Inmate reporting.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Pennsylvania Department of Corrections Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li> <li>b. Random criminal and administrative investigations.</li> <li>c. Abuse hot-line e-mail.</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Investigative staff</li> <li>b. Random staff</li> <li>c. Random inmate</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. PREA Posters within the facility.</li> <li>b. Abuse hot line</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.51 (a). SCI Retreat has adopted a comprehensive agency policy that allows for a variety of mechanisms to report sexual abuse, sexual harassment and retaliation. PA DOC policy DC-ADM 008 section three states in part that staff shall accept and document reports made verbally, in writing, anonymously, and from third parties and promptly forward to the facility’s designated investigators.</p> <p>During the onsite portion of the audit, the auditor observed that there were PREA posters readily accessible visible throughout the institution that provide instructions on reporting sexual abuse and sexual harassment. The poster information included:</p> <ul style="list-style-type: none"> <li>- Written or verbal report to staff</li> <li>- Submit a DC 135A- inmate request to staff member</li> <li>- Report in writing to Sexual Abuse Reporting Address: BCI/PREA Coordinator 1800 Elmerton Av, Harrisburg PA 17110</li> </ul> <p>The BCI is the Bureau of Criminal Investigations which is a part of the Pennsylvania State Police.</p> <p>Although the inmate handbook indicates inmates are not to report allegations of sexual abuse or sexual harassment via the inmate grievance system, a review of investigative files showed that inmates report allegations through the grievance system. Allegations received via the inmate grievance system are dismissed to eliminate time lines and referred to the security supervisors for entry into WebTas. This initiates the investigative process.</p> <p>Random inmate and staff interviews indicate that all persons believed there was a telephone PREA hot line available to inmates and/or staff to make reports. The PREA Compliance Manager (PCM) indicated that the telephone PREA hot line was removed from the facilities</p>	

approximately two years ago. Staff interviews indicate that while this phone was intended for inmates, staff believed it was available for their reporting as well.

During the onsite portion of the audit, posters were observed through-out the facility. There are special telephones, mounted near the staff desk and available to inmates in the facility cell blocks specifically to report physical abuse. These phones have a poster near them indicating inmates can call the abuse hotline. The auditor called the hotline and found this telephone reporting system is answered with an automated response directing inmates to hang up if they are reporting sexual abuse or sexual harassment and to submit the report in writing to the Pennsylvania State Police (PSP). This was brought to the PREA coordinator's attention, at the agency level, during the audit.

The PREA coordinator responded on 1/23/18 as follows; "Per our discussion following the Dallas and Retreat audits, the message for the abuse hotline has been modified and now eliminates the direction for individuals calling with sexual abuse/sexual harassment complaints to write to the third-party reporting address with the state police. You can test the line using the toll-free number of 1-800-677-0330." This toll-free number has not been tested. There will need to be additional training for staff as well as providing additional information to inmates.

The auditor noticed that inmates are not able to report anonymously using the abuse hot line because they have to enter a PIN number. They are however able to report anonymously by writing the BCI/PREA Coordinator, which is not associated with Pennsylvania Department of Corrections (PA DOC). Per the PA DOC inmate handbook, mail addressed to BCI/PREA Coordinator is to be treated as legal mail and does not require an inmate name and ID number. The information from this reporting mechanism is forwarded to PA DOC Central Office, who then reports the information to SCI Retreat Investigation staff. This was verified through staff interviews.

When interviewed, staff reported that they are aware of and accept a variety of ways that inmates make a report, such as verbal or written report to staff. Staff knows that inmates as well as staff can write to Central Office or have family members make reports for them. A random sample of staff interviews also indicates that they accept anonymous written reports. The anonymous reports go to their shift commander or the Investigative staff.

DC-ADM 008 requires that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.

A review of the PREA database over the past 12 months showed the methods by which allegations were reported. The majority of reports were verbal or written to staff. Interviews with staff indicated that they have knowledge of and follow their reporting responsibility and are required to report the allegations to the shift commander and submit a written report detailing the allegations. (DC-121)

Random and specific interviews with inmates indicate that they are made aware of the variety of methods that are available to report sexual abuse and sexual harassment during their orientation. Inmates said they can get the address from posters visible throughout the institution and through the inmate PREA television channel. Inmates said they are able to report verbally to any staff. Many inmates said they would report to their assigned counselor. Inmates reported the other ways for them to report are report, in writing or have friends and family make reports on their behalf.

When interviewed staff, volunteers and contractors said they were informed of their reporting responsibility as part of the annual PREA training and block refreshers as well as by the posters made available throughout the facility.

115.51 (b). Inmates may report by writing to:

BCI/PREA Coordinator

1800 Elmerton Av, Harrisburg PA 17110

There were posters posted throughout the facility in both English and Spanish with the above information.

Interviews with random inmates indicate that the inmates were aware of how to report allegations of sexual abuse and sexual harassment. The inmates said they can tell staff, write a complaint or call the abuse hot line. Some of the inmates said they saw the PREA posters and know there is an address on there to write to. The auditor would recommend that SCI Retreat somehow distinguish that the BCI/PREA Coordinator for the PSP is different that the SCI Retreat PREA Coordinator, so inmates know they are writing to an outside source. There were no inmates detained solely for civil immigration purposes at SCI Retreat during this audit per the PCM.

115.51 (c). Interviews with staff indicated that they have knowledge of and follow their reporting responsibility. They are required to report the allegations to the shift commander and submit a written report detailing the allegations. (DC-121)

115.51 (d). Staff interviews indicate that SCI Retreat staff believed they could call the Abuse hotline to make a report, they also reported that they can speak with the shift commander in a private setting if they requested it to report sexual abuse/ sexual harassment or retaliation.

Corrective Action: None

115.52	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.52-Retreat</p> <p>1. Policy and Documents Reviewed:</p> <ul style="list-style-type: none"> <li>• -Completed Pre-Audit Questionnaire submitted by SCI Retreat</li> <li>• -Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures</li> <li>• -Random investigation files</li> </ul> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>PA DOC policy DM-ADM 008 Section three, page two addresses what happens when a written report of sexual abuse or sexual harassment is put in the inmate grievance lock box. The policy states in part, "These written reports may be submitted, either as identified above, or through the facility grievance lock-boxes located on every housing unit within the facility. These lock-boxes are accessible only by approved management staff, and reports shall be forwarded for review and action, as outlined with in this policy. Inmates shall utilize the grievance system in accordance with Department policy DC-ADM 804, Inmate Grievance system, to report inmate-on-inmate sexual harassment allegations, which include repeated and unwelcome sexual advances, requests for sexual favors, verbal comments, gestures, or actions of a derogatory or offensive sexual nature.</p> <p>Inmates shall not use the inmate grievance system to report sexual abuse or sexual harassment by a staff member or inmate-on-inmate sexual abuse, as identified in the glossary of terms for this procedures manual. However, if an inmate files a grievance related to staff on inmate sexual abuse/sexual harassment or inmate- on- inmate sexual abuse, the Facility Grievance Coordinator shall reject the grievance and forward it to the Facility Security Office and PREA Compliance Manager (PCM)/designee for tracking and investigation. The inmate shall be notified of this action" A review of the Grievances uploaded into the PAQ as well as a review of random investigations indicates the policy is followed</p> <p>Subsection (b)</p> <p>In the PAQ SCI Retreat indicates that inmates do not use the inmate grievance system to report sexual abuse or sexual harassment by staff. A review of the documents SCI Retreat uploaded into the PAQ indicates that inmates do use the inmate grievance system to report staff sexual abuse and sexual harassment although the Grievance Coordinator follows DOC policy DC-ADM 008 and dismisses the grievance and refers it to the PCM and Facility Security Office for investigation.</p> <p>Subsection (c)-(e)</p> <p>NA</p> <p>Corrective Action: None</p>

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Pennsylvania Department of Corrections Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li> <li>b. Pre-Audit Questionnaire (PAQ)</li> <li>c. Victim Resource Center (VRC) Memorandum of Understanding (MOU)</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Targeted Inmates</li> <li>b. Random Inmates</li> <li>c. VCR Staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. PREA Posters throughout the facility.</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.53 (a). SCI Retreat has adopted a comprehensive agency policy DC-ADM 008 Section 2 that states in part that inmates shall be provided access to outside victim advocates for emotional support services related to sexual abuse. The PA DOC PREA coordinator duties include, coordinate with the Pennsylvania Coalition Against Rape (PCAR), to ensure that the Department is providing all related parties with the most current information on sexual abuse and sexual harassment.</p> <p>SCI Retreat has adopted PA DOC policy, DC-ADM 008 Section 4, E Inmate Access to Outside Support Services. This portion of the policy states in part, "The PCM shall ensure that inmates are offered and provided with access to outside victim advocates for emotional supportive services related to sexual abuse which has occurred in a confinement setting. During non-working hours, the Shift commander shall be responsible to ensure the aforementioned support services. Supportive services may be provided via a variety of methods including in person, during a non-monitored phone call, and/or in writing. The preferred service delivery method is in person in a confidential setting." The auditor interviewed staff at the Victim Resource Center. The staff stated they provide this service upon request in the form of a face to face visit at the facility. The auditor also noticed on the webpage for PCAR that there is a link to VRC.</p> <p>Contact information for the BCI/PREA Coordinator is made available on posters for inmates throughout the institution. This was verified though on-site observations. BCI/PREA coordinator is the Bureau of Criminal Investigation for the Pennsylvania State Police. (PSP). According to the PCM, the PSP would contact the SCI Retreat PCM who would then make the request to VRC for the inmate. There was not a method for inmates to contact VCR directly. During the onsite portion of the audit, interviews were conducted with random inmates who reported prior sexual abuse. These inmates stated that they have had contact with the outside service providers for emotional support, but the majority of their support comes from the DOC counselor they are assigned to. Some of the randomly interviewed inmates stated they were</p>

