

PREA Facility Audit Report: Final

Name of Facility: Philadelphia Community Corrections Center #4

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/28/2019

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Julie Ustruck Wetzel	Date of Signature: 07/28/2019

AUDITOR INFORMATION	
Auditor name:	Ustruck-Wetzel, Julie
Address:	
Email:	Julie.UstruckWetzel@wisconsin.gov
Telephone number:	
Start Date of On-Site Audit:	2019-06-13
End Date of On-Site Audit:	2019-06-13

FACILITY INFORMATION	
Facility name:	Philadelphia Community Corrections Center #4
Facility physical address:	1628-30 North 15th Street, Philadelphia, Pennsylvania - 19121
Facility Phone	2155605328
Facility mailing address:	

Primary Contact	
Name:	Vincent Barnes
Email Address:	vinbarnes@pa.gov
Telephone Number:	7175145950

Facility Director	
Name:	Vincent Barnes
Email Address:	vinbarnes@pa.gov
Telephone Number:	7175145950

Facility PREA Compliance Manager	
Name:	Vincent Barnes
Email Address:	vinbarnes@pa.gov
Telephone Number:	M: 7175145950

Facility Health Service Administrator On-Site	
Name:	
Email Address:	
Telephone Number:	

Facility Characteristics	
Designed facility capacity:	40
Current population of facility:	37
Average daily population for the past 12 months:	
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	
Age range of population:	
Facility security levels/resident custody levels:	1
Number of staff currently employed at the facility who may have contact with residents:	16
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	
Number of volunteers who have contact with residents, currently authorized to enter the facility:	

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

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

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

AUDIT FINDINGS

Narrative:

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

The Prison Rape Elimination Act (PREA) audit of Community Corrections Center (CCC) #4 Philadelphia located at 1628 and 1630 N 15th Street Philadelphia Pennsylvania was conducted by Department of Justice (DOJ) certified PREA auditors Julie Ustruck Wetzel and Leigha Weber. The auditors are employees of the State of Wisconsin, Department of Corrections (DOC). The audit was conducted as part of a consortium between the states of Pennsylvania, Maryland, Michigan, and Wisconsin.

In preparation for the on-site audit scheduled for June 13, 2019, audit notices were sent to the PREA Compliance Manager (PCM) at CCC#4 Philadelphia on April 25, 2019 to be posted on May 2, 2019. The role of the PCM at CCC#4 Pennsylvania belongs to the Facility Director. The notices were written in English and Spanish and included the purpose, the date of the on-site visit, confidentiality, and auditor contact information. As requested, on May 20, 2019, photographs depicting notices displayed in four locations throughout the facility were emailed to this auditor by the PCM to confirm placement. The locations confirmed placement in various areas of the facility frequented by staff and reentrants; in the living room, outside of the reentrant bathroom, and in the stairwell to the basement. No correspondence was received from a reentrant at CCC#4 Philadelphia.

The Pre-Audit Questionnaire was completed and submitted via the PREA Online Audit System (OAS) by the facility staff on April 3, 2019. Prior to the on-site visit, this auditor reviewed the Pre-Audit Questionnaire and attached documents. Attached documents included DC-ADM 008 Prison Rape Elimination Act (PREA) Policy and Procedures Manual, Human Resources procedures, training materials, training records, investigation documents, Letters of Agreement, and various examples of blank and completed Department of Corrections Forms. Additionally, this auditor reviewed PA DOC's website specific to CCC#4 Philadelphia, including the CCC#4 Philadelphia final PREA Audit reported dated February 16, 2016 as well as Pennsylvania Department of Corrections PREA information. Additionally, this auditor requested and reviewed the facility layout and Census Report. The documents and information submitted through the Pre-Audit Questionnaire were detailed, providing a comprehensive view of the policies, procedures, and operations of CCC#4 Philadelphia.

On May 17, 2019, a phone conference was held with this auditor, facility Director/PREA Compliance Manager, and the Pennsylvania Department of Corrections PREA Coordinator. The phone conference discussed the purpose of the audit, the logistics of the on site visit, and specific information needed prior to and upon the auditors arrival, such as staff schedule by shift and current reentrant census.

On June 7, 2019, this auditor sent an email to CCC#4 Philadelphia's PCM requesting a current census report, including clear identification of reentrants who identify as LGBTQI, identify with LEP needs, identify with cognitive or physical disability, including residents who are blind, deaf, or hard of hearing, reentrants who reported sexual abuse, and reentrants who reported sexual victimization during the risk screening. An updated staff schedule for the week was also requested. The PCM initially identified 10

reentrants who would remain at the facility for interviews. With clarification, it was understood the auditors would identify interviewees based on the Census Report and specific identifications.

The on-site portion of the audit was conducted on June 13, 2019. The on-site visit began with an entrance meeting with both auditors, the facility Director, and Jessica Delaney of the Pennsylvania Department of Corrections PREA office. The entrance meeting consisted of introductions, a schedule of the visit and reiterated the purpose of the on-site visit. At this time, it was determined which reentrants would be interviewed and the staff schedule was provided.

Following the entrance meeting, the auditors were provided a comprehensive facility tour. The tour began on the 1630 side of the facility on the main level and moved to the basement, which consisted of workout room and laundry facilities. The tour moved to the second and third floor, both consisting of 5 bedrooms and one bathroom with two toilet stalls and three shower stalls each. Following the tour of 1630, the tour moved to 1628 N 15. The main level was toured first and consisted of the main entrance, monitors office, medication room, two counselor's offices, copy/office room and back storage. Moving to the basement, the tour viewed a common area used for training and laundry facilities. Following the basement level, the tour moved to the second and third floor which mirrors the second and third floor on the 1630 side. During the tour, camera and mirror locations were noted and visible throughout the facility which appeared to minimize blind spots and ensure the safety of staff and reentrants. During the tour, audit notices, Zero Tolerance Posters, and victim information was visible on all four floors on both sides of the facility. Additionally, cross gender notices were posted at the entrance of each second and third housing floor. Further, changing notices were hung on each of the bathroom doors. As the tour entered the second and third floor of each side, "female on the floor" was announced by the Director.

Following the tour, reentrant interviews were conducted. These interviews were conducted by both auditors in private offices. Fourteen reentrants were interviewed. Twelve reentrants were selected randomly by the auditors, initially every fourth name on the census report. Additionally, a reentrant identified as LGBTQI was interviewed and a reentrant whose primary language was Spanish. The following targeted interviews were not conducted as there were no reentrants identified who met the criteria for interview: youthful reentrant, transgender or intersex, reentrants who reported sexual abuse or sexual harassment, disclosed during risk screening, or placed in segregated housing. All reentrants who were offered an interview, accepted. Additionally, one reentrant who was initially identified by the PCM to remain at the facility for an interview, but was not randomly selected, requested to be and was interviewed. Propio Language line was utilized for the interview with the reentrant whose primary language was Spanish. DOJ interview protocols were followed. Reentrants consistently reported that female staff presence is announced prior to entry onto the second and third floors by announcing loudly, "female on the floor". Reentrants consistently reported being asked questions found in the PREA Risk Assessment Tool (PRAT) at least once and reentrants consistently reported staff at CCC#4 Philadelphia ensured reentrants knew their rights to be free from sexual abuse and sexual harassment and free from retaliation for reporting or cooperating with an investigation. Reentrants also knew at least one way to report sexual abuse and sexual harassment and most were comfortable reporting to the Facility Director or other staff at the facility. No reentrant indicated a fear for their safety.

Following reentrant interviews, staff interviews were conducted. Based on the small number of staff employed at the facility, all staff on duty were interviewed. Interviews includes four Community Corrections Center Monitors (CCCM), two Corrections Counselors, Clerk Typist, Lieutenant, and facility Director. In addition to the staff present during the on-site visit, two third-shift staff were interviewed by phone upon the start of their shift. It should be noted that neither staff were aware this auditor would be

calling to interview them and as such, successfully answered without prepping from those who had previously been interviewed. No staff refused an interview. CCCM staff serve as First Responders and all CCCMs provide intake when reentrants first arrive to the facility. All CCCM's interviewed were asked the DOJ random staff questions and all CCCM's were able to articulate their role as first responders, specifically, in that they are responsible for separating the alleged victim and alleged abuser, securing the scene, and notifying law enforcement and Center Director or Management Operations Center (MOC). Corrections Counselors also have the potential to serve as First Responders as well as screening for risk of sexual abuse or sexual harassment. Both Corrections Counselors were interviewed as to the risk screening and intake protocols. Additionally CCCM's are responsible for providing reentrants PREA information upon entry into the facility, and as such, two CCCM's were interviewed as to their knowledge and experience in providing reentrants with PREA information. All Interviews were conducted using the DOJ protocols that question PREA knowledge, including PREA protections for reentrants and reporting mechanisms available to staff and reentrants. Staff consistently acknowledged receiving initial and annual PREA training and were able to articulate topics within the training. Staff were aware of the zero tolerance policy and requirement to immediately report and document suspicion or knowledge of sexual abuse or sexual harassment.

Many documents and file material was available for review through the Pre-Audit Questionnaire. On site, the PRAT Tracking system was reviewed and additional PRAT tracking documentation was requested and received. Additionally, auditors observed one PRAT administered within 72 hours of the reentrants arrival. The camera system in the Monitor's office was viewed and the search log reviewed.

Given that there were no investigations at CCC#4 Philadelphia since 2016, no investigative files were reviewed. No volunteers or contracted treatment providers enter the facility, and as such, no volunteers or contractors were interviewed.

Upon completion of the tour, interviews, and observations, an exit meeting was conducted with the facility Director, Ms. Delaney by phone, and both auditors. Initial observations were shared and next steps were outlined by this auditor. It should be noted that the facility staff were professional and accommodating throughout the audit process. Although there was no indication that standards were not met, it appeared through interviews that some responsibilities were not as clear or as staff as confident in the processes as others. For instance, the facility Director had not been involved in retaliation monitoring or the Sexual Assault Incident Review (SAIR) and was not able to confidently articulate his role in these processes. It was suggested that he become familiar with the SAIR process by shadowing or observing a review. This will allow the Director to be more confident in his role should he need to take the lead on these tasks.

During the post-audit phase, additional interviews were conducted by phone. On July 1, 2019, the Program Director of the Drexel University Philadelphia Sexual Assault Response Center (SARC) was interviewed. The Sexual Assault Response Center provides sexual assault forensic examinations and has formally entered into a relationship with CCC#4 Philadelphia via Letter of Agreement. It was noted in the interview, the Letter of Agreement is a requirement of the Department of Corrections, as the Sexual Assault Response Center serves anyone, including reentrants from CCC#4 Philadelphia. SARC has no exclusionary criteria. SARC is co-located with the Philadelphia Police Special Victims. Victims of assault have the option of filing a report with the law enforcement, however, they are not required to file a report or consent to the rape kit tested in order to receive an examination at SARC. Nurses are available 24-7 and have 1 hour to report to SARC. In nine years, there has not been an incident in which a nurse was not available. Services are confidential and free of charge. On July 26, 2019, an interview was conducted with the Director of Education and Training WOAR - Philadelphia Center Against Sexual Violence,

formerly Women Organized Against Rape. CCC#4 Philadelphia has a formal relationship established with the Women Organized Against Rape (WOAR) through a Letter of Agreement. During the interview, the Director of Education and Training explained WOAR recently changed their name, as they are the only rape crisis center in Philadelphia and serve men, women, boys, and girls. Additionally, they provide outreach to people who have recently arrived from other countries, or returning to the United States. They offer advocacy services in person and by phone and are able to accommodate people whose primary language is not English by utilizing bilingual staff or language interpretation services. The Philadelphia Center Against Sexual Violence provides services to confinement settings in Philadelphia, including psycho-educational groups inside facilities. They intend on expanding this service to more facilities. Additionally, sexual assault certified counselors are available 24 hours a day, seven days a week to provide crisis support to victims of sexual assault seeking services at SARC. Services provided by Philadelphia Center Against Sexual Violence include accompaniment to medical examinations, law enforcement interviews, and court proceedings. Services are confidential, however staff are mandated reporters and as such, limitations to confidentiality are explained prior to services being provided.

In addition to interviews conducted by the auditors, the following Department of Corrections staff were interviewed for previously completed audits and referenced in this audit. On February 1, 2019, this auditor, along with auditor Maria Silao-Johnson interviewed the Agency Contract Administrator and the PREA Coordinator. On April 4, 2019, the Lead Investigator for the Community Corrections Centers assigned to MOC and the Human Resource Staff from Central Office were interviewed by Wisconsin DOC PREA Audit team conducting the PREA audit of Wernersville CCC. This auditor has previously interviewed both the investigator and Human Resource staff in 2018 and found the interview answers to be consistent.

Further, during the post-audit phase, additional questions, PRAT documentation, and clarifications were made by the PREA Coordinator, Director, and Corrections Counselor. As an example, additional questions and PRAT testing dates were requested late on Friday in July 12. The requested information was received the following Monday afternoon.

There are no corrective action recommendations required for this audit.

AUDIT FINDINGS

Facility Characteristics:

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

CCC#4 Philadelphia is operated by the Pennsylvania Department of Corrections, Bureau of Community Corrections. The facility is located in the City of Philadelphia on the campus of Temple University. This is a residential program to assist and supervise male reentrants under the jurisdiction of the Pennsylvania Department of Corrections during the latter portion of their incarceration and transition into the community from a Secure Correctional Institution. Reentrants are expected to be employed or involved in educational or vocational training, and attend appointments for counseling and treatment as needed. Reentrants are expected to take responsibility for the purchase and preparation of their own meal, personal and collective housekeeping, and paying fines and restitution. Reentrants, along with their counselors, develop a program plan in preparation of leaving the facility and returning home. The maximum capacity of the Center is 40 reentrants and their average length of stay is six months.

Reentrants are allowed out of the facility during the day. Many reentrants are employed or engaged in other activities outside the facility such as treatment or education. Reentrants are required to turn in a schedule which must be approved prior to the reentrant leaving the facility. Reentrants are required to sign in and out of the facility and are required to clear the metal detector prior to entry into the facility.

CCC#4 Philadelphia is lead by the Director and employs ten Community Corrections Center Monitors (CCCM), two Community Corrections Counselors, and one Clerk Typist. One Lieutenant also has responsibilities at CCC#4 Philadelphia in addition to other Community Corrections Centers within the region. CCC#4 Philadelphia is staffed 24 hours a day, seven days a week. To assist in monitoring reentrants at CCC#4 Philadelphia, staff rely on 16 cameras strategically placed throughout the center. These cameras are monitored real time by a CCCM, and has recording capabilities with footage retained for 30 days.

CCC#4 Philadelphia is a single structure, formerly a side by side duplex. There are two addresses associated with the building. The wall separating the two sides on the main level has been removed, however, the remaining floors are separated by a wall. The front entrance of the facility is the first floor of 1628 side of the building. Upon entry, is the CCCM station where all reentrants and visitors check in and are required to successfully navigate a metal detector. This side of the first floor consists of a conference room, two staff restrooms, two counselor offices, a copy room and back storage. The 1630 side of the first floor includes the Center Director's Office, Clerk Typist office, a large living room, and a kitchen. The basement of the facility is walled into two areas. The basement level of 1628 includes the laundry room, utility room, recreation area, and storage. The basement level of 1630 includes a laundry room, storage space, and a larger space for meetings and training. The second and third levels of both sides house the reentrant bedrooms and bathrooms and mirror each other. The second floor of 1628 houses six reentrant bedrooms, one four person, one two person, and 4 single rooms. The second floor of side 1630 houses five bedrooms, one four person room, two two person room, and two single rooms. The third floor of 1628 includes five bedrooms, one four person, one two person, two single, and a two person furlough room. The third floor of 1630 houses five bedrooms, one four person, two two person, and two

single rooms. Each of the second and third floors also houses one shared bathroom with three individual shower stalls with curtains and 2 toilet stalls with locking doors. Each bathroom has a Changing Notice sign affixed to the bathroom door. Reentrants have the ability to use the bathroom and shower in private.

Sixteen cameras are utilized to monitor activities at the facility. In areas where there are not immediate cameras, mirrors are used to enhance monitoring capabilities and reduce blind spots. Cameras are placed at the top and bottom of each staircase, in hallways, and common areas such as the laundry room, kitchen, and living room. A number of PREA related signs were posted throughout the facility on each floor of the facility. The PREA Zero Tolerance sign, PREA Audit Notice and Victim notices were posted on each floor. Additionally, the gender announcement signage was posted on the second and third floors of both sides. Finally, victim service information was readily available to reentrants.