aware of the PREA posters throughout the facility. The inmates would talk to their counselor to report sexual abuse or sexual harassment or contact a family member before writing to the BCI/PREA coordinator. SCI Retreat has entered into an MOU with the VRC in Wilkes Barre, Luzerne County, and secured services of a qualified staff as a victim advocate service provider. The auditor was able to verify the MOU agreement and conducted additional interviews of VRC staff. The VRC provides emotional support services for victims of sexual assault and other crimes in Luzerne County PA. VRC staff stated that persons employed by this agency are qualified to serve in this role and received education concerning sexual assault and forensic examination issues in general. They have assisted in training SCI Retreat staff about victim dynamics in regard to sexual assault. Services are limited to inmates who alleged sexual misconduct at SCI Retreat. When requested by the inmate alleged victim of sexual abuse, a victim advocate from VRC goes to SCI Retreat and meets with the inmate to provide emotional support, crisis intervention, information, and referrals. The audit team members interviewed staff of the VCR during the pre-onsite phase of the audit. Staff stated they have visited SCI Retreat many times in the past year to meet with inmates although they were not able to provide a specific number of visits. The VCR staff shared they were able to meet with inmates in a private setting without SCI Retreat staff observing or being present in the room. VCR staff lets the inmate know that VRC will maintain privacy with the exception of information they are mandated to report such as child abuse or domestic violence. The VRC staff said they have mailed pamphlets and other material to inmates who have made allegations at SCI Retreat. They have also been able to give written information directly to inmates during a meeting at the facility, as long as security approves the material. They have not experienced any difficulty in gaining access to inmates or providing information or support materials.

115.53 (b). The PA DOC Policy DC-ADM 008 Section 4 states in part, “The PCM shall inform inmates, 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”.

Random inmates who were interviewed by the auditors while on site stated they are aware that somethings said to the VRC advocate may not be private and the advocate may have to report the information to the PSP.

115.52 (c). The auditor was able to view the current MOU with SCI Retreat and VRC that was uploaded into the PAQ.

Corrective Action: None

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.54-Retreat</p> <p>1. Policy and Documents Reviewed:</p> <ul style="list-style-type: none"> <li>• -Completed Pre-Audit Questionnaire submitted by SCI Retreat</li> <li>• -Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li> </ul> <p>Subsection (a)</p> <p>The agency provides a method to facilitate third-party reporting of inmate sexual abuse or sexual harassment. PA DC-ADM 008 section 3 states in part, " Methods of reporting include the following"- submitting a written report to the sexual abuse reporting address BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110.</p> <p>A writer may choose to include his/her name and contact information, but it is not necessary in making a report; complaints can be made anonymously. "</p> <p>The Pennsylvania DOC has a website which includes PREA Policy number DC-ADM 008. Section 3 page 4, item D, Methods of Reporting for Friends, Family and the General Public. This section provides the above information for public review.</p> <p>There were also many posters visible during a tour of the facility with the address for the BCI/PREA coordinator. The posters are available in both English and Spanish. The inmate PREA channel also had the information playing on the televisions throughout the facility.</p> <p>Corrective Action: None</p>

115.61	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.61-Retreat</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 3 (PREA Procedures Manual)</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• DC-121 Employee Report of Incident form (4 Examples)</li> <li>• DC-484, Mental Health Informed Consent Document</li> <li>• Mental Health Contact Notes</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Random Staff</li> <li>• Medical and Mental Health Staff</li> <li>• Superintendent</li> <li>• PREA Coordinator</li> </ul> </li> </ol> <p>Findings:</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-3:C(1)]) requires all staff to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in any facility, whether it was at the current facility or any other facility or part of another agency; retaliation against inmates or staff who reported such an incident and/or staff neglect violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>Auditor reviewed the PAQ and copies of the employee incident reports regarding allegations of sexual abuse or sexual harassment of inmates. The interviews with the Random Staff indicated that they are aware of their responsibility to immediately report allegations of sexual abuse or sexual harassment regardless of how they are notified. Some of the staff reported they would additionally have the inmate call the toll free PREA Hotline number. This does not exist. Information was shared with PREA Compliance Manager. They also indicated they would file an Incident Report.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-3:C(4)]) requires that apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse allegation to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decision, where sexual abuse with an inmate is reported. The interviews with the Random Staff reported they would immediately contact the on duty Shift Commander or the PREA lieutenant, or the PREA Compliance Manager but they would not share the information other than with staff that has a need to know.</p> <p>Subsection (c)</p>

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-3:C(2)]) requires that unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse, to inform inmates of the practitioner's duty to report, and the limitation of confidentiality, at the initiation of services. The interviews with the Medical and Mental Health staff indicated that prior to conducting the interview with the inmate, they will read the portion of the DC-484 and have the inmate sign, indicating their need to report and explain it is for the inmate's protection and shall be shared only on a need to know basis with indicated staff (i.e. Counselor, Sexual Abuse Review Team, Pennsylvania State Police, etc.) They all stated they would explain further if the inmate did not understand. Staff reported they understand their responsibility and the confidentiality requirements for inmate medical and mental health Information pursuant to this policy. Both Medical and Mental Health staff indicated they would follow up with the other discipline to assure compliance with policy. They would also report to PREA Compliance Manger, PEA Lieutenant, or Shift Commander.

Subsection (d)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-1: A (5)]) requires if the alleged victim is under the age of 18, the Department shall refer the allegation to the designated State or local services agency under applicable mandatory reporting laws. Policy ADM 008, Section 2 (PREA Procedure Manual [page 2-7:8]) mandates that male youthful offenders shall be transferred to SCI-Pine Grove within 24 hours of reception by the Department. Female youthful offenders, under the age of 18 shall immediately be placed into the Youthful Inmate Unit at SCI-Muncy. SCI-Retreat reported that inmates under the age of 18 are not housed at the facility. While on site the Auditor reviewed the ages of the inmates housed at SCI-Retreat to verify that youthful inmates are not at SCI-Retreat, this information was located on the PA DOC public website. The interviews with the Superintendent and the PREA Coordinator confirmed this population is not housed at SCI-Retreat.

Subsection (e)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-1:A(3)]) require staff to accept and document reports made verbally, in writing, anonymously, and from third parties and promptly forward to the facility's designed investigators. During the on-site review the Auditor examined a sample of investigations and noted the PREA Lieutenant was informed of each allegation as documented. Interview with the Superintendent confirmed this is the practice, noting know matter how ambiguous or anonymous the allegation is, the information gets forwarded to PREA Lieutenant.

Corrective Action: None

<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.62-Retreat</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 2 (PREA Procedures Manual)</li> <li>• ADM 008, Section 4 (PREA Procedures Manual)</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• Inmate Query-Cell History of alleged victim and perpetrator</li> <li>• Initial Response Checklists of alleged victims</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Superintendent</li> <li>• Random Staff</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 2 and 4 requires that when Department staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action shall be taken to protect that inmate. During the Pre-audit phase, SCI- Retreat reported that there have been 13 instances within the past 12months. Auditor also examined the attached Inmate Query-Cell History and the Initial Response checklists from actual incidents and noted the practice followed policy and what SCI-Retreat reported, moving inmate immediately, without unreasonable delay. The interview with the Agency Head indicated, they would separate the inmates immediately. (Administrative Seg for any alleged victim would be the very last resort). They have an extraordinary occurrence reports (EOR) that are reviewed by the deputy. They would not segregate the victim. Another option is to move them to another housing unit. Most prisons have an East or West section in a prison population of 2500. (Retreat has less than a 2500 population, but the ability to move inmates to other housing units) They could separate by East or West, they would also have the ability to transport them to another facility within the same region. They would remove the perpetrator immediately or move the victim to an alternate housing unit or prison. An interview with the Superintendent indicated they separate the alleged victim and abuser immediately and look to protect the victim. The interviews with the Random Staff verified the inmates (alleged victim and perpetrator) would be separated immediately, including not leaving alleged victim alone until this could take place as well as reporting and keeping alleged victim as confidential as possible.</p> <p>Corrective Action: None</p>

115.63	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.63-Retreat</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 3 (PREA Procedures Manual)</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• Attachment 3-B, Notification of Sexual Abuse Allegation to Another Facility form</li> <li>• Initial Response Checklists</li> <li>• Sexual Abuse Investigation Summary (Retreat)</li> <li>• Emails</li> <li>• Investigation packet</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Superintendent</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 3 (PREA Procedures Manual [page3-4: E (1)]) ensures an inmate may file a report of sexual abuse sustained while confined at another facility. It is the Facility Manager/designee’s responsibility to notify the head of the facility in which the reported abuse occurred. During the Pre-audit phase, SCI-Retreat reported 6 allegations that were received in the past 12 months that an inmate was abused while confined at another facility. Allegations were documented on the Notification of Sexual Abuse Allegation to another Facility. The information provided in the form was the dates, times, location of incident, the alleged abuser, alleged victim, whether it was a verbal or written notification, and actions taken upon notification of an incident. Emails were also reviewed regarding the “in writing” notification. The PREA Compliance Manager at both sites is responsible for coordinating the information process, but forwards on to the Superintendents.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 3 (PREA Procedures Manual [page3-4:E(1)]) requires that notification must be provided as soon as possible, but no later than 72 hours after receipt of information and documented on Notification of Sexual Abuse Allegation to Another Facility form. Five were reviewed. Four of the Five were reported to the other facility within 72 hours. One was 7 days late. This appears to be an isolated incident. All five were investigated and had proper Medical and MH Follow up. The alleged victims were also offered to see the Victim Resource Center.</p> <p>Subsection (c)</p> <p>Policy ADM 008, Section 3 (PREA Procedures Manual [page3-4: E (1)]) requires a Notification of Sexual Abuse Allegation to Another facility be maintained by the PREA Compliance Manager in an annual file for audit verification purposes. Facility was able to provide all documentation.</p>

Subsection (d)

Policy ADM 008, Section 3 (PREA Procedures Manual [page3-5: E (2)]) requires that allegations from another facility/agency is investigated in accordance with PREA standards and are the responsibility of the facility where the alleged abuse occurred. During the Audit phase, SCI-Retreat reported 1 allegation of sexual abuse which was received from another facility. Auditor reviewed the Notification of Sexual Abuse Allegation to Another Facility form, PREA Tracking System, and investigation packet, and found the allegation to be “unsubstantiated.” This information was sent back to sending facility.

The interviews with the Agency Head and Superintendent indicated that there would be an acknowledgement receipt of complaint from the Facility Manager. A tracking number would be issued and an investigation initiated. The initial investigation would be conducted at the institution level if it’s an administrative investigation. If it’s out of state, it would be assigned to OSII (Office of Special Investigations and Intelligence)for investigation. The Superintendent states they will investigate consistent with all other PREA investigation standards.

Corrective Action: None

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.64-Retreat</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 4 (PREA Procedures Manual)</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• Frist Responder Card</li> <li>• Medical Responder Card</li> <li>• Shift Commander Checklist</li> <li>• Initial Response Checklist (Alleged Victim and Alleged Abuser)</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Security Staff and non-Security Staff First Responders</li> <li>• Inmates Who Reported Sexual Abuse</li> <li>• Random Staff</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-1: A]) details the first responder duties required by this standard upon learning that an inmate was sexually abused. During the Pre-Audit phase, SCI-Retreat reported 67 allegations of sexual Abuse or harassment,39 of which are of sexual abuse in the past 12 months. Four of the 39 allegations were reported within the time period (96 hours) that would have allowed for the collection of physical evidence from alleged victim and alleged abuser. The Auditor reviewed the Shift Commander, Initial Response Alleged Abuser and Alleged Victim checklists. Both Sections A, B and C are marked, indicating the staff have placed the Victim in a safe location, Escorted the Alleged Victim and alleged Abuser to the Medical Department Separate times), Secured the Crime Scene, and both the alleged victim and alleged abuser were advised not use the bathroom, drink, wash, brush teeth, change clothes, smoke, or not smoke or drink/eat anything. The alleged victim stated they were separated from alleged abuser. One inmate during an interview indicated he was not separated. While at the facility, the Cell inquiry was reviewed and found the inmate was incorrect, and was moved away from alleged abuser. First Responders and Random Staff indicate an understanding of their first responder duties and an ability to articulate them to the Auditor. The staff indicated they would separate the inmates, secure the scene, and contact medical. The facility has provided staff with first responder cards that can easily be accessible in their pockets or their ID badge holders when responding to an incident. The interviews with the inmates who Reported Sexual Abuse indicated they were taken directly to medical and were advised not use the bathroom, drink, wash, brush teeth, change clothes, smoke, or not smoke or drink/eat anything. They stated they were separated from alleged abuser.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-1: A (2)]) distinguishes the first responder duties for security staff versus non-security staff. Security Staff are required to notify the Shift Commander, immediately separate the alleged victim and alleged abuser,</p>

secure any reported crime scene until appropriate steps can be taken to collect evidence, and if abuse occurred within the last 96 hours that still allows for the collection of physical evidence, request the alleged victim and ensure that the alleged abuser not take any actions that could destroy physical evidence, including as appropriate washing brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Non-Security Staff are required to immediately notify the Shift Commander, if the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence. The interviews with Security Staff and non-Security Staff First Responders indicated they would immediately contact the shift commander, separate the inmates, secure the scene, contact medical, advise inmates not to use the bathroom, drink, wash, brush teeth, change clothes, smoke, or to not smoke/drink/eat. The interviews with the Random Staff indicated that they were trained in PREA and were able to report what they needed to do. Some needed to utilize their pocket First Responder Card. Medical staff additionally have a Medical First Responder Card.

Corrective Action: None

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.65-Retreat  Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Dallas Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, PREA Manual,</li> <li>• SCI-Retreat Procedures Manual, effective September 11, 2017</li> </ul> </li> <li>3. Interviews with the following: <ul style="list-style-type: none"> <li>• Superintendent</li> </ul> </li> </ol> <p>Findings (by subsection):  Subsection (a)  Policy ADM 008, PREA (SCI-Retreat Coordinated Response Plan) details SCI-Retreat coordinated response plan for actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators and Facility leadership. The Auditor reviewed the plan and noted that in addition to actions take in response to an incident of sexual abuse, there are also attachments for initial response – victim, initial response-abuser, shift commander-coversheet/checklist, PREA First Responder Duties, Medical department duties, sections pertaining to data collection, Post Sexual Assault Interview, Review of misconduct, Inmate notification, Mental health Informed Consent Document, and information on the Victim Resource Center. An interview with the Superintendent confirmed the Coordinated Response Plan is discussed and trained with staff on a yearly basis.</p>
	Corrective Action: None



115.66	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>
	<p>115.66-Retreat Evidence Reviewed</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Documents <ul style="list-style-type: none"> <li>• Suspension Pending Investigation Memo &amp; Procedures</li> <li>• H-1 Act 195 Interest Arbitration Award 2014</li> <li>• FOSCEP MOU</li> <li>• FOSCEP Side letter 7-01-16 to 06-30-19</li> <li>• PSCOA Interest Arbitration Award 2014-2017 Miller.pdf</li> <li>• SEIU HC PA Side letter 7-1-16 to 6-30-19</li> <li>• SEIU Healthcare Side Letter dated: 2-17-17</li> <li>• SEIU Local 668 Contract-Salary Side Letter dated 10-3-16</li> <li>• SEIU Local 668 Memo-Salary Side Letter dated 10-3-16</li> <li>• AFSCME Master Agreement dated 7-1-16 to 6-30-19</li> <li>• CIVEA Agreement 2016-2019</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Agency Head</li> </ul> </li> </ol> <p>Findings: Subsection (a)</p> <p>During the Pre-audit phase SCI Retreat submitted collective bargaining agreements with eight different unions. The Auditor reviewed the union agreements and verified none of these collective bargaining agreements contain language that limit the ability to remove an alleged staff sexual abuser from contact with any inmates pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted. In addition, the collective bargaining agreements are silent regarding suspensions pending investigation. When the contract is silent on issues, policy then governs. It should also be noted that Act 195 Interest Arbitration Award [page 3:5] states “Article 33, Section 20 shall be amended to provide that the Commonwealth shall have no requirement to furnish 24 hours advance written notification of inmate or patient charges in accordance with Section 20, when an allegation falls within the purview of the Prison Rape Elimination Act of 2003.” The previous language in Article 33 Section 20 required 24 hours advance written notification of inmate charges against an employee at least 24 hours prior to commencement of proceedings. An interview with the Agency Head indicated that through binding arbitration, the agency is permitted to remove alleged staff sexual abusers from contact with any inmate pending an investigation for a determination of whether and to what extent discipline is warranted, suspension of 30 days to termination.</p> <p>Corrective Action: None</p>

115.67	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.67-Retreat</p> <p>Evidence Reviewed</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 2 (PREA Procedures Manual)</li> <li>• ADM 008, Section 3 (PREA Procedures Manual)</li> <li>• Policy Statement</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• Attachment 2-B, Retaliation Monitoring Form</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Superintendent</li> <li>• Staff Member charged with Monitoring Retaliation</li> <li>• Inmates Who Reported Sexual Abuse</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-5:F(1) and (2)]) mandates the Department shall protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. 1) Retaliatory action is prohibited against an inmate, staff member, or other individual who reports sexual abuse, sexual harassment, or provides information during an investigation. Any individual, who seek to deter an inmate or other individual from reporting sexual activity, or who in any manner, harasses or intimidates any person who reports the alleged contact is subject to discipline. 2) The Deputy Superintendent for Centralized Services shall meet with any staff that requires retaliation monitoring due to report of sexual abuse or sexual harassment, or because of an expressed fear of retaliation due to cooperation with an investigation of inmate sexual abuse or sexual harassment, per PREA Standard and in accordance with Section 3 of this procedures manual. Contact shall be made with the identified staff for at least 90 days and documented on the Department Retaliation Monitoring form. During the Pre-audit phase SCI-Retreat reported 12 designated staff members charged with monitoring retaliation, (4) Unit Managers, (7) Counselors, and (1) Psychologist.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-6:F(3)and (4)]) requires the Department shall employ multiple protection measures, such as housing changes or transfer for inmate victims or abuser, removal of alleged staff or inmate abusers from contact with victim. The Department shall also make available emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment, or for cooperating with investigators. For at least 90 days following a report of sexual abuse, the Department shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse or sexual harassment, and of inmates who were reported to have suffered sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by inmates or staff and shall act promptly to remedy such retaliation. Items the Department shall</p>

monitor include: a. disciplinary reports; b. housing reports; c. program changes; d. negative performance reviews; and e. reassignments of staff. An interview with the Agency Head indicated that he is proactive and vocalizes the zero tolerance policy (sexual abuse, sexual harassment, and retaliation for reporting). An interview with the Superintendent indicated they separate the alleged victim and abuser. They protect the inmate by monitoring them per the policy, every 90 days, as well as more if needed. If it rises to a level in which the inmate needs to be moved out of the facility, (it would be TX team decision) the Superintendent would do an administrative transfer. He went on to state there are 12 clinical staff and they are always available to talk to. Medical are on call 24 hours. Psychiatrist may also be contacted. An interview with the Staff Member charged with Monitoring Retaliation reported that they would initiate the contact with the inmate and meet in a confidential area. Auditor viewed and are in which inmate is called down to and verified it was an area that was confidential and no way to know why the inmate was being called down to the specific area, the treatment hallway. They stated how they fill out and follow the Retaliation Monitoring Form. The staff I spoke with had one with them. It, along with the forms included in the pre-audit were reviewed and verified it was followed. The staff indicated if an inmate was being retaliated against, they would inform the PREA Lieutenant for investigation to be conducted. The interviews with inmates Who Reported Sexual Abuse, one indicated they were retaliated against and did not feel safe. He also stated that he had not been followed up with. After reviewing the Retaliation Monitoring Form, investigations, and the referrals to the Victim Service Resource Center, this was found untrue. He actually was seen was followed up with beyond the 90 days, up to one year, and had an appointment scheduled while the Auditor was at the facility. Other inmates indicated they were followed regarding monitoring and retaliation within the policy guidelines. Further review on site showed inmates that were moved to different buildings for separation purposes to protect from retaliation and to keep the alleged victim safe.