While touring the facility, as auditors entered the second and third floors of the facility, staff touring announced loudly, "female on the floor". Additionally, during the on site visit, auditors heard the noon PREA Announcement read over the public address system.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance. Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of standards exceeded:	1
Number of standards met:	40
Number of standards not met:	0

After a review of documents, interviews of staff, reentrants, and community providers, along with the onsite visit, this auditor determined the following for Pittsburgh Community Corrections Center:

Number of standards exceeded: 1

115.211

Number of standards met: 40

Number of standards not met: 0

Number of standards not applicable: 0

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> DC-ADM 008 Prison Rape Elimination Act (PREA) Policy and Procedure entirety Effective April 22, 2019 DC-ADM 008 PREA Policy Statement DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 1 - Sexual Abuse/Sexual Harassment Prevention - Responsibilities DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Glossary of Terms DC-ADM 801, Inmate discipline Procedures Manual Section 1 - Misconducts/Rule Violations DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 17 - Discipline Related to Sexual Abuse, Sexual Harassment, and retaliation 4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 - Standardization of Pre-Disciplinary Conferences DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Table of Contents 3. Documents <ul style="list-style-type: none"> DOC Mission Statement DOC Organizational Chart PREA Coordinator Position Description 4. Interviews <ul style="list-style-type: none"> PREA Coordinator 5. Tour of the Facility <p>Subsection (a):</p> <p>CCC#4 Philadelphia, (also referred to as CCC#4) follows a comprehensive policy and procedures on sexual abuse and sexual harassment in DC-ADM 008 Policy and corresponding Procedures Manual effective April 22, 2019 (hereinafter referred to as DC-ADM 008). This policy is the end product of the merger of PREA Policy and Procedures Manual BCC-ADM 008 effective May 30, 2017 and DC-ADM 008 effective September 22, 2016. According to DC-ADM 008, the term "inmate" is used to identify those who are under the care and supervision of the Department of Corrections and placed in a State Correctional Institution, Community Corrections Center, or Holding Cell within Probation and Parole District Offices and Sub-Offices. The term "inmate" is inclusive of inmates, reentrants, and detainees. The Community Corrections Centers reference the people under their care as "reentrants", and as such, the term "reentrant" rather than inmate, is used in this report. This policy mandates zero tolerance for sexual abuse and sexual harassment of any individual under the supervision of the Pennsylvania Department of Corrections (PA DOC). The policy further prohibits retaliation against any individual under the supervision of the Department or any staff who reports sexual abuse or sexual harassment or cooperates with a sexual abuse or sexual</p>

harassment investigation.

DC-ADM 008 Procedures Manual mirrors language found in the federal standards outlined in 28 C.F.R. Part 115. The DC-ADM 008 Table of Contents and the Procedures Manual was reviewed and outline how PA DOC will implement the federal standards to prevent, detect, and respond to sexual abuse and sexual harassment.

DC-ADM 008 Section 17 addresses staff and inmate discipline related to sexual abuse, sexual harassment, and retaliation. In addition to the DC-ADM 008, Department Policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 addresses the staff investigative and disciplinary process, specifically addressing substantiated sexual abuse and sexual harassment allegations. DC-ADM 801, Inmate Discipline Procedures Manual Section 1 addresses inmates discipline and specifically lists sexual abuse and sexual harassment requiring formal discipline.

DC-ADM 008 also includes ten plus pages Glossary of Terms consistent with definitions found in 28 C.F.R. Part 115.05 and 115.06. The Glossary of Terms defines sexual abuse, sexual contact, sexual coercion, and sexual harassment as well as terminology used in reporting incidents of sexual abuse and sexual harassment, and definitions of gender identity and sexual orientation.

DC-ADM 008 details one aspect of how PA DOC will follow the DOC Mission Statement to provide safe and secure facilities.

Subsection (b):

Section 1 of DC-ADM 008 outlines how the PA DOC will implement the policy in the area of preventing sexual abuse and sexual harassment by designating an agency-wide PREA coordinator to develop, implement, and oversee Department efforts to comply with the federal PREA Standards in all of the Department's facilities. According to policy, the PREA Coordinator reports directly to the Director of the Bureau of Standards, Audits, and Accreditation. According to PREA Coordinator Position Description submitted for review, the position reports directly to the Director of the Bureau of Standards, Audits, and Accreditations and is responsible for directing the statewide PREA program. The position develops, implements, and oversees the Department's efforts to comply with PREA in each of the Department's State Correctional Institutions (SCIs), Community Corrections Centers (CCCs), and lockups. The PA DOC organizational chart submitted for review shows the Bureau of Standards, Audits, and Assessment, and Compliance reports directly to the Executive Deputy Secretary.

In an interview with the PA DOC PREA Coordinator on February 1, 2019, he confirmed that his sole job within the Department is PREA compliance. Additionally, each DOC facility has one PREA Compliance manager. Annually, a meeting is convened by the PREA Coordinator with the PREA Compliance Managers for training and to review any policy revisions. In addition to the annual meeting, the PREA Coordinator and PCMs convene again by video in the fall. Further, the PREA Coordinator has regular communications with the PCMs by phone and email, sends out PREA communications, and provides technical assistance.

Corrective Action: None

115.212 Contracting with other entities for the confinement of residents

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 - Sexual Abuse/Sexual Harassment Prevention - Contracting

3. Documents

15 Department-wide Contracts effective February 1, 2019 to January 31, 2024

State of Work, Residential Housing, and Treatment Invitation to Qualify (ITQ) Contract

Bureau of Community Corrections PREA Contract Compliance Monitoring Report and PREA

Audit report:

Lehigh County

Gateway Braddock

Gaudenzia First Program

Firetree Capitol Pavilion

GEO Alle-Kiski Pavilion

4. Interviews

Contract Administrator

5. Tour of the Facility

Subsection (a):

DC-ADM 008 addresses contracting with entities for the housing of inmates, including county jails, specifically requiring the Department to include in any new contract or contract renewal for housing, the contractor's obligation to adopt and comply with the PREA standards and the Department's policies related to PREA compliance. This includes the requirement that contracted agencies undergo regular, mandated audits by a Certified Department of Justice (DOJ) PREA Auditor once every three years according to the PREA Standards. According to submitted documents, fifteen contracts for housing were entered into during the past twelve months covering the period of February 1, 2019 to January 31, 2024. These contracts include the requirement that the selected contractors adopt and comply with the standards of the Prison Rape Elimination Act (PREA) and applicable DOC policies. Contractors are required to permit the Department of Corrections into the facility to inspect facilities prior to and throughout the term of the contract. Additionally, completed PREA Contract Compliance Monitoring Reports and subsequent PREA Audits were included in the PAQ. CCC#4 Philadelphia has not entered into any contract for housing during the past twelve months.

According to the agency Contract Administrator, PREA compliance is built into the master contract. Agencies contracted for housing reentrants are required to complete a PREA audit every three years, and during the years in which audits are not completed, the Department of Corrections monitors PREA compliance.

Copies of current Department contracts were submitted for review.

Subsection (b):

DC-ADM 008 requires the PREA Compliance Division, in consultation with the Bureau of Community Corrections Contract Facility Coordinator, to monitor each contract agency's compliance with the PREA Standards, completed between August 20 and October 31 of each audit year. In the years in which a facility completes an official PREA audit, the final audit report satisfies the monitoring requirement for that year and must be made available to the Department of Corrections.

Five Bureau of Community Corrections Contract Compliance Monitoring Reports and corresponding DOJ PREA Audits were submitted for review and indicated compliance with the standards and DC-ADM 008. Additionally, an interview with the Agency Contract Administrator indicated a compliance with this standard in that every contract facility is required to complete a PREA audit. During the years in which an audit is not completed, contracted monitoring form is completed. The Department of Corrections completed contract monitoring for PREA compliance by October 31, 2018 as required by DC-ADM 008. The Agency Contract Administer also confirmed that contracted agencies submit the audit reports as soon as they receive it. The Department of Corrections monitors any corrective action in which the agencies are addressing with the auditor.

Subsection (c):

Since August 2012, the Department of Corrections has not entered into a contract with an agency that fails to comply with the PREA standards. According to DC-ADM 008, only in emergency circumstances can the Department of Corrections enter into a contract with an agency that has not followed the PREA standards and all unsuccessful attempts to gain compliance have been documented. According to the Agency Contract Administrator, in 2017 there was a contract terminated because the contracted agency was not following the auditing and corrective action requirements within an appropriate period of time. Pennsylvania DOC does not currently contract with an agency not in compliance with the PREA Standards.

Corrective Action: None

115.213	Supervision and monitoring
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 3 - Sexual abuse/Sexual Harassment Prevention - Supervision and Monitoring 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 15 - Facility Staffing 3. Documents Census Report dated May 9, 2019 Staffing Plan template CCC#4 Philadelphia floor plan CCC#4 Philadelphia Community Corrections Center Monitor schedule Staffing Plan and PREA Report for CCCs 2019, 2018, 2017 4. Interviews PREA Coordinator Facility Director 5. Tour of the Facility <p>Subsection (a): DC-ADM 008 ensures that each Department of Corrections facility develops, documents, and makes best efforts to comply with the staffing plan on a regular basis. The staffing plan is required to follow policy 8.3.1, Community Corrections Security policy. The plan provides for adequate levels of staffing and where applicable considers video monitoring to protect reentrants against sexual abuse. Policy 8.3.1 gives the Bureau Director or designee the authority to develop and document the staffing plan. Staffing plans must consider:</p> <ol style="list-style-type: none"> 1. the physical size and layout of the facility 2. the number and type of offenders (reentrants) assigned to the facility 3. video monitoring capabilities to protect reentrants against sexual abuse 4. the prevalence of substantiated and unsubstantiated incidents of sexual abuse 5. any other relevant factors <p>The facility staffing plan template was submitted for review. The template requires each facility to address the above factors when developing the written plans. Additionally the floor plan was submitted, specifically showing camera locations which are used to enhance reentrant safety.</p> <p>The staffing plan is developed and approved through the Management Operations Center (MOC) and reviewed by the PREA Coordinator. CCC#4 Philadelphia's staffing plan is predicated on maximum capacity of 40 reentrants. The average daily number of residents is 34. According to the May 9, 2019 Census Report, CCC#4 Philadelphia's total in house</p>	

population was 35 reentrants.

Subsection (b):

Policy 8.3.1 requires facilities to document circumstances and justifications for any deviation from the plan. CCC#4 Philadelphia does not deviate from the staffing plan. Over time is used to ensure shifts, as indicated in the plan, are covered or staff from nearby CCC's will provide coverage. Staffing assignments are coordinated through the MOC, providing for coordinated staff assignments.

Subsection (c):

Per policy 8.3.1, the Bureau Major or designee is responsible for conducting an annual review of the staffing patterns at every CCC and preparing a report with recommendations for staffing level and/or video monitoring equipment.

The CCC Staffing Plan and PREA Reports for CCCs for 2019, 2018, and 2017 were submitted for review. They indicate that on an annual basis, the facility is assessing, determining and documenting whether adjustments are needed to staffing plans, monitoring technologies and other available resources resources.

Corrective Action: None

115.215	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 8 - Sexual Abuse/Sexual Harassment Prevention - Limits to Cross-Gender Viewing and Searches DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 19 - Working with Transgender and Intersex Inmates 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 30 - Searches 3. Documents Photographs of posted signage 4. Interviews Random Staff Reentrants 5. Tour of the Facility <p>Subsection (a): During the past 12 months, CCC#4 Philadelphia has conducted zero cross-gender strip or cross-gender visual body cavity searches. This is consistent with DC-ADM 008 which prohibits cross-gender strip searches except in exigent circumstances. Additionally, Policy 8.3.1, specific to the Bureau of Community Corrections, staff are prohibited from conducting cross-gender strip searches. This policy further outlines under what circumstances a strip search may be completed and how one is conducted.</p> <p>Staff interviewed reported that female staff are not involved in strip searches of male reentrants. Strip searches are conducted with two male staff and the male facility Director. This was also confirmed in a review of the log documenting strip searches. Reentrants also reported that female staff never have a reason to view reentrants who are naked.</p> <p>Subsection (b): CCC#4 Philadelphia does not house female reentrants. However, at the Department level, DC-ADM 008 prohibits cross-gender pat down searches of female inmates, except in exigent circumstances. Facilities are not allowed to restrict female reentrant's access to programming and other out-of-cell opportunities in order to comply with the policy. Policy 8.3.1, reiterates that only female staff may conduct pat searches of female or transitioning female reentrants and that reentrants participating in programming and other opportunities can not be restricted if female staff are not available for a search. If a search of a female reentrant is necessary to ensure the safety of the facility and female staff are not available, the facilities utilize local law enforcement.</p>

Subsection (c):

According to policy DC-ADM 008, policy 8.3.1, and provided documentation, strip searches are documented on the Bureau of Community Corrections Offender Strip Search Log. A completed log was submitted and reviewed and contained documentation of strip searches since July 2018. This documented the date, time, Offender DOC number, offender last name, two sets of staff initials and if contraband was found.

According to DC-ADM 008, if a cross-gender search is conducted, it must be documented using the Cross-Gender Search Validation Form. No cross-gender searches were conducted at CCC#4 Philadelphia.

Subsection (d):

DC-ADM 008 specifically states that reentrants shall be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks or security round. This limitation not only applies to in-person viewing, but also all forms of remote viewing as well. Policy also furthers that staff of the opposite gender shall announce their presence when entering an inmate housing unit. Each facility has the authority to execute such announcements as appropriate specific to the facility.

Staff and reentrants all confirmed, and the practice was witnessed during the tour, whenever a female enters the floors that houses the bedrooms and bathrooms, an announcement is made prior to entry onto the floor, by staff stating loudly, "female on the floor". In addition to the audible announcement, signs are posted at the entrance to each housing area using the Housing Area - Announcement. Additionally, bathroom doors contain signage indicating the facility houses male reentrants and the location where reentrants may shower, change clothing or perform bodily functions without being viewed by female staff.

Subsection (e):

Policy ADM-008 and 8.3.1 prohibits searches or physical examinations of transgender or intersex inmates for the sole purpose of determining the reentrant's genital status. The policy further states that if genital status is unknown, it may be determined during conversations with the reentrant, by reviewing medical records, or, if necessary, by learning the information through a broader medical examination conducted in private by a medical practitioner. Examinations by staff for the purpose of determining genital status has not occurred during the past year at CCC#4 Philadelphia. Staff interviewed consistently reported that they are not allowed to search or physically examine any reentrant to determine genital status.

Subsection (f):

According to training records submitted, all ten of the security staff at CCC#4 Philadelphia completed BCC Searches - Body Area Vehicle in 2019. In accordance with policy ADM 008 and 08.03.1, training included how to conduct cross-gender pat searches and searches of transgender and intersex inmates (reentrants) in a professional and respectful manner and in the least intrusive manner possible. Training is conducted through the Department's Training Academy. According to the reviewed curriculum submitted for review, training includes policy and PREA Standard review, and stresses the importance of being professional and respectful during the search and to conduct searches in the least intrusive manner possible consistent with security needs. All security staff interviewed confirmed having been trained on the

appropriate way to search a reentrant and indicated they are trained to do so in a professional and respectful manner.

Corrective Action: None

115.216	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 4 - Sexual Abuse/Sexual Harassment Prevention - Access to Special Populations BCC- ADM 005, Bureau of Community Corrections Resident legal Procedures Manual Section 1 - Reasonable Accommodations 3. Documents Management Directive dated September 12, 2014 Photograph of Intake Handout written in Braille Photograph of displayed PREA Information in English and Spanish PROPIO LS LLC language Services Purchase Order Over-the-phone Interpreting instructions DOC Foreign Language Employee Directory Reporting Sexual Abuse and Sexual Harassment notice written in Spanish PREA Information handout written in Spanish Handbook written in Spanish 4. Interviews Agency Head Staff Reentrant with LEP needs 5. Tour of the Facility <p>Subsection (a): By policy, DC-ADM 008, reentrants with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Written materials shall be delivered in alternative formats or delivered through alternative methods that accommodate a reentrant disability. Examples of this include a photograph of the Intake Handout in Braille.</p> <p>BCC-ADM 005 indicates that individuals with disabilities shall be assigned to a Community Corrections Center that provides reasonable accommodations according to the individual needs of the resident, including individual diagnosed with mental or physical impairments. Facilities are required to evaluate their ability to receive and retain residents with disabilities according to policy.</p> <p>In an interview with the Executive Deputy Secretary on October 26, 2018, she indicated the Department provides information in Braille and offers sign language interpretation. Additionally, there are designated facilities which house inmates who are blind and disabled.</p>

Subsection (b):

Per DC-ADM 008, the Department shall take reasonable steps to ensure meaningful access to all aspects of the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to individuals who are limited English proficient. This includes written materials and interpretation services either through contractor or approved staff. Examples and photographs of displayed PREA notices written in Spanish were submitted in the PAQ. Additionally, notices in Spanish and English were observed during the onsite tour of the facility.

BCC-ADM 005, requires qualified staff or contractors to provide translation services for reentrants. Pennsylvania Department of Corrections has an eight page list of staff who are skilled to provide interpretation services. The list contains the staff name and work location and the interpretation service the staff is qualified to provide. Staff are available to interpret in over 55 foreign languages, dialects and sign. If staff are not available, the Department also contracts for over-the-phone interpretation services through PROPIO Language Services. Staff are provided direction on how to obtain this service. During this and previous audits, this auditor has utilized PROPIO Language Services for reentrant and inmate interviews. The process is clearly outlined and easy to use.