#### Subsection (c)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-5: F (4)]) requires the Department shall continue monitoring beyond 90 days if the initial monitoring indicates a continuing need. During the Pre-audit phase, SCI-Retreat reported zero times in the past 12 months an incident of retaliation occurred. The Auditor reviewed the random samples of the Retaliation Monitoring forms utilized to record retaliation monitoring past 90 days to confirm compliance with this subsection. Interview with Staff Member charged with Monitoring Retaliation indicated they would ask about housing situations, any issues they may be having, monitor the m behaviors based on reproes' they have built with the inmate. They went on to say they would follow with the officers and other staff that might have regular contact i.e. teachers. Staff said they would intervene if they found someone was having struggles due to their victimization and work with affected staff or programs/classes to see if the person could make up lost time/work. The staff said they would continue to monitor as long as the inmate needed their assistance. Interview with the Superintendent indicated that they would ensure the retaliation monitoring was conducted and as stated before, prepare for transport to another facility if needed.

#### Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-2: A (2) (c)]) requires periodic status checks of inmates by the corrections counselor in compliance with this subsection. During the onsite the Auditor reviewed two samples of the Retaliation Monitoring Forms and noted that the retaliation status checks were conducted within 96 hours, 15 days, 30 days, 60

days, and 90 day increments. An interview with the Staff Member charged with Monitoring Retaliation reported that the 90 days is the regular amount of time for monitoring, however continued monitoring would be completed if necessary.

Subsection (e)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-6:F(7)(5)]) ensures that if any other individual who cooperates with an investigation expresses fear of retaliation, the Department shall take appropriate measures to protect that individual against retaliation.

Interview with the Agency Head indicated that he spoke to the new cadet classes and starts off the first day of the Correctional Academy. He speaks to them of ethical behavior, their duty to observe and they can report to him via email as well as his Assistant Secretary (if there's fear of retaliation). Interview with the Superintendent indicated that SCI-Retreat that they would handle any type of retaliation toward any inmate or staff involved by conducting an investigation.

Corrective Action: None

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.68 Retreat</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 2 (PREA Procedures Manual)</li> <li>• Involuntary Administrative Custody Services Access Restriction Form (28C.F.R.115.43)</li> </ul> </li> <li>3. Interviews with the following: <ul style="list-style-type: none"> <li>• Superintendent</li> <li>• Staff Who Supervise Inmates in Restricted Housing</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-6:A(6)]) requires that inmates at a high risk for sexual victimization or inmates who have allegedly suffered sexual abuse shall not be placed involuntarily in Administrative Confinement (AC) as a means of protection unless an assessment of all available alternative has been made by Psychology and Security staff in conjunction with the Facility Manager/designee, and a determination has been made that there is no other available alternative means of separation from like abusers. If the facility cannot conduct the assessment immediately the facility may hold the inmate in involuntary AC for less than 24 hours while completing the assessment. During the Pre-audit phase, SCI Retreat reported zero inmates in the past 12 months who have alleged sexual abuse were placed into restricted housing. While on site the Auditor did not observe an inmate in involuntarily AC as a means of protection or at a high risk of victimization. An interview with the Superintendent indicated that other options besides restricted housing were available. He stated they could be moved to different housing units or e administratively moved to another facility. SCI-Retreat has not used restricted housing as a means of protection for any inmate at a high risk for sexual victimization as there are facilities close enough to move an inmate. There are also multiple housing units in which an inmate can be placed. An interview with the Staff who supervise Inmates in Segregated Housing reported they have not had any alleged inmate victim of sexual abuse placed in Restricted Housing.</p> <p>Corrective Action: None</p>

115.71	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>§115.71 – Criminal and administrative agency investigations.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Pennsylvania Department of Corrections Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li> <li>b. Memorandum of Understanding (MOU) with Pennsylvania State Police</li> <li>c. WebTas Entries</li> <li>d. Random criminal and administrative investigations.</li> <li>e. Pre-Audit Questionnaire (PAQ)</li> <li>f. Investigative Training Lesson Plans</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Investigative Staff</li> <li>b. Specialized Staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Sexual Assault Incident Review (SAIR)</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.71 (a). SCI Retreat has adopted a comprehensive agency policy, DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual, Section 5-Investigating Allegations of Sexual Abuse and/or Sexual Harassment; it is very detailed and directs investigative staff on how to proceed with an investigation of sexual abuse and sexual harassment. This section states in part, “that every report, complaint, or allegation of sexual abuse and sexual harassment, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively.”</p> <p>This policy also directs that if the case is being investigated for criminal charges that the PA DOC investigators will suspend the administrative investigation and allow the criminal investigation to take precedence. The Pennsylvania State Police (PSP) conducts criminal investigations. The policy has an additional section which states in part, “The investigative summary shall be completed within 30 days of assignment and prepared in the format provided by the Office of Special Investigations and Intelligence (OSII).” The OSII may grant an extension if requested. The Investigative staff said that they have gotten extensions for investigations being done by the PSP. A review of investigative files shows that the investigations are done in a timely manner.</p> <p>SCI Retreat has investigative staff whose sole responsibility is investigating sexual abuse and sexual harassment allegations. They are responsible for conducting the majority of these investigations. When the primary investigator is not available, other security supervisors or Deputy Superintendents will start the investigation. Investigators stated that they begin an investigation the same day that the report is received depending on when they receive the</p>

report of the allegation. If the allegation were to come towards the end of the work day or when they are off duty the investigation would begin as soon as they return to the facility. Staff also said that anonymous or third-party reports of sexual abuse or sexual harassment are handled the same as any other investigation.

The auditor conducted interviews with investigative staff responsible for conducting sexual abuse, sexual harassment and retaliation investigations at SCI Retreat. The auditor also reviewed a random sampling of 10 administrative and criminal investigative files and found that investigations were completed. The auditor looked at the SCI investigation spreadsheet where SCI investigative staff record allegations of sexual abuse, sexual harassment and retaliation. There were 55 entries for the past 12-months. Of these 55 investigations there were 27 allegations of sexual abuse, 24 allegations of sexual harassment and 18 allegations that SCI Retreat calls non- contact sexual abuse. The SCI Retreat investigations staff told the auditor that they separate out contact sexual abuse and non-contact sexual abuse for allegations towards staff. Contact abuse means physical contact. Non- contact means the allegation is sexual in nature with-out contact. Ten of the sexual abuse investigations were conducted by the Pennsylvania State Police (PSP). One of these investigations is still open with the PSP where charges may be referred for prosecution. Of the nine other investigations that were investigated by PSP there were no charges filed. The auditor later interviewed a representative from the PSP. The PSP investigator confirmed that they have referred investigations for prosecution, but no charges were filed. The auditor further noted that some investigative files reviewed had dismissed grievances in them which initiated the investigation.

115.71 (b). The investigators, as well as other security supervisors, have received specialized PREA investigations training. The primary investigator attended a longer training in 2015 and had a refresher/block training in December 2017. The training was at DOC central office. Training documents were reviewed in the PAQ. Lesson plans for this specialized investigations portion of the training includes topics on gathering and preservation of direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interviews with alleged victims, suspected perpetrators, and witnesses; review of prior reports and complaints of sexual abuse involving the suspected perpetrator; information on compelled interviewing and Garrity as well as Miranda rules; referral for outside law enforcement for prosecution, etc. These training topics were discussed with the investigative staff during their interviews. Investigative staff was able to articulate an understanding.