The Executive Deputy Secretary acknowledged the Department offers interpretation services and provides written documents in both English and Spanish.

During the on site visit of CCC#4 Philadelphia, PROPIO Language line was used for one reentrant interview. The facility Director had the information readily available and the process was easy to navigate. The reentrant interviewed is able to communicate somewhat in English in that he can understand what is being said to him, and is able to speak limited English. For those reasons, interpretation services is not used for this reentrant. Although he was not aware of the any PREA information written in Spanish, signage in Spanish was displayed and documents written in Spanish provided to reentrants were viewed in the facility and in the PAQ.

Subsection (c):

ADM-008 and ADM-005 prohibits the use of reentrants to interpret, read, or provide other types of assistance except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate's safety, the performance of the first responder duties or the investigation of the inmate's allegations. If an inmate serves as an interpreter, the interpretation is to be documented. During the past 12 months, CCC#4 Philadelphia has not relied on reentrants to provide interpretation services for a PREA related matter. Most staff interviewed confirmed they would not allow a reentrant to interpret for another reentrant in reporting sexual abuse or sexual harassment. If needed, staff would use the translation service or would contact MOC for further guidance.

Corrective Action: None

115.217	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> ADM-008 Prison Rape Elimination Act (PREA) Procedures Manual Section 20 - Data Collection and Retention 1.1.4, Centralized Clearances Procedures Manual Section 4 - Centralized Clearance Check Procedures 4.1.1, Human Resources and Labor Relations Procedures Manual Section 3 - Employee Arrests - Felony, Misdemeanor, or Summary Offenses 4.1.1, Human Resources and Labor Relations Procedures Manual Section 30 Employment/Salary Verifications for Outside Entities 4.1.1, Human Resources and Labor Relations Procedures Manual Section 40 - Conducting Pre-Employment Background Investigations 4.1.1, Human Resources and Labor Relations Procedures Manual Section 41 - Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies 8.3.1, Bureau of Community Correction Security Procedures Manual Section 31 - Contractor and Volunteer Clearances 3. Documents <ul style="list-style-type: none"> Blank Application for Employment Blank Position Vacancy Interest form Blank Current/Prior Employer letter Blank Centralized Clearance Check Information Request Completed Employment Applications and corresponding investigative documentation Emails from Human Resources to CCC#4 Philadelphia with results of background checks Example JNET Notification Services 4. Interviews <ul style="list-style-type: none"> Human Resource Staff Facility Director 5. Tour of the Facility <p>Subsection (a):</p> <p>According to 4.1.1 Section 40 and Section 41, the Department of Corrections will not hire or promote anyone who:</p> <ol style="list-style-type: none"> 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 intellectually disabled, 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 cares; b. has been convicted or civilly or administratively adjudicated for engaging or attempting to

engage in sexual activity in the community facilitated by force, over or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; and/or

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

(2) Title 18 Pa C.S.A. Chapter 59 - public Indecency

Background investigations are conducted for all candidates for positions in the Department. This is a Central Office function and includes both Human Resources and the Office of Special Investigations and Intelligence (OSII). Human Resource Office is responsible for ensuring the candidate completes the Position Vacancy Interest Form and the application materials, sending the PREA Consent to Release of Information Form and the PREA Current/Prior Employer Letter, receiving and reviewing completed forms and determining whether the applicant may be hired consistent with PREA. A review includes criminal background check, licensing status, criminal justice documentation and Pennsylvania State Police investigative files conducted by OSII.

Three investigation packets for potential candidates were reviewed for this audit. The packets contained detailed information including Consent to Release Information for Prison Rape Elimination Act Compliance, PREA Current/Prior Employer Letter, court records, and licensing documentation. Also included was the Personal Background Information form which includes the following questions:

D. Have you ever been employed 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 intellectually disabled, 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 cares?

E. Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution?

F. Have you had substantiated against you allegations of sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution , or have you ever resigned during a pending investigation of an allegation of sexual abuse of a confined individual?

Additionally, the Department also conducts PREA background checks for all contractors and volunteers utilizing the PREA Questionnaire and Consent to Release PREA Information.

According to policy 8.3.1, prior employment in any type of confinement facility will be further investigated to ensure that the candidate has not been found to have any of the following:

a. engaged in sexual abuse in a prison, jail, lockup, community confinement facility, halfway house, group home, inpatient treatment facility, correctional institution, or juvenile detention facility;

b. has been convicted of engaging or attempted to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; and/or

c. has been civilly or administratively adjudicated to have engaged in the activity described above.

Subsection (b):

According to policy and procedures, in addition to incidents of sexual abuse, the Department also considers any incidents of sexual harassment in determining whether to hire or promote

anyone. Question G. under General Information of the Application for Employment asks " have you had substantiated against you allegations of sexual harassment in the workplace, or have you ever resigned during a pending investigation of sexual harassment.

Subsection (c):

Per 4.1.1 Section 40, background checks are completed by the Office of Special Investigations and Intelligence (OSII) for all prospective new hires and rehires that have been separated for more than 60 days. Background check includes driving record, Pennsylvania Sate Police investigative file, licensing, military records, criminal justice documentation, and drug related convictions. Additionally, contact is made with current and prior employers.

The Human Resource staff interviewed confirmed that OSII in Central Office completes background checks.

During the past twelve months, four staff were hired at CCC#4 Philadelphia. All four candidates had background checks completed per policy as evidence by submitted background packets and emails from Human Resources to CCC#4 Philadelphia.

Subsection (d):

Zero contractors or volunteers have been hired at CCC#4 Philadelphia during the past twelve months. According to policy 8.3.1, Contractor and Volunteer Clearances Section 31, every person, volunteer or contractor, who provides recurring on-site services and has individual/group contact with reentrants at a CCC, are not allowed contact with reentrants until they: a. submit to a criminal background check by completing the Community Corrections Application electronically and submitting it to the Facility Director or designee b. submit to a Prison Rape Elimination Act (PREA) background check by electronically completing the PREA Questionnaire and Consent to Release PREA Information and submitting the forms to the Facility Director or designee c. receive clearance from the Department after an investigation and criminal history check.

Criminal background records checks are maintained in the Centralized Clearance database for staff and contractors.

Subsection (e):

Pennsylvania Department of Corrections utilizes the Justice Network (JNET) System to cross check all employees on a daily basis to identify employees that have had negative contact with law enforcement. It is the employee's responsibility to report such contact to their supervisor as soon as possible and no later than the employees next scheduled work day. The use of the JNET system was confirmed through interviews with Human Resources and the facility Director.

According to policy 1.1.4, contractor and volunteer clearance is valid for a maximum of 24 months, however, policy 8.3.1, requires an annual clearance update conducted on every individual who received clearance and continues to provide services.

Subsection (f):

Current employees of the Department of Corrections complete the Position Vacancy Interest Form when seeking other employment within the Department. Any individual new to the

Department of Corrections seeking employment complete the Application for Employment. Individuals are required to complete the questionnaire, leaving no blank spaces. The Application for Employment includes a Consent to Release Information for Prison Rape Elimination Act Compliance. The Application and the Position Vacancy Interest Form both require the applicant to answer PREA related questions regarding prior employment in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution to include state facilities for persons who are mentally ill, disabled, or retarded, or chronically ill or handicapped; residential care or treatment facilities for juveniles; and facilities that provide skilled nursing, intermediate or long term care or custodial or residential care and while employed in such a capacity has the applicant: (1) engaged in sexual abuse, (2) had a substantiated allegation of sexual abuse or sexual harassment against the applicant, or (3) resigned during an investigation for sexual abuse or sexual harassment or (4) been convicted, 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. A new applicant is also asked if the applicant is current or former military personnel and during the course of the military service did the applicant's duties include the supervision of prisoners or detainees.

Subsection (g):

Applicants for employment are required to affirm and sign the Application for Employment, indicating the information contained in the application and any attachments contain no misrepresentation or falsification, omission or concealment of material fact and is true and complete to the best of the applicant's knowledge and belief. The applicant must also acknowledge that any material omission or false information is grounds for non-selection or discipline, or termination of employment.

According to Section 31 of policy 8.3.1, Contractor and Volunteer Clearances, contractors and volunteers will not be granted clearance with the Department if the candidate deliberately falsified or omitted pertinent information, including PREA related misconduct on the Community Corrections Clearance Application or PREA Questionnaire. Additionally, 1.1.4 Section 4 requires the contractor or volunteer to complete the Centralized Clearance Check Information Request Form. This form contains the signature line in which the candidate acknowledges that the candidate completed the form and agrees that the information contained on the form is accurate. According to 1.1.4, any falsified information will be grounds for a clearance disapproval or possible criminal prosecution.

4.1.1 Human Resources and Labor Relations Procedures Manual requires the Human Resource Office to designate a PREA Employment Verification Coordinator to:

1. respond to requests by researching the employees' Official Personnel File for disciplinary actions relating to PREA and contacting the facility's Security Office for any additional relevant information;
2. records the results of the research on the supplied document;
3. return the information to the requester within one week of receiving the request.

Subsection (h):

According to the Human Resource staff interviewed, Pennsylvania DOC does provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee when the information is requested from an institutional employer for whom

the employee has applied to work.

Corrective Action: None

115.218	Upgrades to facilities and technology
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison rape Elimination Act (PREA) Procedures Manual Section 6 - Sexual Abuse/Sexual Harassment Prevention - upgrades to Facilities and Technologies 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 3 - Facility Design, Operation, and Access 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 6 - Community Corrections Center (CCC) Maintenance, Repair, and Construction 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 42 - CCTV Monitoring and Recording Systems 3. Documents 4. Interviews Agency Head PREA Coordinator Facility Director 5. Tour of the Facility <p>Subsection (a):</p> <p>Since the last PREA Audit of CCC#4 Philadelphia, the facility and technologies have not been upgraded. DC-ADM 008, specific to the Bureau of Community Corrections directs the Community Corrections Centers to follow policy 8.3.1 Section 3 and section 4 when designing facility or video monitoring upgrades. The Department PREA Coordinator is involved in this decision making process which is documented in meeting minutes, memorandum or other written format. Section 3 of 8.3.1 provides detail specifications for construction and layout of the Community Corrections Center including materials, lighting, metal detectors, temporary detainment with camera, secure doors to staff offices, staff bathrooms, storage areas, and other non-offender locations, and private and secure area without video surveillance to conduct strip searches and urinalysis screening.</p> <p>Section 6 of 8.3.1 requires the Department to consider the effect of any design, acquisition, expansion, or modification on the Department's ability to protect offenders from sexual abuse. The Deputy Director of Facilities management or designee is required to ensure the PREA Coordinator or PREA Compliance Manager is involved with all new construction projects and/or changes to current facility layout. This policy also requires the Community Corrections Center Director and Lieutenant to be involved with the planning meetings and throughout the construction project.</p> <p>Subsection (b):</p>

Since the last PREA Audit, CCC#4 Philadelphia has not upgraded or installed video monitoring or other monitoring technology, according to the Pre-Audit Questionnaire and confirmed by the Director. Section 42 of 8.3.1 requires the Department to consider how such technology may enhance the Department's ability to protect residents from sexual abuse. The PREA Coordinator or the facility PREA Compliance Manager is involved in the decision making process. This is required by DC-ADM 008 and the practice was confirmed in an interview with the PREA Coordinator.

According to the Agency Head - Designee, the Department considers the safety and privacy needs of reentrants to ensure good lines of sight in the facility. When designing facilities and upgrades to existing facilities, the Department ensures that visibility is not decreased and will add cameras if necessary to increase visibility. Additionally, according to the PREA Coordinator, the PREA Office reviews all sexual abuse and sexual harassment allegation incidents and identifies trends. With this information, facility layouts and camera positions may be modified to address areas of concerns.

Corrective Action: None

115.221	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 14 - Responding to Reports of Sexual Abuse DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 15 - Access to Outside Confidential Support Services DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 18 - Investigating Allegations of Sexual Abuse and/or Sexual Harassment 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 24 - BCC Evidence Control 3. Documents <ul style="list-style-type: none"> Memorandum of Understanding between Pennsylvania State Police and Pennsylvania Department of Corrections dated February 16, 2017 Amendment Number One to the February 16, 2017 Memorandum of Understanding between Pennsylvania State Police and Pennsylvania Department of Corrections dated October 19, 2017 Bureau of Community Corrections and Lockup Initial Response Checklist A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents April 2013 Forensic Rape Examinations (18 P.S. 11.707 and 37 Pa Code 411.42) Memorandum of Understanding (MOU) between CCC#4 Philadelphia and Drexel University College of Medicine (DUCOM) for its Philadelphia Sexual Assault Response Center (PSARC) dated October 21, 2015 If you are the Reported Victim of Sexual Abuse - CCC and lockups PREA - Rape Crisis Center Letter of Agreement dated April 5, 2019 Letter from DOC Secretary to PSP dated February 16, 2016 4. Interviews <ul style="list-style-type: none"> PREA Coordinator Facility Director/PREA Compliance Manager Staff SAFE/SANE Medical Agency Advocacy Agency 5. Tour of the Facility <p>Subsection (a):</p> <p>The Bureau of Community Corrections is responsible for administrative investigations and the Pennsylvania State Police (hereinafter referred to as PSP) conducts criminal investigations. When a sexual assault occurs, the Department shall follow a uniform evidence protocol that</p>

maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. It is the procedure in DC-ADM 008 that the facility secures and protects the potential crime scene, until physical evidence can be collected by law enforcement or an outside medical professional. If those entities decline to take possession of the evidence, the evidence is handled accordance with Department policy 8.3.1, Section 24. Section 24 details who is responsible for collecting evidence and how it is to be handled. It further details Crime Scene Control, specifically what first responder staff should do in the event that a suspected crime occurs at the facility. In order to assist first responder staff and ensure a uniform response, the Bureau of Community Corrections utilizes a First Responder Checklist and First Responder pocket cards for staff. The checklist and cards include victim safety and medical care, security of the crime scene, reporting, and documentation.

The Memorandum of Understanding between PSP and the Department of Corrections acknowledges PSP's familiarity with PREA Standards 115.21 as it relates to the investigation of sexual assaults and the collection of evidence.

Subsection (b):

CCC#4 Philadelphia does not house juveniles. Additionally, law enforcement is responsible for all forensic evidence collection. However, DC-ADM 008 requires any protocol established for evidentiary purposes be developmentally appropriate for youth, where applicable. DOC follows A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents for their protocol development.

Subsection (c):

According to DC-ADM 008, all alleged victims of a sexual assault occurring within 96 hours of report are offered access to a forensic medical examination at an outside facility without financial cost to the victim, using a SAFE/SANE where possible. It is the responsibility of the facility PREA Compliance Manager (PCM) to initiate a letter of agreement or memorandum of understanding with a hospital. If this agreement can not be made, the PCM must document attempts made. A Memorandum of Understanding (MOU) exists between CCC#4 Philadelphia and Drexel University College of Medicine (DUCOM) Philadelphia Sexual Assault Response Center (PSARC) dated October 21, 2015. The MOU contains language clarifying that PSARC does not charge individuals for their services and all exams are performed by registered nurses who have been specially trained to conduct forensic examinations. This is in line with Pennsylvania State Statue in which a provider cannot bill the sexual assault victim for the costs associated with a forensic rape examination. This MOU was also confirmed during the interview with the CCC#4 Philadelphia director and the PSARC Director.

Upon report of a sexual assault, victims of sexual assault are given the "If you are the Reported Victim of Sexual abuse - CCCs and Lockups" in which victims are offered a medical examination, mental health examination, and rape crisis services. The victim either accepts or declines the services in writing and affixes their signature and date to the form.

Escorting alleged victims to the outside hospital is also noted on the Bureau of Community Corrections and Lockup Initial Response Checklist. This outlines requirements of staff including staying with the victim, not asking questions, and completing the incident report.

Subsection (d) and (e):

Per DC-ADM 008, an inmate (reentrant) is offered the opportunity to talk with a victim advocate upon receipt of an allegation and receive continued care when they have been a victim of facility sexual abuse, no matter if they reported the sexual abuse immediately, were abused in another facility or made a delayed disclosure. If the reentrant is taken to a local hospital for a forensic examination, the reentrant is afforded the opportunity for support services provided by a victim advocate. If the the victim requests, the victim advocate will meet with the alleged victim at the hospital to accompany and support the alleged victim through the forensic medical examination process and investigatory interview. They may also provide emotional support, crisis intervention, information, and referrals.

The PCM is also responsible to coordinate victim services and work with the Pennsylvania Coalition Against Rape (PCAR) approved local rape crisis center to establish a PREA rape crisis center Letter of Agreement or Memorandum of Understanding. If this does not occur, the PCM is responsible for documenting such attempts. On April 5, 2019, CCC#4 Philadelphia and the Women Organized Against Rape (WOAR) entered into a Letter of Agreement. In the agreement, CCC#4 will notify WOAR when the facility receives an allegation of sexual assault occurring at any Department Facility in Philadelphia County. In return WOAR will provide advocacy for and accompaniment of the victim to the hospital, provide confidential support services by either telephone, mail or in person, and provide accompaniment to court proceedings.

An interview with the Director of Education and Training at WOAR Philadelphia Center Against Sexual Violence was conducted. The interview confirmed the existence of the Letter of Agreement between CCC#4 Philadelphia and WOAR. Staff and volunteers are trained sexual assault certified counselors and are available 24 hours a day seven days a week at SARC to provide crisis counseling to victims of sexual assault receiving forensic sexual assault examinations. Additionally, staff are available to accompany victims during law enforcement interviews and court proceedings. Services are also available by phone. Further, WOAR provides psycho educational services inside confinement facilities in the Philadelphia area and are in the process of expanding the serves to other facilities.

Subsection (f):

The responsibility of investigating allegations of sexual abuse lies with the Pennsylvania State Police. In viewing the letters of correspondence and signed MOU's, PSP acknowledged familiarity with standard 115.21 as it pertains to the investigation of sexual assaults, the collection of pertinent evidence, and forensic examinations. The MOU indicates that the PSP will "endeavor to comply with PREA Standard 115.21" and "will coordinate with DOC personnel to arrange for access to victim advocates who can provide the emotional and other needed support services".

Subsection (h):

CCC#4 Philadelphia does not utilize staff to conduct sexual assault examinations, collect evidence, or provide advocacy services. CCC#4 utilizes qualified providers from community agencies.

The PREA Coordinator confirmed the relationship between the DOC and PSP for criminal investigations. He confirmed the DOC investigator is responsible to maintain contact with PSP, however the PREA Coordinator has developed relationships within PSP to intervene as

needed. The PCM also confirmed PSP as the investigative agency for criminal investigations. The PCM also discussed the process in which CCC#4 Philadelphia utilizes services of the hospital for forensic examinations and Women Organized Against Rape for advocacy services.

CCC#4 staff interviewed were aware that as first responders they are not responsible for evidence collection but for protecting the scene and any physical evidence. They were well aware of their responsibility to notify either MOC or the facility Director and would follow any direction given.

Corrective Action: None

115.222	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 18 - Investigating Allegations of Sexual Abuse and/or Sexual Harassment 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations 3. Documents Screen Shot of CCC#4 Philadelphia PREA Tracker Screen shot of Pennsylvania DOC public website Pennsylvania DOC public website Bureau of Community Corrections and Lockup PREA Report - Sexual Abuse Memorandum of Understanding between Pennsylvania State Police and Pennsylvania Department of Corrections dated February 16, 2017 Amendment Number One to the February 16, 2017 Memorandum of Understanding between Pennsylvania State Police and Pennsylvania Department of Corrections dated October 19, 2017 4. Interviews Agency Head Lead Investigator 5. Tour of the Facility <p>Subsection (a): DC-ADM 008 requires every report, complaint, or allegation of sexual abuse and sexual harassment be investigated promptly, thoroughly, and objectively. During the past twelve months, CCC#4 Philadelphia has not had an allegation of sexual abuse or sexual harassment. Based on policy, all PREA related investigations are reported to the Office of Special Investigations and Intelligence (OSII) for tracking. According to the PREA Tracker maintained in OSII and interviews, an allegation has not been received at CCC#4 since October 2016.</p> <p>The interview with the Agency Head designee, confirmed that all allegations of sexual abuse and sexual harassment are investigated. According to the lead PREA investigator at MOC, immediately upon receiving an allegation of sexual abuse or sexual harassment, an investigation is initiated.</p> <p>Subsection (b): According to DC-ADM 008, all allegations of potentially criminal behavior are referred to the Bureau of Investigations and Intelligence (BII) or Pennsylvania State Police who have the legal authority to conduct criminal investigations. If at any point during an investigation, the</p>

evidence appears to support criminal prosecution, the administrative investigation is stopped and the investigator discusses the investigation with the Bureau Major or designee to determine if the administrative investigation should be put on hold while a referral is made for criminal investigation.

In the Bureau of Community Corrections (BCC), all PREA allegations are reported to Bureau of Community Corrections - Management Operation Center (BCC-MOC). Immediately upon receiving a report, a trained DOC PREA investigator is assigned and determination is made to refer the case for criminal investigation. PA DOC has entered into a Memorandum of Understanding (MOU) with the Pennsylvania State Police (PSP) to investigate PREA allegations appearing criminal in nature, as well as all allegations of sexual abuse by staff. All investigations are tracked and documented through the PREA Tracking System. Ultimately, a final report is submitted to and reviewed by the DOC Secretary. The PREA report includes first responder responsibilities, incident information, and PSP notification.

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

The process was confirmed by the lead MOC PREA Investigator, noting that all allegations are investigated, and those appearing to be sexual assault are referred to PSP.

Subsection (c):

Per policy, the Department's administrative investigations is suspended when PREA allegation is investigated for criminal charges to allow for the criminal investigation to take precedence. The DOC PREA investigator is expected to maintain contact with law enforcement, assisting law enforcement with providing and obtaining relevant reports and evidence.

The MOU between DOC and PSP dated February 16, 2017 outline roles and responsibilities for each agency. Also addressed in the MOU, is the agreement that PSP will develop a policy for conducting criminal investigations of sexual abuse allegations as required including, in part, a. perform a criminal investigation when appropriate; b. refer cases to the prosecutorial agency having jurisdiction when such referral is consistent with its policies, procedures and practices; c. cooperate appropriately with the prosecutorial agency; d. provide the DOC's Office of Special Investigations and Intelligence (OSII) with the Criminal Incident Report upon email request by DOC.

Corrective Action: None

115.231	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 11 - Sexual Abuse Harassment - Training and Education 3. Documents PREA Basic Basic Training Power Point PREA Basic training Participant Guide PREA Basic training Course Lesson Plan Cover Sheet PREA Basic Training Course Lesson Plan PREA Training and Understanding verification forms - three completed Professional Boundaries Power Point Professional Boundaries Participant Guide Professional Boundaries Course Lesson Plan Cover Sheet Profession Boundaries: Safety, Awareness, and Expectations Facilitator Guide Dynamics of Sexual Abuse and Sexual Harassment in Confinement: Males Dynamics of Sexual Abuse and Sexual Harassment in Confinement: Females PREA Policy Update Power Point 2015, 2017, 2019 PREA 2019 Policy Update Training screenshots PREA Essentials 2018 Power Point Web Based training menu Training Transcripts - 13 2018 PREA education tracking 4. Interviews Random Staff 5. Tour of the Facility <p>Subsection (a): According to DC-ADM 008, all staff who have contact with reentrants receive standardized Basic Training and Refresher Training that addresses the individual's responsibilities related to prevention, detection and response to sexual abuse and sexual harassment. All staff receive training which covers:</p> <ol style="list-style-type: none"> 1. the agency's zero tolerance policy for sexual abuse and sexual harassment 2. how staff fulfill their responsibilities under the agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures 3. reentrants' right to be free from sexual abuse and sexual harassment 4. the right of reentrants and employees to be free from retaliation for reporting sexual abuse or sexual harassment 5. the dynamics of sexual abuse and sexual harassment in confinement

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

The Performance Objective listed on the Basic Training PowerPoint mirror PREA standards and DC-ADM 008. Further, a review of the Course Lesson Plan outlines how those objectives are met during training.

According to DC-ADM 008, all newly hired staff receive this training during basic training at the Academy. Three recent hires at CCC#4 Philadelphia have completed this training as evidenced by the PREA Training and Understanding Verification Form for Classroom Training Only. This training was logged on the training transcripts. Additionally, staff having been hired after 2013, acknowledged receiving training during the Academy.

In Addition to PREA training, staff receive 5.5 hours of Professional Boundaries: Safety, Awareness and Expectations. This training focuses on understanding the Department's expectations for individual professional boundaries, developing skills and strategies to maintain healthy boundaries, and recognizing inappropriate behavior. This training was developed by the Moss Group, designed specifically for Pennsylvania Department of Corrections.

Subsection (b):

According to DC-ADM 008, staff receive training tailored to the gender of the facility in which the staff is assigned. If the staff is reassigned to a facility which houses the opposite gender, then the staff will receive additional training specific to the gender of the reentrants housed. Training is documented on the PREA Training and Understanding Verification Form and include:

1. gender specific posts within the facility
2. facility specific procedures for announcing opposite gender staff
3. pat search and strip search procedures within the facility, including any restrictions based upon staff gender
4. areas within the facility which are restricted based upon staff gender
5. a review of the Dynamics of Sexual Abuse and Sexual Harassment in Confinement Handout.

The Dynamics of Sexual Abuse and Sexual Harassment in Confinement Handout include zero tolerance policy for sexual abuse and sexual harassment and the reentrants and staff rights to be free from retaliation for reporting sexual abuse and sexual harassment. The handout also addresses vulnerable populations, reasons why male/female reentrants engage in sexual activity while in a confinement setting, and the impact of sexual assault on men and women, respectively.

Subsection (c) and (d):

During even numbered years, PREA education is provided in the form of a refresher of the

initial basic training received by all staff. During odd numbered years, PREA education is provided in the form of an update to the procedures manual for all staff to ensure staff have the knowledge for the Department's current sexual abuse and sexual harassment policies and procedures. Staff are required to verify they have received the information and understand the included item by completing and signing the PREA Training and Understanding Verification Form. Staff who complete training via a web-based platform with automated tracking, are not required to complete the verification form.

According to the screenshot of the web based training menu, PREA Essentials was offered as web based training in 2016 and 2018. In 2017, PREA Policy Update training was offered as a web based training. A review of the Power Points and screen shots of the 2019 web based training confirms the department is following the policy and PREA standards.

A spreadsheet tracking the completion of the PREA 2018 Essentials for staff at CCC#4 Philadelphia was submitted for review. This tracking indicated that twelve staff completed the training. Additionally, Employee Training Transcripts were submitted for thirteen CCC#4 Philadelphia staff, verifying staff have completed the required 2019 PREA training. One other staff received the annual training at Basic Training in January. Given this was an in person training, this staff completed the PREA Training and Understanding Verification Form. Staff interviewed, indicated they are trained annually, with most indicating they received training and PREA information more often than one time per year.

Corrective Action: None

115.232	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11 - Sexual Abuse/Sexual Harassment Prevention - Training and Education 3. Documents Pennsylvania Department of Corrections Contractors/Volunteers PREA Training 4. Interviews 5. Tour of the Facility <p>Subsection (a): According to DC-ADM 008, contractors and volunteers who have contact with reentrants, including contract service providers, public visitors, or non-department employees, are required to receive training on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. This training occurs during orientation sessions and annual training. CCC#4 Philadelphia has one contractor/volunteer who has received this training.</p> <p>Subsection (b): According to DC-ADM 008, the Department provides two levels of training for contractors and volunteers: Level 1 training is for contractors and volunteers who have a high level of contact, five hours or more a week on average, with reentrants. This training is the same training staff receive and pre-service and annual training. Level 2 training is for contractors and volunteers who have less than five hours per week on average of contact with reentrants. this training is a brief orientation provided by the Security Office or volunteer coordinator, respectively. This training includes the Department's zero tolerance policy, how to make a report, and to whom to make a report. The contractors are provided the Pennsylvania Department of Corrections Contractors/Volunteers PREA Training handout which gives the policy statement, definitions, and reporting requirements.</p> <p>Subsection (c): All contractors and volunteers are required to sign and acknowledge the PREA Training and Understanding Verification Form. The volunteer coordinator at each facility is responsible for documenting the PREA training and maintaining the documentation in the volunteer file. Any contractor or volunteer having multi-facility access should also maintain a copy of the PREA training and Understanding Verification Form to provide the PCM or Volunteer Coordinator at each subsequent facility.</p>

Corrective Action: None

115.233	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 11 - Sexual Abuse/Sexual Harassment Prevention - Training and Education 3. Documents PREA Inmate Intake Handout - English and Spanish PREA Reentrant Intake Handout Receipt - 6 completed forms Copy Security Activity Log - PREA Announcement 4 Inmate Education Facilitator's Guide Sexual Abuse/Sexual Harassment Inmate/Reentrant Education Program PREA Education Receipt for Reentrants PREA Information poster - Spanish Photographs of PREA Notices displayed in Spanish Pages from the security log book 4. Interviews Intake Staff Random Reentrants 5. Tour of the Facility <p>Subsection (a): DC-ADM 008 requires each facility to provide inmate education. During the intake process, all reentrants receive information explaining the zero tolerance policy regarding sexual abuse, sexual harassment and how to report incidents or suspicions of sexual abuse, sexual harassment or retaliation, and what to do if he/she is the victim of sexual abuse, sexual harassment, or retaliation. In the Community Corrections Centers, the PREA Inmate Intake Handout may be provided by any staff member who has completed PREA Basic Training. The PREA Inmate Intake Handout contains the Zero Tolerance Policy, definitions of sexual abuse and sexual harassment, understanding consent, what to do if a victim of sexual abuse, and how to report. At CCC#4 Philadelphia, any Community Corrections Center Monitor (CCCM) may provide intake education to incoming reentrants. This is done by providing the reentrant handout and reviewing the information with the reentrant. The CCCM reviews the zero tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. The Over the past year 61 reentrants received this information.</p> <p>Within 30 days of reception, additional information is provided to all reentrants. Reentrants are shown a video regarding their rights to be free from sexual abuse, sexual harassment, and retaliation. Reentrants are also provided information regarding Department policies and facility procedures for responding to such incidents. In addition to the PREA Video, the staff facilitator</p>

will ask questions and review material as outlined in the Inmate Education Facilitator's Guide. By policy, staff also meet privately with inmates to discuss issues related to the video and discussion. The Inmate Education Facilitator's Guide was submitted and reviewed. In addition to discussing the items on the PREA Inmate Intake Handout, facilitators cover reentrant's rights to be free from sexual abuse, sexual harassment and retaliation for reporting an incident or cooperating with an investigation.

Further, facilities are required to make an audio announcement of the agency's zero-tolerance policy over the public address system once every shift. This practice was confirmed in reviewing the submitted copies of the Security Activity Log for four days and heard during the onsite visit.

Subsection (b):

All reentrants, including new admissions, incoming transfers, and Parole Violators receive the same PREA educational information. This was confirmed by the CCCMs who conduct intake. In the event a reentrant remains at the same facility for over one year, the reentrant's assigned counselor is responsible to offer the reentrant an opportunity to discuss issues related to sexual abuse and provide the reentrant with a copy of the PREA Inmate Intake Handout during the anniversary month of the reentrant commitment month. 53 reentrants transferred from another community confinement facility to CCC#4 Philadelphia during the past 12 months and have received PREA educational information.

Subsection (c):

DC-ADM 008 requires each facility to provide reentrant education explaining the zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse, sexual harassment or retaliation, and what to do if the reentrant is the victim of such. The information is required to be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled or who have limited reading skills. Braille versions of the intake material are available to reentrants at initial reception sites.

CCC#4 Philadelphia provides PREA Information in various formats. The PREA Information Intake handout is written in Spanish, and PREA posters displayed throughout the facility, evidenced by photographs submitted and a tour of the facility, are in both English and Spanish. For reentrants who are visually impaired, information written in Braille is available. During each shift, a PREA announcement is read over the Public Announcement System. Copies of pages from the security log book indicated the announcement was read. Further, during the tour of the facility, auditors heard the announcement. Additionally the PREA video is shown to all reentrants at orientation which is provided in English and Spanish, with subtitles. Further, staff meet individually with reentrants to ensure they understand the material and discuss any further issues surrounding the information reentrants were provided.

Subsection (d):

Per DC-ADM 008 sexual abuse, sexual harassment, and retaliation training via video is documented by the reentrant signing the PREA Inmate Education Verification Form and documented in the Inmate Cumulative Adjustment Record (ICAR). CCC#4 Philadelphia submitted six completed "PREA Education Receipt For Reentrants" from 2019. According to DC-ADM 008, reentrants confirm receipt of the the PREA Inmate Intake Handout by signing

the "PREA Reentrant and Detainee Intake Handout Receipt". A blank copy was submitted for review and was updated with the updates of DC-ADM 008 in April 2019. CCC#4 submitted six completed copies of the "PREA Reentrant Intake Handout Receipt" signed at various times in 2019 by reentrants. On both forms, reentrants acknowledge receiving the PREA Inmate Intake Handout upon arrival to the facility which include:

1. The Department's Zero tolerance Policy
2. What is sexual Abuse?
3. What is Sexual Harassment?
4. What to do if you have been sexually abused?
5. How can you report a sexual abuse or sexual harassment?

Additionally, CCC# 4 Philadelphia submitted five completed "PREA Sexual Abuse Awareness Handout Receipt for Reentrants" signed during 2019.

Most reentrants interviewed indicated they received information when they first arrived about the rules against sexual abuse and sexual harassment, rights not to be sexually abused or sexually harassed, how to report, and the right not to be punished for reporting incidents of sexual abuse or sexual harassment. The initial training occurred upon arrival. Additionally, reentrants talked about orientation and meeting with their assigned counselor within two days of arrival and receiving PREA information.