115.71 (c). The auditor's review of the investigative files showed that SCI Retreat retained all reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment. The staff stated that evidence is turned over to the PSP at the PSP investigators request and is case dependent. The investigative staff was able to recite investigation packet retention periods indicating they are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The staff interviewed did not know where the older records are stored. The staff stated they would not terminate an investigation because the alleged abuser left the facility. This applies to employees/staff/inmates. The auditor requested to review investigations that were substantiated, unsubstantiated and unfounded. The auditor reviewed a random sampling of 10 administrative and criminal investigative files in their entirety on site and found that investigations were completed. The random review of investigations show that the alleged victim provided a written statement, the alleged perpetrator, including staff, provided a written

statement and any witnesses provided written statements. The auditor expressed concern to staff that written statements are good, however sometimes lack specific detail and that there may be an over reliance on written statements. Staff was asked what is done in addition to getting a written statement and they said interviews are conducted. There were limited handwritten notes in the investigation packets reviewed. The investigative staff stated that they do take some additional notes during the interviews and put the information into the typed report. Based on observations of the investigation practices, the investigations meet the letter of the standard but not the spirit. When observing written documents and speaking with staff there was no evidence of comprehensive interviews. The auditor has a concern that investigations are not as thorough as they should be. The auditor recommends that SCI Retreat enhance their investigations with more thorough verbal interviews with inmates and staff. DC-ADM 008 section 5, Investigating Allegations of Sexual Abuse and/or Harassment, is very detailed outlining the investigation process. This section has a portion which states in part; "The investigator shall complete the following procedures; Interview the inmate complainant(s) and obtain an Inmate Written Statement of Sexual Abuse/Harassment (attachment 5-A) following the interview. If the complainant refuses to be interviewed or provide a written statement, said refusal, including date, time and persons present, shall be documented and included in the investigative report." The policy includes additional language that directs investigators to get written statements from witnesses, staff, and alleged abusers. The CCTV system is reviewed for the area where the alleged incident occurred to determine if there was anything captured on the video to support or refute the allegation. A review of the investigations showed that they review cameras as a regular part of the investigation process. The auditor observed during the onsite phase of the audit that sexual abuse, sexual harassment, and retaliation investigations files were secured in a file cabinet in the security supervisor office. The auditor observed there were evidence collection kits made available to first responder staff and medical staff to aid their efforts in collecting timely usable evidence. PA DOC agency policy DC-ADM 008 states in part that "Investigators shall gather and/or preserve direct and circumstantial evidence, including any available physical, DNA, and any electronic monitoring data; interview alleged victims, suspected abusers, and witnesses; and shall review prior complaints and reports if sexual abuse involving the suspected abuser(s)". Staff corroborated this practice when interviewed by the auditor.

During the interview with the investigative staff, the auditor observed that the evidence boxes contain step by step instructions as to how to collect physical evidence such as clothing, instructions for interviews of alleged inmate victims and suspects, directions as to who to report to as far as chain of command within the facility. The instructions also include reminders to collect video if possible. These instructions were included in an investigations packet inside the box. The auditor observed that there were two evidence kits behind a secure door in the medical unit. During interviews, the staff was able to articulate the protocols.

115.71 (d). The staff responsible for investigating allegations of sexual abuse, sexual harassment and retaliation at SCI Retreat stated to the auditor that they refer all SA/SH allegations to the Pennsylvania State Police (PSP). The PSP determines whether a criminal investigation is warranted. If the PSP determines there is no criminal activity, then SCI Retreat investigative staff initiates the administrative investigation. If criminal activity is discovered the SCI Retreat investigator will contact the PSP. During the onsite portion of the audit, the auditor observed emails exchanged between PSP and SCI Retreat investigative staff contained within the investigation file. The emails indicate that SCI Retreat investigative personnel have developed a positive working relationship with PSP personnel, with both agencies informing

each other on the progress of the investigations.

115.71 (e). PA DOC policy DC-ADSM 008 indicates that SCI Retreat investigative personnel are not to use a polygraph or any other truth telling device when interviewing alleged victims. Investigative staff confirmed this during interviews.

115.71 (f). PA DOC agency policy DC-ADM 008 Section 5, states in part, “review and copy corroborating evidence, including but not limited to: all housing unit log books, medical documentation, work related reports, misconduct reports, inmate grievances, and other pertinent documentation specific to the allegations of sexual abuse and include documentation in the investigative report, and make an effort to determine whether staff actions or failures to act contributed to the abuse, specifically as it applies to administrative investigations.” The auditor was able to confirm after a review of investigative files that reviews of areas where evidence may be obtained are included as part of the investigation when possible. There is an additional portion of the PA DOC agency policy DC-ADM 008 Section 6, which SCI Retreat has adopted, that addresses Sexual Abuse Incident Review (SAIR) process. The policy states in part; “PA DOC requires that each facility conduct a SAIR review at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated whether the investigation was conducted by the facility Security Office or by the Office of Special Investigations and Intelligence (OSII). No review will be conducted if the allegation has been determined to be unfounded.” The review shall occur within 15 working days of the receipt of the notification from OSII that the investigation was deemed satisfactory. (28 C.F.R.

§115.86[b]) “

The auditors interviewed a member of the SAIR committee during the onsite portion of the audit. Staff indicated that the committee meets monthly or as needed to review all investigations of sexual abuse and harassment. They review and evaluate whether staff actions or failure to act contributed to the abuse, or if there is a physical plant issue with the facility that may have contributed. The committee members also look at the quality of the investigation and investigative report to ensure it was a complete and thorough investigation.

115.71 (g). Based on the auditor’s review of investigations, SCI Retreat does not conduct criminal investigations. Criminal Investigations are conducted by the PSP. PSP provides a copy of their criminal investigation to SCI Retreat as soon as they can without disrupting the criminal/court process. The auditor reviewed one criminal investigation conducted by PSP and found that it contained a description of physical evidence, interviews of staff and inmates as well as copies of documentary evidence.

115.71 (h). Staff reported to the auditor that there is one staff/inmate sexual abuse investigation recently conducted by the PSP which was referred for prosecution.

115.71 (i). During the auditor’s review of the investigative files, SCI Retreat retains reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment. The investigative staff was able to recite investigation packet retention periods indicating they are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71 (j). The investigative and administrative staff said that they would not terminate an investigation because the alleged abuser left the facility. This applies to employee and inmate

investigations.

115.71 (k). The auditor was provided a copy of the memorandum of understanding between the PSP and PA DOC. The agreement grants PSP access for the purpose of conducting any criminal investigation.

115.71 (l). During an interview with specialized staff at the facility, the auditor was informed that the PSP investigators are provided access to the facility so that PSP can conduct interviews. Emails exchanged between PSP and SCI Retreat investigative staff were included as a part of the investigation packet. The emails show that SCI Retreat has developed a positive relationship with PSP, with both agencies staying informed on the progress of the investigations.

Corrective Action: None

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.72-Retreat</p> <p>1. Policy and Documents Reviewed:</p> <ul style="list-style-type: none"><li>• -Completed Pre-Audit Questionnaire submitted by SCI Retreat</li><li>• -Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li><li>• Random investigations</li></ul> <p>2. Interviews:</p> <ul style="list-style-type: none"><li>• PREA Lieutenant</li></ul> <p>Subsection (a)</p> <p>DC-ADM 008 states in part that, "In administrative investigations, the Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated."</p> <p>SCI Retreat imposes a standard no higher than preponderance of the evidence in determining whether allegations of sexual abuse and sexual harassment are substantiated.</p> <p>A review of numerous administrative investigative files and through the interview with the PREA Lieutenant, the Lieutenant has a clear understanding of the standard. He was able to describe what Preponderance of the evidence means. The investigations were thorough and objective. The outcomes/decisions were appropriate. correctly followed the requirements of the standard.</p> <p>Corrective Action: None</p>

115.73	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.73-Retreat</p> <p>1.Policy and Documents Reviewed:</p> <ul style="list-style-type: none"> <li>• -Completed Pre-Audit Questionnaire submitted by SCI Retreat</li> <li>• Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li> <li>• Random investigation files</li> </ul> <p>2.Interviews:</p> <ul style="list-style-type: none"> <li>• PREA Compliance Manager</li> <li>• PREA Lieutenant</li> </ul> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Agency policy requires that inmates who made allegation of sexual abuse, sexual harassment or retaliation are informed of the outcome of the investigation. DC-ADM 008 states in part, The PCM shall inform the alleged victim(s) as to whether the investigation is found to be substantiated, unsubstantiated, or unfounded.”</p> <p>The investigative staff reports 55 investigations of sexual abuse/sexual harassment which took place at SCI Retreat. In each random file reviewed the alleged victim was notified of the outcome in writing. There was a notice signed by the inmate in each case. If the inmate refused to sign the form, a staff member indicated this on the form.</p> <p>It is determined that SCI Retreat meets the requirement of this standard, in that it requires inmate signed verification of the investigative outcomes, as well signed verification of any staffing changes or criminal actions.</p> <p>Subsection (b)</p> <p>SCI Retreat and the PREA Lieutenant have continual and ongoing communication regarding investigations. There was documentation of the communication in randomly reviewed investigation files.</p> <p>Subsection (c)</p> <p>SCI Retreat had one substantiated staff/inmate sexual abuse investigation in 2017. This investigation was conducted by the PSP with SCI Retreat investigators assisting when requested. The investigation file contains a written SCI notification to the inmate as to the outcome and that the staff member is no longer employed by SCI Retreat.</p> <p>Per the PCM, the investigation is currently open in the criminal justice system with charges pending.</p> <p>Subsection (d)</p> <p>During a review of random investigations each file contained inmate notification forms which showed the outcome of the investigation.</p> <p>The PCM said there have been cases if inmate on inmate sexual abuse referred to the prosecutor’s office but no one has ever been charged.</p> <p>Subsection (e)</p> <p>SCI Retreat uses an inmate notification form which requests the signature of the inmate.</p> <p>Corrective Action: None</p>