Corrective Action: None

115.234	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11 - Sexual Abuse/Sexual Harassment Prevention - Training and Education 3. Documents PREA Grant Project - Sexual Assault Investigator training Power Points for Modules 1-7: Module 1 Introduction to Sexual Abuse and Sexual Harassment Investigations Module 2 Basic Stages of Crime Scene Management Module 3 Interviewing Victims and Suspected Perpetrators Module 4 Investigative Outcomes Module 5 Documentation Module 6 Prosecutorial Collaboration Module 7 PA DOC Allegation Processing Procedure Investigator Training Transcripts - 23 4. Interviews Lead PREA Investigator 5. Tour of the Facility <p>Subsection (a) and (b): Per DC-ADM 008 and practice by the Department, all staff designated to conduct sexual abuse investigations complete employee basics and refresher training prior to receiving specialized training for investigators. The specialized training includes, as outlined in policy and confirmed by reviewing the seven training modules: Interviewing sexual abuse and sexual harassment victims, sexual abuse evidence collections in confinement settings, proper use of Miranda warnings, the Garrity rule, the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral</p> <p>The seven lesson modules for investigator training containing the above information: Module 1 Introduction to Sexual Abuse and Sexual Harassment Investigations Module 2 Basic Stages of Crime Scene Management Module 3 Interviewing Victims and Suspected Perpetrators Module 4 Investigative Outcomes Module 5 Documentation Module 6 Prosecutorial Collaboration Module 7 PA DOC Allegation Processing Procedure</p>

On April 4, 2019, the lead PREA Investigator was interviewed. The Investigator reported completing PREA training to include PREA investigation, PCM training, PRAT training, and the basic and refresher PREA training required of all staff. PREA Investigation training included topics such as conducting witness interviews, the use of Miranda and Garrity warnings, evidence collections procedures and preservation of evidence.

Subsection (c):

According to DC-ADM 008, staff are required to sign the PREA Training and Understanding Verification Form unless completed through web-based training which has an internal tracking component. The verification form indicated staff have received and understand the information. The Bureau of Community Corrections utilizes MOC, a central PREA investigation unit for tracking and investigations. There are currently 23 trained PREA Investigators through MOC. The training transcripts for all 23 investigators were submitted. The transcripts indicate the PREA investigators have received the basic PREA Training and annual update training as well as the PREA Training for Correctional Investigators.

Subsection (d):

Per DC-ADM 008, "The Department, any state entity, or Department of Justice component that investigates sexual abuse in confinement setting shall provide such training to its agents and investigators who conduct such investigations".

Corrective Action: None

115.235	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11 - Sexual Abuse/Sexual harassment Prevention - Training and Education 8.1.1, Community Corrections Centers Procedures Manual Section 5 - Resident Procedures 3. Documents PREA Specialized Training Medical and Mental Health Care Standards Facilitator Guide PREA Medical and Mental Care Standards Participant Guide 4. Interviews 5. Tour of the Facility <p>Subsection (a) and (b): CCC#4 Philadelphia does not utilize Department of Corrections staff or contractors on site for medical and mental health care of reentrants or the completion of a sexual abuse examinations. The CCC utilizes community resources for reentrant medical and mental health care. The Department of Corrections sets expectations for medical and mental health care of inmates and reentrants as it relates to PREA. DC-ADM 008 requires any medical or mental health care staff to receive specialized training to include:</p> <ol style="list-style-type: none"> 1. how to detect and assess signs of sexual abuse and sexual harassment, 2. how to preserve physical evidence of sexual abuse, 3. how to respond effectively and professionally to victims of sexual abuse and sexual harassment, 4. how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. <p>This training is a standardized training developed by the Department PREA Coordinator for Department wide training. The Facilitator Guide was submitted for review. The objectives of the training mirror the PREA Standards and the DC-ADM 008. The training program meets those objectives. Additionally, the Participant Guide supplements the training and also addresses the stated objectives.</p> <p>Subsection (c): Per DC-ADM 008, upon completion of this training, staff are required to sign the PREA Training and Understanding Verification Form acknowledging receipt and understanding of the in PREA information. This form is housed in the employee's training file.</p> <p>Subsection (d): The requirements of this standard apply to all staff providing medical and mental health care</p>

services to any State Correctional Institution, Community Corrections Center or Community Corrections Facility. Medical staff include licensed and non-licensed medical staff, Correctional Health Care Administrators and contracted providers.

Corrective Action: None

115.241 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 9 - Sexual Abuse/Sexual Harassment Prevention - Screening for Risk of Victimization and Abusiveness

3. Documents

PREA Tracker

PA DOC PREA Risk Assessment

PREA Risk Assessment User Guide

PRAT training Power Point

4. Interviews

PREA Coordinator

Facility Director/PREA Compliance Manager

Staff

Random Reentrants

5. Tour of the Facility

Subsection (a) and (b):

DC-ADM 008 requires all inmates to be screened for risk of victimization and abusiveness.

The screening is completed by using the PREA Risk Assessment Tool (PRAT) during:

a. the intake process

b. upon receipt into another facility

c. 20-30 days after receipt into a State Correctional Institution, Community Corrections Center, and Community Contract Facility

d. whenever an inmate is involved in an incident of sexual abuse

e. at the inmate's annual review

Within the first 72 hours of reception, the PRAT is conducted by the Community Corrections Counselor, consistent with policy. According to the Pre-Audit Questionnaire, 114 reentrants were received at CCC#4 during the past year and 106 were screened for the risk of victimization and abusiveness. This is consistent with the PREA Tracker that was submitted for review. Of the 8 reentrants not screened within 72 hours, they were screened between 2 and 81 days later. In a closer review of the PREA Tracker, in 2019, all of the initial PRATS were completed within 72 hours of arrival to CCC#4 Philadelphia.

Subsection (c) and (d):

DC-ADM 008 outlines the criteria to be included in the PREA Risk Assessment Tool (PRAT).

The criteria in DC-ADM 008 mirror the language of the Federal Standards. In May 2018, PA

DOC, in consultation with the PREA Resource Center, revised the PRAT to what is currently in

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

All staff responsible for the administration of the PRAT complete a standard training. Additionally, the PREA Risk Assessment Tool User Guide revised in May 2018 is available for all staff administering the PRAT to provide guidance and information to explain the intent of the questions and factors to consider. Staff responsible for administering the PRAT are knowledgeable in the content of the tool and factors that are considered.

Subsection (e):

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

Subsection (f):

Per DC-ADM 008, a reassessment shall be conducted by the Corrections Counselor between calendar day 20 and 30 of every reentrants arrival at the facility. The PREA Tracker assists staff in tracking day 20, day 30, and when the assessment was completed. According to the PRE-Audit Questionnaire, 85% of reentrants completed the reassessment within 20-30 days of arrival. This is consistent with the PREA Tracker information submitted for review. While on site, this auditor requested and reviewed additional tracking from 2019 of which four reassessments were completed on day 31. On July 14, 2019, additional tracking information was requested for nine specific reentrant reassessments due in June and July. Seven were completed within the appropriate time frame, one was 28 days over due, and one released prior to the thirty days. Hence, approximately 87.5% of reassessments were completed by day 30. Timeliness of PRAT completion has been identified as an area of improvement for PA DOC and CCC#4 Pennsylvania. The PREA Compliance Division is monitoring this and has been for approximately one year, as evidenced by the improved timeliness. Multiple staff at CCC#4 Philadelphia are responsible for reviewing the tracking form at a minimum of two times per week. A copy is distributed to the counselors who administer the assessment once a week and consideration is given when due dates fall on weekends and holidays. Additionally, the PRAT is also now available on paper should the electronic version not be accessible. When this occurs, the form will be securely stored until the PRAT online evaluation tool is available

and the scores can be inputted. A notation will be made that the assessment was completed on paper and the date of completion. The paper version is then destroyed. The PREA Coordinator and facility Director continue to address PRAT administration and will continue to address until 100% of PRAT assessments and reassessments are consistently completed according to policy.

Subsection (g):

Per DC-ADM 008, a reassessment is also completed by the counselor when additional and relevant information is received by facility staff since the intake screening, when there is an allegation of sexual abuse and when the reentrant remains at a single facility for one year or longer. Although staff conducting the PRAT are aware of the requirement to reassess when there is an allegation, they have not needed to rescreen for that reason.

Subsection (h):

Per DC-ADM 008, reentrants will not be disciplined for refusing to answer or for not disclosing complete information in response to the questions regarding prior victimization, disabilities, the reentrant's perception of vulnerability or the reentrant's sexual orientation. This requirement is outlined in both the PRAT User Guide and the PRAT training.

Prior to administering the PRAT, staff are trained to read the statement printed on the tool which includes the phrase "You may share as much or as little information as you feel comfortable provide...You will not be penalized in any way if you choose not to provide any information". This is also highlighted in the PRAT User Guide. The initial PRAT was completed and the process observed by auditors during the on-site visit. Staff read the phrase prior to administering the assessment.

During interviews, staff completing the PRAT acknowledged reentrants are not disciplined for refusing to answer or not disclosing complete information.

Subsection (i):

Per DC-ADM 008 and training materials, the assessment scores are not disclosed to the reentrant. If an inmate scores in the "high risk" category, the information is immediately entered into the Unit Management System under Security Concerns, however no actual score is entered due to confidentiality. Staff are trained not to discuss the PRAT information with anyone except to the extent necessary to make a report of sexual abuse, make a referral for evaluation and inform housing, bed, work and programming assignments.

According to the PREA Coordinator, there are two levels of access in the PRAT system governed by the individual's logon information as determined by the PREA Office. Staff conducting the assessment can enter information into the system, but are not able to go back into the system to view the assessment. The PCM and Administrative Officer are the only two staff from each facility who have the approvals to view the results of the PRAT assessment. Staff administering the PRAT confirmed the system is password protected and they do not have access to view the assessment or results once completed and entered into the system. They furthered that information is not printed or noted in files.

Most Reentrants interviewed confirmed they were asked questions found on the PRAT by their counselor either the day after or a couple of days after. Reentrants inconsistently reported

they were asked the same questions again. However, according to the PRAT Tracking, all of the reentrants completed the initial PRAT screen, and those who were at the CCC for 30 days had been reassessed.

Corrective Action: None

115.242	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 9 - Sexual Abuse/Sexual harassment Prevention - Screening for Risk of victimization and abusiveness DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 19 - Working with Transgender and Intersex Inmates 3. Documents PRAT Tracking Tool PRAT Tracker for CCC#4 Philadelphia PRAT User Guide PRAT Training Power Point Gender Review Committee (GRC) Checklist blank and completed PREA Accommodation Committee Reassessment Checklist 4. Interviews PREA Coordinator Facility Director/PREA Compliance Manager Staff 5. Tour of the Facility <p>Subsection (a) and (b): DC-ADM 008 indicates that the information received through the administration of the PRAT will be used to inform housing, bed placement, work, education and program assignments with the goal of keeping separate reentrants at high risk for being sexually victimized from those at high risk of being sexually abusive. The PRAT User Guide and PRAT Training PowerPoint are consistent with policy on the use of the PRAT scores. The PRAT Tracking form is used to track housing assignment for each reentrant, high risk victimization/high risk abuser designations, and self identified members of the lesbian, gay, bisexual, transgender, intersex community. The PREA Compliance Manager and staff conducting the PRAT confirmed that scores are considered in room assignments at CCC#4.</p> <p>Subsection (c) and (d): By DC-ADM 008, the Department considers on a case by case basis whether a placement would ensure the health and safety of all impacted reentrants and whether the placement or accommodation could potentially present management or security problems when assigning a transgender or intersex reentrant to a facility that is consistent with the reentrant's gender identity and in making other privacy, housing, and programming assignments. When transferred to a facility, transgender or intersex reentrants are reviewed by the PREA Accommodation Committee (PAC) to make individualized determinations regarding reentrant's</p>

privacy, housing, and programming assignments to ensure their safety at the current facility. Participants in the review consider all aspects of the reentrant's social and medication transition. Reentrants are invited to participate in the PAC meetings. The reviews are documented by using the PREA Accommodation Committee (PAC) checklist and the PREA Accommodation Committee Reassessment Checklist completed at the 6 month review. Additionally, if information is received that is indicative of a threat to the safety of a transgender or intersex reentrant, the PCM will convene the PAC. CCC#4 Philadelphia submitted a completed PREA Accommodation Committee Checklist for review and indicates the CCC is following this procedure.

Subsection (e):

By policy, transgender and intersex reentrants are given the opportunity to shower separately and privately from other reentrants.

According to CCC#4 Philadelphia staff interviews and documentation submitted in the PAQ, a reentrant who identified as transgender was placed at the facility however was transferred prior to the onsite audit and was therefore not interviewed. The PCM indicated he met with the reentrant within the first 24 hours of arrival to the facility and again within 72 hours. The reentrant was assigned a single room on the second floor near the bathrooms, as this was an area that was nearer to the monitor's office and in full view of cameras. When the reentrant showered, staff indicated they would ensure that no other reentrant entered the bathroom by standing outside the door, to allow for the reentrant to privately shower. The Gender Review Committee did discuss the safety of the reentrant and the reentrant's views with respect to her own safety was considered. The form was completed and forwarded as required. The PCM was not clear on the process and time frames for the Gender Review Committee, however, in this situation the requirements were followed. During the closing meeting, the steps taken were confirmed as appropriate and the PCM was encouraged to follow the same process for all transgender reentrants placed at the CCC.

Subsection (f):

By policy, the Office of Population Management shall not place transgender or intersex reentrant in dedicated facilities, units, or wings solely based on such identification or status, unless such a placement is in connection with a consent decree, legal settlement, or legal judgment for the purposes of protecting such reentrants. The CCC, in coordination with the Bureau of Community Corrections Administration and the Office of Population Management, will strive not to place transgender and intersex reentrants in dedicated facilities.

According to the PREA Coordinator, PA DOC is not under any legal action or consent decrees. The Department ensures that every facility has the ability to house transgender reentrants and inmates. When determining placement, the Department has identified five Secure Correctional Institutions that are unable to provide for private showers. However, each of the Community Correctional Centers are equipped to safely house transgender and intersex reentrants. The Department does not dedicate units or institutions to housing identified LGBTI reentrants.

Corrective Action: None

115.251	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Reporting Sexual Abuse and Sexual Harassment 3. Documents Zero tolerance Fact Sheet DAILY PREA ANNOUNCEMENT PREA Inmate Intake Handout PREA Reentrant Intake Handout Receipt - 6 completed Inmate Handbook Security Log copy ZERO Tolerance Poster Photographs of posted signs PREA Basic training Power Point PREA 2018 Essentials Power Point slides Public Website screenshot 4. Interviews Random Staff Reentrants 5. Tour of the Facility <p>Subsection (a) and (b) DC-ADM 008 requires all staff, contractors, volunteers, and reentrants to report knowledge or suspicion of sexual abuse, sexual harassment, retaliation by other reentrants or staff for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. DC-ADM 008 further provides a number of ways in which reentrants may report allegations of sexual abuse, sexual harassment, retaliation and staff neglect or violation of responsibilities that may have contributed to such incidents. The following are ways to report as listed in policy:</p> <ol style="list-style-type: none"> 1. A verbal report to any staff member, 2. submitting a DC-135A, Inmate's Request to Staff Member or other written correspondence, 3. Submitting a written report to the Sexual Abuse reporting address with the Pennsylvania State Police (PSP), 4. A family or friend may report directly to the facility or PSP. <p>This same information is provided to reentrants through the Inmate Handbook and the PREA Inmate Intake Handout given to all reentrants at the time of intake at a new facility. Additionally this information is provided consistently through posters displayed throughout CCC#4 Philadelphia and during the daily PREA announcements conducted on each shift. By policy,</p>

reentrants must be provided with immediate access to at least one of the methods as indicated above in which the reentrant may privately report. Reentrants are also reminded reports may be made anonymously and through third party.

Both staff and reentrants were aware of several ways in which reentrants could report sexual assault and sexual harassment including in writing through the grievance process, directly to staff, or through family and friends. They also acknowledged the information is posted throughout the facility to reference.

Subsection (c):

By policy, staff are required to accept and document reports made verbally, in writing, anonymously, and from uninvolved parties. The procedure further requires staff to promptly forward the information to the facilities designated investigators, which for CCC#4 Philadelphia is coordinated through Bureau of Community Corrections - Management Operations Center (BCC-MOC). Verbal reports are also immediately documented and retained in the investigative file.

Staff and reentrants reported having the option to report in person or in writing, and most reentrants could identify someone outside of the facility who could report on their behalf. Most reentrants were aware of the option to report anonymously.

Subsection (d):

Staff are trained as evidence in the PREA Basic Training PowerPoint and the PREA 2018 Essentials training, that they have the option to privately report an allegation of sexual abuse, sexual harassment, or retaliation through writing an anonymous letter according to policy, or reporting privately to the State PREA director or PREA Compliance Manager.

Staff interviewed were able to identify a method in which they could report privately of sexual abuse and sexual harassment. Most staff felt comfortable reporting directly to the facility Director. Of those who didn't site the Director as an option, they would report directly to MOC.