115.76	<b>Disciplinary sanctions for staff</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1276 358">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="252 369 1364 828" style="list-style-type: none"> <li data-bbox="252 369 446 403">1. Documents: <ol data-bbox="252 414 1364 660" style="list-style-type: none"> <li data-bbox="252 414 853 448">a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li data-bbox="252 459 1165 492">b. Policy DC-ADM 008, (PREA Procedures Manual Section 7) 3 pages</li> <li data-bbox="252 504 1364 571">c. Policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 (Standardization of Pre-Disciplinary Conferences) 3 pages</li> <li data-bbox="252 582 1364 660">d. Policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 4 (Resignations in Lieu of Discharge) 4 pages</li> </ol> </li> <li data-bbox="252 705 430 739">2. Interviews: <ol data-bbox="252 750 598 828" style="list-style-type: none"> <li data-bbox="252 750 598 784">a. Human Resources Staff</li> <li data-bbox="252 795 510 828">b. PREA Lieutenant</li> </ol> </li> </ol> <p data-bbox="252 884 454 918">Subsection (a):</p> <p data-bbox="252 929 1476 1388">Pennsylvania Department of Corrections policy DC-ADM 008 PREA Procedures Manual Section 7 (Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) maintains that any employee who violates the Department’s zero tolerance policy by engaging in, failing to report, or knowingly condones sexual abuse or sexual harassment of an inmate shall be subject to disciplinary or administrative action up to and including termination. Human Resources confirmed during the Auditor’s interview that all staff is subject to disciplinary sanctions up to and including termination for violations of the agency’s policies on sexual abuse or sexual harassment. In the past 12 months, SCI-Retreat reported that one (1) staff member has been subjected to disciplinary or administrative action up to and including termination. This was also confirmed during the Auditor’s interview with Human Resources during the onsite audit phase.</p> <p data-bbox="252 1444 454 1478">Subsection (b):</p> <p data-bbox="252 1489 1484 1780">Pennsylvania Department of Corrections policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 7 (Standardization of Pre-Disciplinary Conferences) stipulates that termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. During the pre-onsite audit phase, SCI-Retreat reported that one (1) staff member is currently suspended without pay for a violation of the agency’s sexual abuse or sexual harassment policies in the past 12 months. The staff member did not resign and has not been officially terminated as the case is still pending with the Pennsylvania State Police.</p> <p data-bbox="252 1825 454 1859">Subsection (c):</p> <p data-bbox="252 1870 1460 2161">Pennsylvania Department of Corrections policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 7 (Standardization of Pre-Disciplinary Conferences) requires disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. SCI-Retreat reported on the Pre-onsite audit phase that one (1) staff member is currently</p>

suspended without pay for a violation of the agency's sexual abuse or sexual harassment policies in the past 12 months. The staff member did not resign and has not been officially terminated as the case is still pending with the Pennsylvania State Police. The Auditor's interview with Human Resources confirmed that SCI-Retreat has one staff member under suspension without pay pending the outcome of the Pennsylvania State Police investigation.

Subsection (d):

Pennsylvania Department of Corrections policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 7 (Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) provides that terminations for violations of the agency's sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation are to be reported to law enforcement agencies, unless the activity was not clearly criminal, and to any relevant licensing bodies.

In addition, policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 4 (Resignations in Lieu of Discharge) requires that when a staff member resigns in lieu of discharge for a violation of policy DC-ADM 008, Human Resources must notify of the Office of Special Investigations and Intelligence (OSII) to determine if a potential criminal violation exists. If the violation meets criminal standards, OSII must refer the case to the District Attorney's Office that has jurisdiction over the affected facility.

SCI-Retreat reported that there has been zero staff in the past 12 months that were reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies. Although SCI-Retreat reported that one (1) staff member is currently suspended without pay for a violation of the agency's sexual abuse or sexual harassment policies in the past 12 months, the staff member did not resign and has not been officially terminated as the case is still pending with the Pennsylvania State Police.

Corrective Action: None

115.77	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008, (PREA Procedures Manual Section 7) 3 pages</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Superintendent</li> <li>b. PREA Lieutenant</li> </ol> </li> </ol> <p>Subsections (a-b):</p> <p>Pennsylvania Department of Corrections policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 7 (Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) provides procedures for taking corrective action for contractors and volunteers, that denotes when an allegation is made involving a contractor or volunteer, the individual must be removed from contact with the alleged victim until the conclusion of an investigation. The facility is required to take appropriate measures and consider whether to prohibit any further contact with inmates if the contractor or volunteer violates policy DC-ADM 008 Section 7 other than by engaging in sexual abuse. Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates, and is to be reported to law enforcement, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>During the pre-onsite audit phase, SCI-Retreat reported that during the past 12 months, zero contractors or volunteers were reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates. The Auditor's interview with the Superintendent also confirmed that any violation of the agency's sexual abuse or sexual harassment policy by a contractor or volunteer would prompt the facility to prohibit their contact with inmates and follow the procedures set forth in DC-ADM 008.</p> <p>Corrective Action: None</p>

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: <ol style="list-style-type: none"> <li>a. SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008, (PREA Procedures Manual Section 7) 3 pages</li> <li>c. SCI-Retreat Investigations Log</li> <li>d. Policy DC-ADM 801 (Inmate Discipline Procedures Manual Section 1, Attachment 1-A) Inmate Misconduct/Rule Violations</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Superintendent</li> <li>b. Mental Health Staff</li> <li>c. PREA Compliance Manager</li> <li>d. PREA Lieutenant</li> </ol> </li> </ol> <p>Subsection (a):  Pennsylvania Department of Corrections policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 7 (Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) stipulates that inmates shall be subject to disciplinary sanctions pursuant to the formal disciplinary process, following an administrative finding that the inmate engaged in inmate on inmate sexual abuse or following a criminal finding of guilt for inmate on inmate sexual abuse. During the Pre-onsite audit phase, SCI-Retreat reported one (1) administrative finding of inmate-on-inmate sexual abuse, and zero criminal findings of inmate-on-inmate sexual abuse in the past 12 months. The Auditor review of a sample of PREA investigations confirmed that the vast majority of findings from allegations of inmate-on-inmate sexual abuse were either unsubstantiated or unfounded. A majority of the inmate allegations were against staff.</p> <p>Subsection (b):  Policy DC-ADM 008 Section 7 ((Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) requires that inmate sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. A majority of the sample PREA investigations reviewed were found to be against staff. The Auditor’s interview with the Superintendent verified that any disciplinary sanctions imposed on an inmate following an administrative or criminal finding that they engaged in inmate-on-inmate sexual abuse would be proportionate to the nature of the circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.</p> <p>Subsection (c):  Policy DC-ADM 008 Section 7 (Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) states that the disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his/her behavior when determining what type of</p>

sanction, if any, should be imposed. Additionally, policy DC-ADM 008 Section 7 provides that there is a Psychologist review when an inmate is charged with Misconduct #19 (Engaging in Sexual Acts with Others or Sodomy” due to the possibility that the sexual activity was not consensual. Policy DC-ADM 008 Section 2 requires that when there is an allegation of sexual abuse, the Licensed Psychology Manager (LPM) or designee shall administer the PREA Risk Assessment Tool to all involved inmates within 72 hours of the allegation being made. The Auditor’s interview with Mental Health staff confirmed these processes.

Subsection (d):

Policy DC-ADM 008 Section 7 ((Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) maintains that when an inmate is found guilty of a Class 1 Misconduct related to sexual abuse, the Unit Manager shall refer the inmate to the Sex Offender Treatment Program for evaluation to determine whether or not the inmate is appropriate for the program, and if the inmate will be required to complete the program as part of the sanctions or as a condition to access programming or other benefits. The Auditor’s interview with Mental Health staff confirmed that SCI-Retreat offers therapy, counseling, or other intervention services designed to address the underlying reasons or motivations of sexual abuse for the inmate.

Subsection (e):

Policy DC-ADM 008 Section 7 ((Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) states that the facility may discipline an inmate for sexual contact with staff only if it is substantiated that the staff member did not consent to such contact. During the Pre-onsite audit phase, SCI-Retreat reported that they did not have a case where staff did not consent to sexual acts with inmates.

Subsection (f):

Policy DC-ADM 008 Section 7 ((Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) ensures that for the purpose of disciplinary action, a report of sexual abuse made in good faith, based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. During the onsite audit phase, discussions with SCI-Retreat’s PREA Compliance Manager and PREA Lieutenant indicated that no inmate has been disciplined for falsely reporting an allegation of sexual abuse or sexual harassment that was made in good faith. A reporting inmate can only be subject to disciplinary action for sexual abuse or sexual harassment allegations which have been unfounded and for which the investigation was satisfactorily approved by the Office of Special Investigations and Intelligence (OSII).

Subsection (g):

Policy DC-ADM 008 Section 7 ((Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation) states that the Department prohibits all sexual activity between inmates and may discipline inmates for such activity. The Department shall not deem such activity to constitute sexual abuse if the Department, through the investigative process, determines that the activity is not coerced or forced. The Auditor’s review of the agency’s Inmate Misconduct/Rule Violations (DC-ADM 801 Inmate Discipline Procedures Manual Section 1, Attachment 1-A) noted the following acts of a sexual nature: rape, involuntary deviate sexual intercourse, engaging in sexual acts with others or sodomy, sexual harassment, indecent exposure, and kissing or inappropriate physical contact.