Corrective Action: None

115.252	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 1 - Grievance Reporting DC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 2 - Grievance Processing and Response DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 12 - Reporting Sexual Abuse and Sexual Harassment 3. Documents 4. Interviews Facility Director 5. Tour of the Facility <p>BCC-ADM 003, specifically states that a grievance regarding an allegation of sexual abuse or sexual harassment will not be addressed through the Resident Grievance Process. If an allegation of sexual abuse or sexual harassment is submitted through the grievance process, the grievance is rejected. The reentrant is notified of the rejected grievance, however BCC-MOC is immediately notified verbally of the allegations. BCC-MOC will complete the First Responder Duties and will process and investigate the allegations according to DC-ADM 008. There are no time limits for when a reentrant may submit a grievance regarding sexual abuse or sexual harassment; however, the remainder of the grievance may be held to the 15 day time frame. Grievance Officers will not investigate the allegation unless directed to do so by BCC-MOC. Grievances are submitted through a locked box located outside of the facility Director's office. The Director indicated he is the only person who has access to the locked box and checks it twice daily. During the past year, no incidents of sexual abuse or sexual harassment at CCC#4 Philadelphia were reported through the grievance process.</p> <p>Corrective Action: None</p>

115.253	Resident access to outside confidential support services
	<p data-bbox="252 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 517 360">Evidence Reviewed:</p> <ol data-bbox="252 371 1469 1178" style="list-style-type: none"> <li data-bbox="252 371 600 405">1. Pre-Audit Questionnaire <li data-bbox="252 461 1469 573">2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 15 - Access to Outside Confidential Support Services <li data-bbox="252 629 1461 954">3. Documents Photographs of hotline phone number posted PREA Inmate Intake Handout Inmate Education Facilitator's Guide Assurances to Victims of Sexual Abuse Zero Tolerance poster Letter of Agreement between Women Organized Against Rape (WOAR) and the Department of Corrections CCC#4 dated April 15, 2019 <li data-bbox="252 1010 416 1088">4. Interviews Reentrants <li data-bbox="252 1144 528 1178">5. Tour of the Facility <p data-bbox="252 1223 453 1256">Subsection (a):</p> <p data-bbox="252 1267 1477 1861">Each facility is required to ensure that reentrants are offered and provided with access to outside victim advocates for emotional support services related to sexual abuse which has occurred in a confinement setting. These support services may be provided in a variety of methods such as in person, non-monitored phone calls, or writing. The reentrant is required through policy the opportunity to speak with a victim advocate upon receipt of an allegation and receive continued care when the sexual abuse allegation occurred while in a confined setting. Reentrants are provided this information, along with contact information for supportive services agency. The PREA Inmate Intake Handout given to reentrants provides the address for the Pennsylvania Coalition Against Rape (PCAR). During PREA Education, staff reiterate the reentrant's opportunity to seek counseling if the reentrant was the victim of sexual abuse. The counseling can be obtained through the rape crisis center and is independent of CCC#4 Philadelphia. Reentrants are also provided Assurances to Victims of Sexual Abuse which provides the address and website for PCAR and for the local Rape Crisis Center. Finally, this information is readily available throughout the facility on PREA posters.</p> <p data-bbox="252 1906 453 1939">Subsection (b):</p> <p data-bbox="252 1951 1461 2152">According to DC-ADM 008, prior to giving reentrants access to support service, the PREA Compliance Manager is responsible of informing reentrants 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. Each facility is to ensure that if facility phones or public pay phones within the facility are monitored, the level of monitoring is</p>

clearly posted next to the phone in both English and Spanish. If the facility monitors mail, the level of monitoring must also be clearly posted in the handbook and reentrant bulletin boards.

Most reentrants interviewed were aware of the opportunity to receive support and counseling services for those who have been sexually abused or sexually harassed. Reentrants did not know the specific agency, however, they knew where to obtain the information either talking with staff, referencing PREA information given to them, or viewing the information posted in the facility.

Subsection (c):

By policy, the PREA Compliance Manager is responsible for coordinating victim services related to sexual abuse for the facility and work with the PCAR approved local rape crisis center to establish a PREA Rape Crisis Letter of Agreement (LOA) or Memorandum of Understanding (MOU). A copy of the Letter of Agreement between Women Organized Against Rape (WOAR) and the Department of Corrections CCC#4 signed by the WOAR representative and the CCC Facility Director dated April 15, 2019. WOAR agrees to provide advocacy and confidential support services to the victim of sexual abuse by telephone, mail, or in person.

Corrective Action: None

115.254	Third party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures 3. Documents <ul style="list-style-type: none"> Photographs of PREA Posters displayed - 2 Public Website screenshot Zero Tolerance Poster Inmate Education Facilitator's Guide 4. Interviews <ul style="list-style-type: none"> Reentrants 5. Tour of the Facility <p>DC-ADM 008 allows for friends, family, and the general public to report allegations of sexual abuse and sexual harassment on behalf of a reentrant. Reports may be made directly to the Pennsylvania State Police through written report or directly to the facility. This method of reporting is shared with reentrants on the Inmate Intake handout and through the PREA Inmate Education. Reentrants also have this method presented to them on PREA posters displayed throughout the facility. Friends, family, and the general public are informed of this method through the PA DOC Public Website. Additionally, most reentrants interviewed were able to identify someone outside of the facility and DOC who could report on their behalf.</p> <p>Corrective Action: None</p>

115.261	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12 Reporting Sexual Abuse and Sexual Harassment 3. Documents Photograph of First Responder Checklist card 4. Interviews Facility Director Lead PREA Investigator Random Staff SAFE/SANE Medical Agency Advocacy Agency 5. Tour of the Facility <p>Subsection (a): By policy in DC-ADM 008, Staff, contractors, volunteers and reentrants are required to report knowledge or suspicion of: sexual abuse, sexual harassment, retaliation by others for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>Any staff, contract service provider and volunteer is required to immediately report any knowledge, suspicion, or information regarding sexual abuse, sexual harassment, retaliation, or staff neglect to the Shift Commander, Facility Director, PBPP District Director, or Deputy District Director.</p> <p>Staff are provided pocket cards with the first responder duties, which includes contact the BCC Management Operations Center (BCC-MOC) and follow the directions provided. All staff interviewed knew of their responsibility to immediately report any knowledge or suspicion of sexual abuse or sexual harassment to either the facility Director or Management Operations Center (MOC).</p> <p>Subsection (b): DC-ADM 008, states that PREA reports are to be held in strict confidence. It further directs staff not to reveal any information related to sexual abuse allegation to anyone other than to the extent necessary to report to designated supervisors and officials, to make treatment, investigation, and other security and management decisions. During staff interviews, no staff reported they would reveal information regarding the allegation.</p>

Subsection (c):

Although CCC#4 Philadelphia does not employ medical and mental health staff. DC-ADM 008 covering the entire Department of Corrections requires medical and mental health practitioners to report sexual abuse and to inform reentrants of the practitioner's duty to report and the limitations of confidentiality, at the initiation of services, unless otherwise precluded by Federal, State, or local law.

Reentrants receive medical and mental health care off site at community agencies. When accessing medical services at the Sexual Assault Response Center, patients check in with a Sergeant from the Philadelphia Police Sensitive Victims. However, patients are not required to file a report or have the rape kit processed in order to receive medical services. Reentrants who receive crisis and support services through the Women Organized Against Rape are provided with the limits of confidentiality, specifically as it relates to patient safety and risk of suicide. Patients are given the authority to make informed treatment decisions.

Subsection (d):

CCC#4 Philadelphia does not house anyone under the age of 18 or vulnerable adults, however, by policy, if the alleged victim is under the age of 18, the Department will refer the allegation to the designated State or local services agency under applicable mandatory reporting laws of Pennsylvania. This was confirmed by the Facility Director and observation during the tour of the facility. The PREA Coordinator confirmed if the alleged sexual abuse incident involved a person under the age of 18 years old, the allegations have to be reported to the local Children Youth Services and Family agency who investigates the allegations.

Subsection (e):

According to DC-ADM 008, when learning of an allegation of sexual abuse, sexual harassment, including third party and anonymous reports, the facility director or designee is required to verbally notify the BCC-MOC for action and investigation. If staff are unsure whether an allegation being made is related to sexual abuse or sexual harassment, the information is still forwarded to BCC-MOC for review. According to interviews, all allegations of sexual abuse and sexual harassment are investigated. It was confirmed by the Facility Director that allegations of sexual abuse and sexual harassment are reported to MOC and that all allegations are investigated. The lead PREA Investigator for the Community Corrections Centers confirmed that when an allegation is received at MOC, it is assigned to an investigator.

Corrective Action: None

115.262	Agency protection duties
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 517 360">Evidence Reviewed:</p> <ol data-bbox="252 371 1420 1043" style="list-style-type: none"> <li data-bbox="252 371 600 405">1. Pre-Audit Questionnaire <li data-bbox="252 456 1420 663">2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 1 - Sexual Abuse - Sexual Harassment Prevention - Responsibilities DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 14 - Responding to Reports of Sexual Abuse <li data-bbox="252 714 434 748">3. Documents <li data-bbox="252 799 456 958">4. Interviews Agency Head Facility Director Random Staff <li data-bbox="252 1010 528 1043">5. Tour of the Facility <p data-bbox="252 1099 1469 1258">According to DC-ADM 008, when staff become aware that a reentrant is subject to substantial risk of imminent sexual abuse, appropriate and immediate action shall be taken to protect the reentrant. First responders are also required to take preliminary steps to protect the alleged victim. As a first responder, staff will escort the alleged victim to a safe location.</p> <p data-bbox="252 1314 1453 1384">During the past 12 months, staff at CCC#4 Philadelphia have not had an incident in which a reentrant was at substantial risk for sexual abuse and needed steps to protect the reentrant.</p> <p data-bbox="252 1440 1481 1771">According to the Agency Head, staff would take immediate action to ensure the alleged victim is separated from any threats. Staff would consider housing unit or facility transfers if necessary. Staff interviewed consistently answered that if they suspected a reentrant was at substantial risk of imminent sexual abuse they would immediately ensure the safety of the reentrant by placing them in a single room or separating them from the threat. They would then notify the Director or MOC. The facility Director also indicated he would separate the reentrant at risk either by placing him in a room closer to the monitors, on the other side of the building, or transferring a reentrant to another CCC. The Director would also notify MOC.</p> <p data-bbox="252 1827 561 1861">Corrective Action: None</p>

115.263	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Mnual Section 12 - Reporting Sexual Abuse and Sexual Harassment 3. Documents Notification of Sexual Abuse Allagation to Another Facility 4. Interviews Facility Director/PREA Compliance Manager Agency Head 5. Tour of the Facility <p>During the past twelve months, CCC#4 Philadelphia has not received an allegation of sexual abuse by a reentrant while at another facility. DC-ADM 008 addresses the process for when this does occur.</p> <ol style="list-style-type: none"> 1. Upon receiving the allegation that a reentrant was sexually abused while at another facility, the Facility Director or designee will document the receipt of the allegation using the DC-121, Part 3 Incident report Form and verbally notify the BCC-MOC immediately. 2. The BCC-MOC will prepare the confidential report: PREA Report - Sexual Abuse. The affected facility will be provided a copy of the confidential report and contact information electronically. 3. The BCC Director will make initial contact with the Facility Director or appropriate office of the agency where the alleged abuse occurred, using the PREA Report-Sexual Abuse to coordinate any immediate actions. Within 72 hours, the BCC Director will make follow-up contact with the affected Facility Director to make the formal notification. 4. Upon receipt of an allegations from another facility that a reentrant was sexually abused while confined at that location, the Facility Manager or agency office documents the receipt of the allegation in the agency's PREA Tracking System. 5. The Facility Manager or agency office that receives the notification shall immediately notify BCC-MOC. <p>The facility Director confirmed he has not had this situation in the two years he has been at the CCC. However, should this occur, the Director would notify MOC and complete written documentation. MOC then contacts the Director or Superintendent of the facility in which the abuse occurred. According to the Agency Head, the designated point of contact is the Superintendent or Facility Manager. The PREA Compliance Manager is notified and a report is completed and the allegation is tracked.</p> <p>Corrective Action: None</p>



115.264	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 14 - Responding to Reports of Sexual Abuse 3. Documents Photograph of First Responder Cards Bureau of Community Correction and Lockup Initial Response Checklist Bureau of Community Corrections and Lock up PREA Report - Sexual abuse 4. Interviews Staff 5. Tour of the Facility <p>Subsection (a) and (b): According to DC-ADM 008, when learning of an allegation of sexual abuse, the first staff member to respond shall take immediate action which includes:</p> <ol style="list-style-type: none"> a. call 911 if a sexual assault is currently in progress b. escort the alleged victim to a safe location away from others c. If the incident occurred within 96 hours of the report, request the alleged victim not take any action that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating d. notify the BCC Facility Director or designee e. contact BCC-MOC and follow all direction provided f. do not interview the alleged victim or anyone else g. preserve and protect any possible crime scene h. do not take any photographs or video of the alleged victim or abuser I. complete the BCC and Lockup Initial response Checklist and DC-121, Part 3-BCC J. follow procedures and submit all other required written reports. <p>Staff are reminded of their responsibilities on the pocket card they are provided. These steps and responsibilities are documented on the BCC and Lockup Initial Response Checklist in section A - Get the Alleged Victim to a safe Location</p> <ul style="list-style-type: none"> - Do not question the victim - Advise the victim the he/she should not shower or otherwise clean him/herself, or if the assault was oral, not to drink, brush teeth, or otherwise take any action which could damage or destroy evidence - keep the victim separated from others - notify BCC Center Director or designee - no staff member is permitted to question the alleged victim, witnesses, or assailants without

direction from the BCC-MOC
Section B - Secure the Crime Scene

Further, staff are required to document steps taken while responding to a sexual abuse incident using the PREA Report - Sexual Abuse form. This form is a checklist to ensure the process is followed. This report is routed to the PREA Captain, CCC District Director, Regional Director, Bureau Duty Officer, and DOC Duty Officer.

All staff at CCC#4 Philadelphia have the potential to be first responders. Staff consistently indicated they would ensure the victim is safe by separating the alleged victim from the alleged abuser, preserving any physical evidence by asking the alleged victim not to eat, drink, shower, use the bathroom; and notifying law enforcement, the Director or MOC. Staff were aware that they do not collect physical evidence at the center, but evidence is collected by law enforcement and from the reentrant at the hospital.

Corrective Action: None

115.265	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 14 - Responding to Reports of Sexual Abuse 3. Documents Local Institutional Plan dated January 15, 2019 4. Interviews Facility Director 5. Tour of the Facility <p>Per DC-ADM 008, each facility is required to develop a written plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. This may be in the form of a local facility policy or documented facility specific plan. The CCC#4 Philadelphia Coordinated Response plan dated January 15, 2019 was submitted for review. The plan includes first responder duties, Facility Director responsibilities, emergency medical treatment services, and mental health treatment services. Under the Facility Director responsibilities, the Facility Director notifies BCC-MOC to begin the investigative procedure, as well as Pennsylvania State Police, if appropriate.</p> <p>The Facility Director confirmed there is a plan to coordinate actions taken in response to a sexual assault. To assist in following the plan, staff may reference the First Responder Card and Checklist. Additionally, MOC is involved when an incident of sexual assault occurs and also provides direction. Community providers are in place to address medical and mental health care of the alleged victim. This plan is solidified with community providers through Letters of Agreement.</p> <p>Corrective Action: None</p>

115.266	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ol style="list-style-type: none"> 4.4.1, Human Resources and Labor Relations Procedures Manual Section 5 - Suspension Without Pay for Exempt Employees Under the Fair labor Standards Act and Suspension Pending Investigation for Exempt and Non-Exempt Employees 3. Documents <p>FOSCEP Collective Bargaining Agreement July 1, 2016 to June 30, 2019 signed June 6, 2017</p> <p>AFSCME - 1st Level Supervisor of H1 MOU 2017-2020 signed April 10, 18</p> <p>AFSCME Master Agreement 2016-2019</p> <p>CIVEA Agreement 2016-2019 signed April 29, 2017</p> <p>Memo from Secretary to Human Resources dated February 15, 2015</p> <p>PSCOA Interest Arbitration Award 2014-2017 signed November 7, 2014</p> <p>PSCOA Act 195 Interest Arbitration Award Memo to 2015 PREA Auditor from Director of Human Resources dated January 13, 2015</p> <p>Memo from Secretary to Superintendents, Bureau Directors, and Regional Directors dated January 12, 2015</p> <p>Memo from Secretary to Superintendents, Bureau Directors, and Regional Directors dated February 13, 2015</p> <p>Memo from Secretary to Superintendents, Bureau Directors, and Regional Directors dated March 12, 2015</p> <p>Memo from Director of Human Resources to 2015 PREA Auditor dated January 13, 2015</p> <p>MOU Between the commonwealth of Pennsylvania and OPEIU Healthcare Pennsylvania, Local 112 dated July 1, 2016 to June 30, 2019 signed January 25, 2018</p> <p>Agreement Between Commonwealth of Pennsylvania and the Pennsylvania State System of Higher Education and Pennsylvania Doctors Alliance dated July 1 2016 through June 30 2019 signed October 16, 2017</p> <p>Agreement Between Commonwealth of Pennsylvania and SEIU Local 668 dated July 1, 2016 to June 30, 2019 signed April 6, 2017</p> <p>Agreement Between Commonwealth of Pennsylvania and the Service Employees International Union, Healthcare Pennsylvania, CTW, CLC dated July 1, 2016 to June 30, 2019 signed May 23, 2017</p> 4. Interviews <p>Agency Head</p> 5. Tour of the Facility <p>Subsection (a) and (b):</p> <p>According to a letter dated January 13, 2015 from the Director of Human Resources to the 2015 PREA Auditor, the Pennsylvania Department Of Corrections operates within the confines</p>

of collective bargaining agreements with eight different unions. None of the collective bargaining agreements contain language that limits the ability to remove a staff member alleged to have engaged in sexual abuse from contact with inmate (reentrant) pending the outcome of an investigation. The Pennsylvania Department Of Corrections Secretary provided direction to executive leadership outlining the procedures to follow. He directed that suspensions pending investigation should only be considered when the alleged offenses are of a nature that warrants immediate removal from the workplace. There does not need to be a demonstration that the employee committed the suspected offenses, but rather the nature of the allegations are such that there is just cause to remove the employee from the institution pending the outcome of the investigation. He furthered that for allegations that fall under PREA, the Commonwealth has no requirement to provide 24 hours written notification of the allegations in accordance with Article 33, Section 20 pursuant to the interest arbitration award issued November 7, 2014.