	Corrective Action: None
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115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.81-Retreat  Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 2 (PREA Procedures Manual)</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• Mental Health Informed Consent form</li> <li>• Mental Health Referral forms</li> </ul> </li> <li>3. Interviews with the following: <ul style="list-style-type: none"> <li>• Inmates Who Disclose Sexual Victimization During Risk Screening</li> <li>• Staff Responsible for Risk Screening</li> <li>• Medical and Mental Health Staff</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a)  Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10: D (2)]) requires if the screening pursuant to PREA standard 115.41 indicates that a prison or jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening or sooner, if clinically indicated. During the Pre-audit phase SCI-Retreat reported 100 percent of inmates who disclosed prior victimization during screening, were offered a follow up meeting with a medical or mental health provider in the past 12 months. The Auditor reviewed the mental health Referral forms. All inmates who reported sexual abuse or harassment were referred and seen by a mental health staff member. Interview with an Inmates Who Disclose Sexual Victimization during Risk Screening indicated they were referred to a Psychologist and met with them. They also reported meeting with their Counselors on a regular basis. An interview with the Staff Responsible for Risk Screening verified that Mental Health services would conduct a follow up meeting with the inmate and provide counseling services as needed.</p> <p>Subsection (b)  Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10: D (3)]) requires if the screening pursuant to PREA standard 115.41 indicates that a prison or jail inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening or sooner, if clinically indicated. In addition, when information becomes available relating to perpetration of inmate on inmate sexual abuse history, a mental health evaluation shall be conducted on these abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. During the Pre-audit phase SCI-Retreat reported 100 percent of inmates who have previously perpetrated sexual abuse, as indicated during screening who were offered a follow up meeting with a mental health provider in the past 12 months. Auditor interviewed medical and mental health staff. Both indicated they would also</p>

meet with any inmate who was referred to them for perpetrating either while in custody or in the community. The area where the inmates would be called down was a treatment area, so no other inmates would know what they would be getting down for.

Subsection (c)

Not Applicable. Facility is a prison. See 115.81 Subsection (a)

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10: D (4)]) requires any information related to sexual victimization or abusiveness occurring in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans, security and management decisions, including housing, bed placement, work, education, and program assignments, or otherwise required by Federal, State, or local law. While onsite the Auditor observed SCI-Retreat utilizes the Sapphire System to track offender details and movement and any inmate with an ROV or ROA designation is populated as a "Housing concern" statement. This allows designated staff to consult a tracking database to determine the specifics of the housing concern. Counselors are also assigned to each inmate to meet with following a 14 day follow up or any types of monitoring that may need to take place. While at the facility, the Compliance Manager showed the system.

Subsection (e)

Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10:D(5)]) requires medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institution setting, unless the inmate is under the age of 18. If the inmate refuses to sign, it shall be noted and signed by a witness and maintained in the medical record. The Auditor reviewed a sample of Mental Health Informed Consent forms and Mental Health Referral forms during the pre-audit phase and while onsite at the facility to verify practice follows policy. The Interviews with 2 Medical and Mental Health Staff confirmed their adherence to this policy and practice. Both indicated if the inmate did not understand, they would explain in further detail. Interviews with inmates who have reported sexual abuse whether in community or in a custody setting also confirmed they were aware their information.

Corrective Action: None

115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.82-Retreat</p> <p>Evidence Reviewed</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 4 (PREA Procedures Manual)</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• Post Sexual Assault Interviews</li> <li>• Medical Reports from Wilkes-Barre General Hospital</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Medical and Mental Health Staff</li> <li>• Inmates Who Reported Sexual Abuse</li> <li>• Staff First Responders</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2;D(a)]) requires alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope with which are determined by a medical and mental health practitioners according to their professional judgment. The Interviews with Medical and Mental Health Staff confirmed that victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services, as quickly as possible, and if the abuse happened within 120 hours they'll go out to the hospital, Wilkes-Barre General Hospital for SAFE/SANE. The interviews with the Inmates Who Reported Sexual Abuse verified that they were seen by medical and then by mental health staff and that happened immediately with medical staff and were able to meet with a clinical staff member in a timely manner. One inmate indicated he was not seen by medical, but he was alleging sexual harassment, not abuse. Review of the medical reports, during the pre-audit phase, and the clinical notes reviewed while at SCI-Retreat verify the inmates have been seen immediately.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2;D(b)]) requires if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the alleged victim and shall immediately notify the appropriate medical and mental health practitioners. The interviews with the Staff First Responders all reported they would separate and isolate the alleged victim from the alleged abuser, contact the shift commander, tell both the victim and abuser not to wash, urinate, defecate, eat or drink, notify medical, secure the immediate are of the crime scene, protect any evidence and keep the victim safe. The Auditor noted that some of the staff did consult their First Responder pocket guides and they were all able to articulate the correct responses. Staff also stated they would assure the alleged victim was safe and that they were in a confidential area as possible, depending on the report, and wait with the inmate until they can be seen by medical, a shift supervisor, or Clinical.</p>

Subsection (c)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2; D (d)]) requires all facilities shall provide alleged victims with medical and mental health services consistent with community level of care. The Interviews with the Inmates Who Reported Sexual Abuse indicated they were tested for sexually transmitted diseases if they were assaulted. The interviews with the Medical and Mental Health Staff confirmed that inmates are offered information about emergency contraception and sexually transmitted infection prophylaxis. Review of the medical notes indicate it inmates were tested for sexually transmitted diseases and access to care was consistent with policy.

Subsection (d)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2;D(c)]) requires treatment services shall be provide to the alleged victim without financial cost and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident. The auditor's interview with Medical and Mental health staff and inmates who reported sexual abuse or harassment all verified that they are not charged for any medical or mental health care. Medical notes additionally note that the Victim Resource Center is contacted and the inmates state they are not charged for these services.

Corrective Action: None

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.83 Retreat</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Policy <ul style="list-style-type: none"> <li>• ADM 008, Section 2 (PREA Procedures Manual)</li> <li>• ADM 008, Section 4 (PREA Procedures Manual)</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>• Post Sexual Assault Interview</li> <li>• Mental health Contact Notes</li> <li>• Medical Progress Notes</li> <li>• Mental Health Referral Forms</li> </ul> </li> <li>4. Interviews with the following: <ul style="list-style-type: none"> <li>• Medical and Mental Health Staff</li> <li>• Inmates Who Reported Sexual Abuse</li> <li>• The Victim Resource Center Staff</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page4-7: F (1)]) requires the facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have allegedly been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The Auditor reviewed a sample documentation of mental health contact notes and Post sexual assault interviews. Auditor verified by randomly asking questions to inmates and staff during facility tour that they indicated an inmate would be offered medical and mental health follow up if an inmate was sexually assaulted and/or sexually harassed.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7:F(3)]) requires the evaluation and treatment of alleged victims shall include, as appropriate, follow up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, to other facilities, or their release from custody. The Auditor examined the Mental health Contact notes and Post Sexual Assault Interviews and found they indicate whether continued care, a treatment plan, and further follow up services including whether a transfer is needed to another facility or continued care in the community. The interview with inmates who reported sexual abuse both indicated they were not followed up. This was found to not be true based on their clinical notes and a review of the appointments both inmates had with Psychology staff, counselors, and the Victim Resource Center. The interviews with the Mental Health Staff verified that it's their practice to ensure that follow up continues up to 90 days with inmates about mental health needs and this can be continued beyond the 90 days. They stated they will also offer the Victim Resource Center information as well as set up an appointment if they request. They are further informed they can change their mind at a later date if they don't wish to be seen immediately. Medical staff indicated the inmates are assessed for any physical injury and are treated by medical. Medical staff will preserve</p>

evidence if they can, but the inmates are sent to a SAFE/SANE immediately if it's within the 96 hours' time frame. If it's past 96 hours, they will take pictures if there are visible signs, also follow up with Wilkes-Barre General Hospital if needed, and refer to mental health staff.

#### Subsection (c)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7: F (4)]) requires all facilities shall provide alleged victims with medical and mental health services consistent with the community level of care. The Medical Notes and the mental health notes reviewed during the pre-audit phase are consistent with the policy and the medical and mental health statements, that indicate services are in level with the community standards. Inmates are seen within 24 hours by mental health staff and immediately by medical staff. This was also verified reviewing investigations during the onsite Audit. Shift Report checklists were reviewed while at the facility. The dates and times indicate when an alleged assault takes place the victim and the perpetrator are seen by medical and mental health staff, and/or sent to Wilkes-Barre General Hospital.

#### Subsection (d) and (e)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-8: F (5)]) requires that alleged inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. During the Pre-audit phase SCI-Retreat reported they do not house adult female inmates. The Auditor reviewed the PA DOC public website and confirmed that SCI-Retreat has an adult male inmate population. No female inmates were interviewed for this subsection.

#### Subsection (f)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7: F (7)]) requires alleged inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. The Auditor reviewed inmate medical notes and they indicate that the inmate is tested for sexually transmitted diseases.. The interviews with the inmates Who Reported Sexual Abuse corroborate that the sexually transmitted infections testing is available to them.

#### Subsection (g)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2:D(1)(c)]) ensures that treatment services shall be provided to the alleged victim without financial cost and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident. The interviews with the Inmates Who Reported Sexual Abuse indicated they were not charged. Medical and mental health staff state the inmates are not charged for services when there is an allegation of sexual assault or sexual harassment. If the inmate is referred to the Victim Resource Center, they are also not charged for these services. This was verified on site when a staff from the resource center indicated they do not charge the inmate.

#### Subsection (h)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-13:D(3)]) ensures when information becomes available relating to perpetration of inmate on inmate sexual abuse history, a mental health evaluation shall be conducted on these abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. Mental Health staff indicated they would see them within 24 hours. They would

assess them for treatment needs and follow up with referrals to programs as deemed necessary. Medical staff stated they would give the same level of care to the alleged perpetrator as alleged victim. Both stated they would make Psychiatric referrals if needed.