Nine agreements were submitted and reviewed. None of the agreements limited the Department's ability to remove alleged staff sexual abusers from contact with reentrants pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Additionally there is no language restricting the disciplinary process resulting in the process being inconsistent with PREA standards. Further, the agreements do not speak to the removal of a no contact assignment from an employee's file if the allegations are not substantiated following an investigation. The language consistently utilizes the term "just cause" when determining if the employer will demote, suspend, discharge or take any disciplinary action against an employee.

Human Resource and Labor Relations Procedures Manual 4.1.1, allows for employees to be suspended pending an investigation when the alleged offenses are severe in nature and warrants immediate removal from the workplace. This policy exempts the requirement that H-1 employees be given written notification of allegations prior to the pre-suspension meeting when the allegation falls under PREA.

The interview with the Agency Head confirmed the Commonwealth renewed collective bargaining agreements since 2012 and that agreements contain language allowing the Department to remove alleged staff sexual abusers from contact with reentrants pending an investigation or a determination of whether and to what extent discipline is warranted.

Corrective Action: None

115.267	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 13 - Protection Against Retaliation DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 18 - Investigating Allegations of Sexual Abuse Sexual Harassment 3. Documents Retaliation Monitoring Form - blank 4. Interviews Agency Head Facility Director/Retaliation Monitoring 5. Tour of the Facility <p>Subsection (a): DC-ADM 008 Section 13 is dedicated to protecting reentrants and staff against retaliation for reporting an incident or cooperating with an investigation of sexual abuse or sexual harassment. It further states that any individual who seeks to deter a reentrant or other individual from reporting sexual abuse or sexual harassment or who in any manner harasses or intimidates any person who reports the alleged contact is subject to discipline. DC-ADM 008 designates the Facility Director in the Community Corrections Center as the staff charged with monitoring retaliation.</p> <p>Subsection (b): The Community Corrections Centers are given the authority in DC-ADM 008 to employ multiple protection measures, such as housing changes or transfer for reentrant victim or abusers, or removal of alleged staff or reentrant abusers from contact with the victim, and video surveillance with audio. Protective measures are determined on an individual basis. The Department also makes available emotional support services for reentrants or staff who fear retaliation. Further, the Department monitors for retaliation for a minimum of 90 days.</p> <p>Subsection (c): Section 13 of DC-ADM 008 requires that at least 90 days following a report of sexual abuse or sexual harassment, the Department will monitor the conduct and treatment of reentrants or staff who reported the sexual abuse or sexual harassment and of reentrants who were reported to have suffered sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by reentrants or staff, and shall act promptly to remedy such retaliation. Retaliation monitoring is documented on the Department Retaliation Monitoring Form. Retaliation Monitoring includes the review of disciplinary reports, housing reports,</p>

program changes, negative performance reviews and reassignments of staff. The Department does have the authority to continue monitoring past 90 days if the initial monitoring indicates a continuing need or is requested by the alleged victim when there is evidence of retaliation.

Subsection (d):

According to the Retaliation Monitoring Form used for documenting retaliation monitoring, meetings are conducted with the person of concern to discuss any concerns or observations at intervals of 96 hours, 15 days, 30 days, 60 days, and 90 days after the incident. Additional meetings may occur.

Subsection (e):

Additionally in DC-ADM 008, if any other individual who cooperates with an investigation expresses fear of retaliation, the Department will take appropriate measure to protect that individual against retaliation.

Subsection (f):

DC-ADM 008 limits the Department's obligation to monitor retaliation once the reentrant is released from custody or the investigation is determined to be unfounded.

The Agency Head confirmed retaliation monitoring occurs for a minimum of 90 days. The Department has a zero tolerance policy for retaliation. Various staff are responsible for retaliation monitoring of reentrants and inmates based on the facility type and the Deputy Superintendent for Centralized Services is responsible for monitoring staff.

The Facility Director serves in the role of PREA Compliance Manager and Retaliation Monitoring. When asked about his role in preventing retaliation, he indicated this responsibility lies with security staff. The Facility Director confirmed counseling is offered to victims of sexual assault. CCC#4 has the ability to move reentrants to other CCC's if moving within CCC#4 does not adequately address the threat. The Facility Director indicated he would check in with staff and reentrants to ensure they are safe and not experiencing retaliation. He would specifically look for changes in behavior or mood, facial expressions, or giving away property. During the closing meeting, this was addressed with the Facility Director, reiterating this role falls on the facility Director according to policy and suggesting he familiarize himself with this by contacting a Director who has monitored for retaliation. CCC#4 Philadelphia has not housed a reentrant who was being monitored for retaliation in the past two years, the length of time the Director has been there. It should also be noted that MOC is involved in this process as well and would ensure retaliation monitoring is occurring.

Corrective Action: None

115.271	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 18 - Investigating Allegations of Sexual Abuse and/or Sexual Harassment DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 20 - Data Collection and Retention 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations 3. Documents PREA Investigative packet 2016 4. Interviews Lead PREA Investigator 5. Tour of the Facility <p>Subsection (a): According to DC-ADM 008, every report, complaint, or allegation of sexual abuse and sexual harassment, including uninvolved party and anonymous reports shall be investigated promptly, thoroughly, and objectively. Staff interviews confirmed that all allegations are reported and investigated. Staff indicated they would immediately report any allegations as soon as they became aware of the incident. Allegations occurring in a Bureau of Community Corrections Facilities is investigated and tracked in the Office of Special Investigations and Intelligence, Management Operations Center (MOC). The lead investigator assigned to MOC confirmed that all allegations received at MOC are immediately assigned to an investigator. he also confirmed that anonymous and third party reports are investigated in the same thorough manner.</p> <p>Subsection (b): DC-ADM 008 specifically states the Department will use investigators who have received specialized training in sexual abuse investigations when an incident of sexual abuse is alleged. The lead investigator confirmed he received specialized investigation training in addition to PCM training, PRAT Training and annual refresher training required of all staff. The specialized investigator training included topics such as conducting witness interviews, identifying leads, how to communicate with witnesses, trauma informed interviews, use of Miranda and Garrity warnings, evidence collections procedures and the preservation of evidence.</p> <p>Subsection (c): Policy requires PREA investigators to gather and preserve direct and circumstantial evidence</p>

such as DNA and electronic monitoring data, interviews of alleged victims, suspected abusers, and witnesses, and review prior complaints of sexual harassment and report of sexual abuse involving the suspected abuser. The lead investigator indicated he interviews victims, witnesses and perpetrators as well as secures video and obtains physical and forensic evidence collected by the Pennsylvania State Police (PSP). Additionally, DC-ADM 008 requires investigations into allegations in the distant past to be conducted in the same comprehensive, objective, and timely manner as a current allegation.

Subsection (d):

By policy, if the evidences appears to support criminal prosecution, the Department shall conduct completed interviews only after consulting with prosecutors. 8.3.1, requires investigators to stop the administrative investigation if at any point the evidence appears to support criminal prosecution. Investigators should then consult with the Bureau Major or designee for direction. A PREA Investigative packet from 2016 was submitted for review, this was the last PREA investigation at CCC#4 Philadelphia. The initial report appeared criminal in nature and as such, PSP was notified and consulted prior to the assigned DOC investigator beginning the administrative investigation. The lead investigator interviewed for the audit, confirmed that he does not conduct compelled interviews but relies on PSP to interview in such a manner.

Subsection (e):

By policy, and confirmed practice by the investigator, the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an inmate or staff. Additionally, the Department does not require a reentrant who alleges sexual abuse to submit to a polygraph examination or other truth telling device as a condition of proceeding with the investigation.

Subsection (f):

DC-ADM 008 requires investigators to make an effort to determine whether staff actions or failures to act contributed to the abuse. At the conclusion of the investigation, an Investigative Summary is completed and includes a description of the allegation, a detailed description of the reviewed video or other electronic monitoring data which articulates how the allegation was not supported, and a conclusion that articulates how the victim's allegation was determined to be not credible and how the evidence supports a determination of unfounded. Additionally, descriptions of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and finding are included. According to interviews and documents submitted, the Investigative Summary includes statements of the victim, witnesses, and abuser, video evidence, and police reports, if available, and how the evidence supports the findings. Additionally, during the Sexual Abuse Incident Review, there is a deeper look into how staff actions or failures contributed to the abuse.

Subsection (g):

Just as in administrative hearings, investigators are required to and subsequently document criminal investigations in the Investigative Summary, including a through description of the physical, testimonial, legal documents, and copies of all documentary evidence where feasible.

Subsection (h):

Allegations of sexual abuse are referred to PSP. However, according to DC-ADM 008 if a case has not already been referred for criminal prosecution, the Bureau of Investigations and Intelligence will refer substantiated allegations of conduct that appear to be criminal for prosecution.

Subsection (i):

By policy, each facility and Bureau of Investigations and Intelligence are responsible to securely maintain PREA investigation files, including criminal and administrative agency investigative reports for as long as the alleged abuser is incarcerated or employed plus five additional years. Further, Department Retaliation Monitoring Form is also retained for the same period of time.

Subsection (j):

According to DC-ADM 008, if the alleged abuser or victim departs from employment or control of the facility or Department, the investigation will not be terminated. According to the investigator, if an alleged abuser submits a resignation from employment, the resignation will not be accepted. If the victim leaves the facility, the investigator will make every effort to interview the the alleged victim prior to departure, or will make efforts to contact the alleged victim wherever the victim is.

Subsection (l):

When an allegation is investigated by PSP or another outside law enforcement agency, policy requires the investigator to maintain regular contact with the criminal investigator for updates and progress, to request a copy of the investigative information to be included in the Department's investigative file, and request notification of the outcome of the investigation in order to notify the alleged victim. The PREA Coordinator confirms that Department investigators do maintain contact with law enforcement. If there is difficulty maintaining contact, the PREA Coordinator will intervene to ensure open communication. The investigator furthered that he provides support to law enforcement if necessary, in that he will assist in locating and coordinating witness interviews.

Corrective Action: None

115.272	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 18 - Investigating Allegations of Sexual Abuse and/or Sexual Harassment 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations 3. Documents 2017 Investigator Training PowerPoint 4. Interviews Lead PREA Investigator 5. Tour of the Facility <p>Both DC-ADM 008 and 8.3.1 specifically state that no standard higher than a preponderance of the evidence shall be imposed in determining whether allegations of sexual abuse or sexual harassment are substantiated. As evidenced by the investigator Training PowerPoint from December 2017, new investigators are trained to use this standard in determining the outcome of an investigation. Further, the lead PREA investigator confirmed he uses this standard of proof when investigating allegations of sexual abuse and sexual harassment.</p> <p>Corrective Action: None</p>

115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Action (PREA) Procedures Manual Section 18 - Investigation Allegations of Sexual Abuse and/or Sexual Harassment 3. Documents PREA Investigation - Inmate Notification blank form 4. Interviews Facility Director Lead PREA Investigator 5. Tour of the Facility <p>Subsection (a): By policy, following an investigation of a reentrant's allegation of sexual abuse or sexual harassment in a Department of Corrections facility, or contract facility, the PCM at the facility where the reentrant is housed is responsible for notifying the reentrant of the outcome of the investigation whether the allegation is found to be substantiated, unsubstantiated, or unfounded. The facility Director confirmed that when he receives the outcome information from the investigator, he then informs the reentrant of the investigation finding. The investigator also confirmed that reentrants are informed as to whether an investigation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>Subsection (b): If a law enforcement agency conducts the investigation, the Department will request the relevant information from the investigating agency in order to inform the reentrant of the outcome of the criminal investigation.</p> <p>Subsection (c): Following a reentrant's allegation that a staff committed sexual abuse against a reentrant, the PCM is responsible to inform the reentrant when the following occurs:</p> <ul style="list-style-type: none"> - the staff is no longer posted within the reentrant's unit - the staff is no longer employed at the facility - the Department learns the staff has been criminally charged related to the sexual abuse within the facility - the Department learns that the staff has been convicted on a charge related to sexual abuse within the facility. <p>Subsection (d); Following a reentrants allegation of sexual abuse by another reentrant, the PCM will inform</p>

the victim when the Department learns the alleged abuser has been criminally charged related to the sexual abuse within the facility or when the Department learns that the abuser has been convicted on a charge related to sexual abuse within the facility.

Subsection (e):

PA DOC uses as a standard form, PREA Investigation - Inmate Notification, to document and notify alleged victims. Upon completion, this form is housed in the reentrant file and a copy with the BCC PREA Captain.

When notifying a reentrant following an allegation of sexual abuse or sexual harassment, the PCM uses the standard PREA Investigation - Inmate Notification form "Staffing Update" section which includes checkboxes for:

- transferred to another post
- transferred to another facility
- temporarily restricted from this facility
- permanently restricted from this facility
- permanently restricted from all Department Of Corrections sites and its contracted sites
- is no longer employed by the Department of Corrections
- is not longer employed by the contract Facility
- other (please define below)

Additionally, the form includes a section titled "Criminal Action" which lists two check box options when notifying reentrants who alleged sexual abuse by another reentrant:

- Criminal charges have been filed against the abuser in relation to the sexual abuse report filed
- Abuser has been convicted of criminal charges related to the sexual abuse report filed.

Subsection (f):

Notifications occur when the reentrant has been transferred to another facility within the Department of Corrections. However, the Department's obligation to report the results of the investigation to the alleged victim terminates if the alleged reentrant victim is released from the Department's custody.

No incidents of staff on reentrant sexual abuse or sexual harassment has been alleged or investigated at CCC#4 Philadelphia during the past 12 months and no reentrants at CCC#4 Philadelphia reported sexual abuse or sexual harassment.

Corrective Action: None

115.276	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ol style="list-style-type: none"> 4.1.1, Human Resources and Labor Relations Procedures Manual Section 4 - Resignations in Lieu of Discharge (RILD) 4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 - Standardization of Pre-Disciplinary conferences DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 17 - Discipline Related to Sexual Abuse, Sexual Harassment and Retaliation 3. Documents <p>Human Resource Bulletin issued January 20, 2015</p> <p>Sample letter Resignation In Lieu of Discharge</p> 4. Interviews 5. Tour of the Facility <p>Subsection (a):</p> <p>According to DC-ADM 008, any employee who violates the Department's zero tolerance policy shall be subject to appropriate disciplinary or administrative action up to and including termination. Discipline occurs in accordance with policy 4.1.1, Human Resources and Labor Relations.</p> <p>Subsection (b):</p> <p>4.1.1, Human Resources and Labor Relations policy specifically states that termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>Subsection (c):</p> <p>4.1.1, Human Resources and Labor Relations policy also states that disciplinary sanction 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.</p> <p>Subsection (d):</p> <p>DC-ADM 008 states that all terminations for violations of sexual abuse and sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to professional licensing bureaus and law enforcement agencies, unless the activity was clearly not criminal. 4.1.1, Human Resources and Labor Relations Procedures Manual Section 4, further specifies that should a staff member resign in lieu of discharge for violation of DC-ADM 008, the Bureau of Human Resources will notify the Office of Special</p>

Investigations and Intelligence (OSII) to determine if a potential criminal violation exists. If the violation meets criminal standards, OSII will refer the matter to the District Attorney's Office that has jurisdiction over the effected facility. Whether or not the the matter is referred to the District Attorney's Office, the Bureau of Human Resources will notify relevant licensing bodies. Additionally, when an employee resigned while under investigation for violations of sexual abuse or sexual harassment, any settlement language will include provisions that permit the employer to report to any prospective institution employer that the employee resigned during a pending investigation. Human Resource and Labor Relations Bulletin issued on January 20, 2015 notifies staff of the changes to policy in which resignation in lieu of discharge cases or dismissal cases related to sexual abuse and sexual harassment will be reported to law enforcement if the activity is criminal in nature and to any relevant licensing body.