Corrective Action: None

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>§115.86 – Sexual abuse incident reviews.</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Pennsylvania Department of Corrections (PA DOC) Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</li> <li>b. Random sexual abuse incident reviews (SAIR).</li> </ol> </li> <li>2. Interviews: <ol style="list-style-type: none"> <li>a. Deputy Superintendent</li> <li>b. PREA Compliance Manager (PCM)</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. SAIR documents</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.86 (a). Sexual Abuse Incident Review (SAIR) is completed at the conclusion of each substantiated and unsubstantiated investigation. This is supported by the agency policy DC-ADM 008 stating in part that "Each facility shall conduct a Sexual Abuse Incident Review (SAIR) at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated whether the investigation was conducted by the facility Security Office or by the Office of Special Investigations and Intelligence (OSII). No review will be conducted if the allegation has been determined to be unfounded. The review shall occur within 15 working days of the receipt of the notification from OSII that the investigation was deemed satisfactory. "</p> <p>SCI Retreat reported 55 allegations of sexual abuse or sexual harassment investigations from January 1 to December 31, 2017.</p> <p>The SAIR Team includes upper-level management officials allowing for input from line supervisors, investigators, and medical or mental health practitioners.</p> <p>Interviews with the institution deputy superintendent indicated that the committee meets monthly or as needed to review investigations.</p> <p>The deputy superintendent indicated that the SAIR review considers the following when reviewing the incident:</p> <ul style="list-style-type: none"> <li>• Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.</li> <li>• 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 was motivated or otherwise caused by other group dynamics at the facility.</li> <li>• Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.</li> <li>• Assess the adequacy of staffing levels in that area during different shifts.</li> </ul>

- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- Consider information such as housing assignment, measures taken as a result of the allegation, need for follow-up for the inmate victim, etc.
- Gather information that can help to sensitize staff to possible clues and situations that are present before such incidents may occur. The aim is to help all staff become more proficient at detecting preventable incidents before they occur.

115.86 (b). The SAIR meets monthly or as needed to review investigations.

115.86 (c). The SAIR committee includes two deputy superintendents, a licensed psychology manager, a correction health care administrator, a security office representative, and a major of unit management or major of the guards.

115.86 (d). The deputy superintendent indicated that the SAIR review considers the following when reviewing the incident:

- Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- 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 was motivated or otherwise caused by other group dynamics at the facility.
- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- Assess the adequacy of staffing levels in that area during different shifts.
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- Consider information such as housing assignment, measures taken as a result of the allegation, need for follow-up for the inmate victim, etc.
- Gather information that can help to sensitize staff to possible clues and situations that are present before such incidents may occur. The aim is to help all staff become more proficient at detecting preventable incidents before they occur.

115.86 (e). Per the deputy superintendent recommendations are either implemented or referred to central office, in writing and may be implemented depending on cost.

Corrective Action: None

<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>

115.401	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.401  Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. State Correctional Institution SCI-Retreat Pre-Audit Questionnaire (PAQ)</li> <li>2. Documents <ul style="list-style-type: none"> <li>• Emails with Pictures of Notifications</li> </ul> </li> <li>3. Interviews with the following: <ul style="list-style-type: none"> <li>• Random Inmates</li> </ul> </li> </ol> <p>Findings (by subsection):</p> <p>Subsection (h)  Auditor was given full access to all areas of the facility. Auditor was taken to all areas of the facility including inside the fenced in area and outside f the fenced in area, and all areas where inmates have access.</p> <p>Subsection (l)  Auditor was given full access of any documents requested. Auditor also reviewed stored relevant documents electronically stored while on site. During the three phases of the PREA Audit, SCI-Retreat sent all requested additional documents as well as providing all relevant documents on site.</p> <p>Subsection (m)  Auditor was able to conduct interviews with inmates in a confidential setting. SCI-Retreat had placed us in rooms in their Treatment hallway.</p> <p>Subsection (n)  Auditor observed information regarding the PREA Audit throughout the facility, inside the fenced area and outside the fenced area. SCI-Retreat sent Auditor 25 pictures via email, indicating the information was posted on 11-22-17, more than 6 weeks in advance of the onsite audit visit, January 10, 2018. SCI-Retreat also ran an electronic bulletin on their TV system that was viewed by the Auditor while at facility. Interview with random inmates also indicate they were aware of the audit and the notices had been posted .The bulletins posted in the common area were on display on the middle of the walls where all inmates in the area could see. Notices were displayed near phones, bathrooms, and other common areas in the housing units, work areas, and any other areas inmates have access. Auditor received four written communications from inmates that reside at SCI-Retreat. The four inmates were interviewed and the results are listed in this report's findings anonymously.</p> <p>Corrective Action: None</p>

115.403	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Audited at Agency Level
	<b>Auditor Discussion</b>



## Appendix: Provision Findings

115.11 (a)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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

115.11 (c)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes

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

115.12 (b)	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)	yes

115.13 (a)	<b>Supervision and monitoring</b>	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video	yes

	monitoring, to protect inmates against sexual abuse?	
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices 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 judicial findings of inadequacy 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 findings of inadequacy from Federal investigative agencies 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 findings of inadequacy from internal or external oversight bodies 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 all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) 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 inmate 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 number and placement of supervisory staff 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 institution programs occurring on a particular shift 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 applicable State or local laws, regulations, or standards 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

<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na

<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, 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, in consultation with the agency PREA Coordinator, 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, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

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

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)	na

115.15 (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 inmates?	yes

115.15 (d)	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility implement a policy and practice that enables inmates 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 inmate housing unit?	yes

115.15 (e)	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	<b>Limits to cross-gender viewing and searches</b>	
	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 inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates 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: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all	yes

	aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	
	Does the agency take appropriate steps to ensure that inmates 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: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates 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: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates 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: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates 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 inmates 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 inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates 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 inmates with disabilities including inmates who: are blind or have low vision?	yes

115.16 (b)	Inmates with disabilities and inmates 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 inmates 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

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

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

115.17 (b)	<b>Hiring and promotion decisions</b>	
	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 inmates?	yes

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

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

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

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

<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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

<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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 inmates 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

<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	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 inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes

115.21 (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

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	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? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (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

115.21 (d)	<b>Evidence protocol and forensic medical examinations</b>	
	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

115.21 (e)	<b>Evidence protocol and forensic medical examinations</b>	
	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

115.21 (f)	<b>Evidence protocol and forensic medical examinations</b>	
	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

115.21 (h)	<b>Evidence protocol and forensic medical examinations</b>	
	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 115.21(d) above.)	na

115.22 (a)	<b>Policies to ensure referrals of allegations for investigations</b>	
	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

115.22 (b)	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice 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

115.22 (c)	<b>Policies to ensure referrals of allegations for investigations</b>	
	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 criminal investigations. See 115.21(a).)	yes

115.31 (a)	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates 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 inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates 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 inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates 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 inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

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

115.31 (c)	<b>Employee training</b>	
	Have all current employees who may have contact with inmates 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

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

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

115.32 (b)	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates 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 inmates)?	yes

<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received such education?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

115.33 (f)	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, 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 administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(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 administrative or criminal sexual abuse investigations. See 115.21(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 administrative or criminal sexual abuse investigations. See 115.21(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 administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	<b>Specialized training: Investigations</b>	
	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 administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	<b>Specialized training: Medical and mental health care</b>	
	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

<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	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 do not conduct forensic exams.)	na

<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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

<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?	yes

<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate 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 inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate 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 inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates 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 inmates 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 inmates 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

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

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

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates 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

<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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 inmate's detriment by staff or other inmates?	yes

<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates 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 § 115.41, with the goal of keeping separate those inmates 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 § 115.41, with the goal of keeping separate those inmates 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 § 115.41, with the goal of keeping separate those inmates 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 § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes

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

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate'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

115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes

115.42 (g)	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 inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates 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 inmates, does the agency always refrain from placing: transgender inmates 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 inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates 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 inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?	no

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (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 inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate 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

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates 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.)	yes
	Does the agency always refrain from requiring an inmate 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.)	yes

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate 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

115.52 (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 inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate 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 inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates 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 inmates? (If a third party files such a request on behalf of an inmate, 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 inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate 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 an inmate 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 inmate 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

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

115.53 (a)	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates 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 provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, 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

115.53 (c)	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates 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

115.54 (a)	<b>Third-party reporting</b>	
	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 an inmate?	yes

115.61 (a)	<b>Staff and agency reporting duties</b>	
	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 inmates 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

115.61 (b)	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does 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

115.61 (c)	<b>Staff and agency reporting duties</b>	
	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 inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	<b>Staff and agency reporting duties</b>	
	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

<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes

<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate 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

<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes

<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate 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 an inmate 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 an inmate 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 an inmate 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

115.64 (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

115.65 (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

<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no

<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	<b>Agency protection against retaliation</b>	
	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 inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates 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 inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates 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 inmate 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: Monitor inmate 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 inmate 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 reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.67 (d)	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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

<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	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 115.21(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 115.21(a).)	yes

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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 inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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 administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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

<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate'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 inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.73 (c)	Reporting to inmates	
	Following an inmate'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 inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate'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 an inmate'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 an inmate'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

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, 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 an inmate's allegation that he or she has been sexually abused by another inmate, 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

<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes

<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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

<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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

115.77 (a)	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	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

115.77 (b)	<b>Corrective action for contractors and volunteers</b>	
	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 inmates?	yes

115.78 (a)	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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 inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (b)	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

115.81 (c)	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (d)	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

115.82 (a)	<b>Access to emergency medical and mental health services</b>	
	Do inmate 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

115.82 (b)	<b>Access to emergency medical and mental health services</b>	
	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 § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	<b>Access to emergency medical and mental health services</b>	
	Are inmate 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

115.82 (d)	<b>Access to emergency medical and mental health services</b>	
	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

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

115.83 (b)	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na

<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(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

<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (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 §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

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

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

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