CCC#4 Philadelphia has not had a staff subject to disciplinary action for sexual abuse or sexual harassment in over two years. As such, additional documentation was not reviewed. However, a standardized template letter confirming resignation in lieu of discharge acceptance - pending investigation for sexual misconduct was submitted via PAQ for review. The letter accepts the resignation and advises the employee that the Department of Corrections will continue the investigation and will report the resignation in lieu of discharge to law enforcement, relevant licensing bodies, and any future prospective institutional employers as applicable under PREA standards.

Corrective Action: None

115.277	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 17 - Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation 3. Documents 4. Interviews Facility Director 5. Tour of the Facility <p>Subsection (a): According to DC-ADM 008, any contract employee or volunteer who violates the Department's zero tolerance policy is subject to appropriate disciplinary or administrative action. When an allegation is made against a contractor or volunteer, that person will be removed from contact and communication with the alleged victim until the conclusion of the investigation. If the contractor or volunteer has been found to have engaged in sexual abuse, the individual will have their access to Department facilities revoked and will be reported to professional licensing bureaus and law enforcement agencies, unless the activity was clearly not criminal.</p> <p>Subsection (b): According to DC-ADM 008, if a contractor or volunteer violates DC-ADM 008 other than by engaging in sexual abuse, the facility will take appropriate remedial measures and shall consider whether to prohibit further contact with reentrants.</p> <p>According to the PAQ, CCC#4 has not had a contractor or volunteer reported to law enforcement or relevant licensing bodies for allegations of sexual abuse. According to the Director of CCC#4 Philadelphia, if a contractor or volunteer was alleged to have engaged in sexual abuse or sexual harassment of reentrants they would not be allowed to enter the facility and have contact with reentrants. Upon notification of the allegation, the allegation would be documented and MOC would be contacted to assign an investigation. Law enforcement would also be notified, depending on the allegation. If the allegation was substantiated, the contractor or volunteer would not be allowed on any state grounds. CCC#4 Philadelphia does not have any volunteers providing services at the facility. Contractors that provide services are escorted in the building at all times. If an allegation is made and does not rise to the level the volunteer or contractor is removed from the facility, staff will continue to escort the contractor, and closely monitor any interactions the contractor would have with reentrants such as inappropriate comments or eye contact. The facility is equipped with cameras which would enhance the level of monitoring contractors.</p>

Corrective Action: None

115.278	Disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 17 - Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation 13.8.1, Access to Mental health Care Procedures Manual Section 11 - Sex offender Treatment 3. Documents Bureau of Community Corrections Universal Set of Rules Procedures, 6 pages 4. Interviews Facility Director 5. Tour of the Facility <p>Subsection (a): In the past 12 months, zero incidents of resident-on-resident sexual abuse have occurred at the facility.</p> <p>DC-ADM 008, specifically follows the federal PREA Standard 115.278 in all aspects. Reentrants are subject to disciplinary sanctions according to the formal disciplinary process, following and administrative finding that the reentrant violated the zero tolerance policy, engaged in reentrant on reentrant sexual abuse or following a criminal finding of guilt for reentrant on reentrant sexual abuse.</p> <p>All reentrants are notified via Bureau of Community Corrections Universal Set of Rules Procedures that any charge of sexual harassment/sexual abuse (Rule #4) or engaging in sexual acts with other or sodomy inside the center (Rule #7) must be reported to the Bureau of Community Corrections Management Operation Center (BCC-MOC) prior to any action taken.</p> <p>Subsection (b): Sanctions will be commensurate with the nature and circumstances of the sexual abuse, sexual harassment or retaliation committed, the reentrants disciplinary history and the sanctions imposed for comparable offenses by other reentrants with similar histories.</p> <p>Subsection (c): The disciplinary process shall consider whether a reentrant's mental disabilities or mental illness contributed to the behavior when determining what type of sanction, if any, should be imposed.</p> <p>Subsection (d):</p>

When a reentrant is found guilty of a Class 1 Misconduct related to sexual abuse in a facility that offers Sex Offender treatment Program the Unit Manager/Facility Director will refer the reentrant to the Sex Offender Treatment Program for evaluation to determine whether or not the reentrant is appropriate for the program, and if the reentrant will be required to complete the program as part of the sanctions or as a condition to access programming or other benefits.

The Department expands on this in Policy 13.8.1, Section 11 - Sex Offender Treatment. Section K addresses inmates without a sexual conviction who sexually assault during incarceration. If a sexual assault results in a formal legal charge and criminal conviction in a Pennsylvania court of law, the individual will be referred for assessment. According to policy, all facilities shall attempt to conduct a mental health evaluation of all known reentrant-on-reentrant abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by a mental health practitioner. If the facility offers Sex offender Treatment, the facility shall consider whether to require the offending reentrant to participate in such interventions as a condition of access to programming or other benefits. Reentrants who have been found to have engaged in sexual abuse without an accompanying criminal conviction, shall be evaluated for Sex Offender Treatment and offered the opportunity to participate voluntarily in programming.

According to the Director, a reentrant who engaging in sexual abuse or sexual harassment while at CCC#4 Philadelphia will be removed from the center and transferred to a Secure Correctional Institution. The reentrant would then be offered programming at the receiving institution according to policy.

Subsection (e):

Facilities may discipline a reentrant for sexual contact with staff only upon finding that the staff member did not consent to such contact. Discipline is not imposed until such a determination is made.

Subsection (f):

For the purpose of disciplinary action, a report of sexual abuse made in good faith, based on a reasonable belief that the alleged conduct occurred, will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Subsection (g):

The Department prohibits all sexual activity between reentrants and may discipline reentrants for such activity. The Department will not deem such activity as sexual abuse, if through the investigative process determines, the activity was not coerced.

Corrective Action: None

115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Action (PREA) Procedures Manual Section 1 - Sexual Abuse/Sexual Harassment Prevention - Responsibilities DC-ADM 008, Prison Rape Elimination Action (PREA) Procedures Manual Section 14 - Responding to Reports of Sexual Abuse 8.1.1, Community Corrections Center Procedures Manual Section 5 - Resident Procedures 3. Documents If you are the Reported Victim of Sexual Abuse - CCCs and Lockups Forensic Rape Examinations - Pennsylvania State Statute 4. Interviews SAFE/SANE Medical Agency Advocacy Agency Staff 5. Tour of the Facility <p>Subsection (a): According to DC-ADM 008, alleged victims of sexual abuse shall 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. When BCC-MOC is notified of a sexual abuse incident at a Community Corrections Center, staff, by policy, are required to ensure the alleged sexual abuse victim is provided access to a forensic medical examination and mental health evaluation. BCC-MOC ensures law enforcement via 911 is contacted if the alleged victim requires emergency medical treatment and ensures the alleged victim is provided access to a forensic medical examination. Victims of sexual abuse are provided the form "If you are the Reported Victim of Sexual Abuse - CCC's and Lockups" which quotes 28 C.F.R. 115.282 (a)(d) and requires the victim to indicate whether the victim is requesting or declining a medical examination, mental health evaluation, and rape crisis services. This form was also posted in various common areas at CCC#4 Philadelphia. The victim is asked to sign and date the form. Health care is provided to community correctional center reentrants in the community rather than on site by Department of Corrections Staff. Community health care is addressed in policy 8.1.1.</p> <p>Subsection (b): DC-ADM 008 requires security staff first responders to take preliminary steps to protect the alleged victim if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made.</p>

Staff at CCC#4 Philadelphia are aware of their responsibilities as a first responder, including separating and protecting the victim, contacting BCC-MOC who will provide further direction, and obtaining medical care for the victim. According to the Program Director of Drexel University Philadelphia Sexual Assault Response Center (SARC), the provider agency for the sexual assault forensic examinations, services are provided to all victims of assault. Staff are on call 24-7 and in nine years, a nurse has always been available to conduct an examination. Additionally, Women Organized Against Rape make sexual assault certified counselors available 24 hours a day, seven days a week at SARC to provide crisis counseling and support to victims of sexual assault undergoing a forensic examination. Crisis support is also available by phone.

Subsection (c):

According to DC-ADM 008, alleged victims of sexual abuse are offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care. The Program Director at SARC confirmed that this is provided to all victims of sexual assault.

Subsection (d):

By policy, treatment services are provided to the alleged victim without financial costs and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident. Pennsylvania State law prohibits a provider from billing a victim for forensic rape exams. The State also does not require a victim of sexual assault to cooperate with law enforcement or prosecution in order for the examination to be paid for by the victims Compensation Assistance program. The SARC Program Director confirmed that victims of sexual assault receive services without cost to the victim. He also furthered that victims are not required to cooperate with an investigation in order to receive an examination and treatment.

Corrective Action: None

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

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 9 - Sexual Abuse/Sexual Harassment Prevention - Screening for Risk of Victimization and Abusiveness

DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 10 - Sexual Abuse/Sexual Harassment Prevention - Medical and Mental Health Screenings

DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 14 - Responding to Reports of Sexual Abuse

13.8.1, Access to Mental Health Care Procedures Manual Section 11 - Sex Offender Treatment

8.1.1, Community Corrections Centers Procedures Manual Section 5 - Resident Procedures

3. Documents

Photographs of posted information

If you are the Reported Victim of Sexual Abuse - CCCs and Lockups:

4. Interviews

SAFE/SANE Medical Agency

5. Tour of the Facility

Subsection (a):

DC-ADM 008 requires CCC#4 Philadelphia to offer medical and mental health evaluation and if appropriate, treatment, to all reentrants who have allegedly been victimized by sexual abuse in any prison jail, lock up, or juvenile facility. In Community Corrections Centers, reentrants receive medical and mental health care in the community. Reentrants are notified of services via the "If you are the Reported Victim of Sexual Abuse - CCCs and Lockups", which is given to reentrants upon report of an incident of sexual abuse, and posted throughout the common areas of the facility.

Subsection (b):

On going medical and mental health treatment is available for reentrants who have been allegedly victimized by sexual abuse. This includes appropriate follow-up services, treatment plans, and as necessary referrals for continued care following the reentrants transfer to another facility or release.

Subsection (c):

By policy, DOC facilities are required to provide alleged victims with medical and mental health services consistent with community level of care. CCC#4 Philadelphia provides services to reentrants through community agencies either through referral or the reentrant can self refer without DOC involvement.

Subsection (d) and (e):

CCC#4 Philadelphia is a male only facility. However, DOC policy does offer people under their care who experience sexual abuse vaginal penetration while incarcerated, pregnancy tests. If pregnancy results, alleged victims receive timely and comprehensive information and access to all lawful pregnancy related medical services.

Subsection (f):

By policy and confirmed with the medical provider, alleged victims of sexual abuse are offered testing for sexually transmitted infections.

Subsection (g):

Under Pennsylvania State Statute, and reiterated in DC-ADM 008, treatment services are provided to alleged victims without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This practice is confirmed by SARC. Victims are provided services at no cost and are not required to file a report or consent to the rape kit being tested.

Subsection (h):

Sections 9, 10, and 14 of DC-ADM 008, address mental health evaluations and treatment of reentrant abusers. All three sections require a mental health evaluation be conducted on abusers within 60 days of learning of the abuse history and offer treatment when deemed appropriate. 13.8.1, Section 11 - Sex Offender Treatment, requires the same, and furthers that the treatment may be required. Reentrants who have been found to have engaged in sexual abuse without an accompanying criminal conviction, shall also be evaluated for Sex Offender treatment, as appropriate, and offered the opportunity to participate voluntarily in programming.

Corrective Action: None

115.286	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 16 - Sexual Abuse Incident Review 3. Documents Sexual Abuse Incident Review standard form - blank and completed 4. Interviews Facility Director/PREA Compliance Manager 5. Tour of the Facility <p>Subsection (a) and (b): According to DC-ADM 008, at the conclusion of every sexual abuse investigation, whether substantiated or unsubstantiated, the facility will conduct a Sexual Abuse Incident Review. This review should take place within 15 working days of receipt of BII's notification the investigation was deemed satisfactory. No incidents or allegations of sexual abuse have occurred at CCC#4 Philadelphia since 2016. The PREA Sexual Abuse Incident Review packet for the unsubstantiated allegations was submitted for review. The time frame was listed, which indicated the Sexual Abuse Incident Review was conducted in the time frame set forth in policy.</p> <p>Subsection (c): The Sexual Abuse Incident Review committee consists of the Center Director, CDC Region 1, Center Director for Region 1, Investigating Lieutenant, A/RD BCC Region 1, and the Counselor. This team is consistent with policy, in that DC-ADM 008 requires Community Corrections Center Sexual Abuse Incident Review committees to consist of, at a minimum, the PREA Compliance Manager, Bureau of Community Corrections Regional Director, the Facility Director, other designated manager or supervisor, BCC Investigator, facility counselor, medical and mental health practitioner if on site.</p> <p>Subsection (d): DC-ADM 008 mirrors language found in PREA Standard 115.286(d) 1.-5. The Sexual Abuse Incident Review committee in Pennsylvania DOC:</p> <ol style="list-style-type: none"> 1. considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse, 2. considers whether the incident was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender or intersex identification, status or perceived status, gang affiliation, or was motivated by other group dynamics, 3. examines the area in the facility where the incident allegedly occurred to assess whether

- physical barriers in the area may enable abuse,
4. assesses the adequacy of staffing level in that area during different shifts,
 5. assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff,
 6. considers information such as housing assignment, measures taken as a result of the allegation, need for follow-up for the victim.

The review is documented on the Sexual Abuse Incident Review standard form and submitted to the Secretary's Office. The PREA Compliance Manager submits the report within 10 days of the review to the Bureau of Community Corrections Major for distribution. The Sexual Abuse Incident Review document submitted in the PAQ, addressed the areas as noted above and in the standards. CCC#4 Philadelphia has not had an allegation of sexual abuse since 2016, thus not while the current Director has been in his position. It was recommended at the closing that the Director become more familiar with the process as the PREA Compliance Manager is the co-chair of the committee. This may be accomplished by sitting on a committee convened at another Community Corrections Center or Secure Correctional Institution.

Subsection (e):

According to DC-ADM 008, it is the responsibility of the Facility Manager, BCC Director, or PBPP District Director to implement the recommendations for improvement or document the reasons for not doing so on the PREA Sexual Abuse Incident Review Plan of Action. The completed PREA Sexual Abuse Incident Review plan of Action is distributed to higher level management staff.

Corrective Action: None

115.287	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures <ul style="list-style-type: none"> DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 - Sexual Abuse/Sexual harassment Prevention - Contraction (28 C.F.R 115.12) DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 18 - Investigating Allegations of Sexual Abuse and/or Sexual Harassment DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 20 - Data Collection and Retention 3. Documents <ul style="list-style-type: none"> PREA Tracking System example PREA Annual Report Pennsylvania Department of Corrections - 2013, 2014, 2015, 2016, 2017 Survey of Sexual Victimization - 2015, 2016, 2017 Sexual Abuse Incident Review (contracted facility) PREA Tracking System screenshots PREA Tracking System Report of an Incident Pennsylvania Department of Corrections Website 4. Interviews <ul style="list-style-type: none"> PREA Coordinator Staff 5. Tour of the Facility <p>Subsection (a):</p> <p>DC-ADM 008 Section 20. authorizes and directed the PREA Compliance Division to collect accurate, uniform data for every allegation of sexual abuse at facilities under the direct control of the Department of Corrections, using a standardized instrument and set of definitions. The PREA Tracking System is used to track every report, complaint or allegation of sexual abuse and/or sexual harassment, according to Section 18 of DC-ADM 008. This is a web-based application, tracking the same information for each report. As confirmed in Section 2 of DC-ADM 008, this tracking includes County Jails who provide contract services to the Bureau of Community Corrections. Staff at CCC#4 Philadelphia and the PREA Coordinator, confirmed the use of the PREA Tracking System for all reports of sexual abuse and sexual harassment, including those stemming from contracted agencies.</p> <p>Subsection (b):</p> <p>According to policy, the PREA Compliance Coordinator is responsible to review data collected and to aggregate the data annually in order to assess and improve the effectiveness of it's sexual abuse prevention, detection, and response policies, practices, and training. This information is compiled into an annual review as evidenced by the PREA Annual Reports from</p>

2013, 2014, 2015, 2016, and 2017 which were submitted in the PAQ and reviewed.

Subsection (c):

By policy, Pennsylvania DOC also reports any additional information required by the Survey of Sexual Violence required by the Department of Justice, Bureau of Justice Statistics. The Survey of Sexual Violence is completed by DOC for each incident, as indicated by submission of completed Surveys of Sexual Violence forms from 2015, 2016, and 2017. The information included on the Survey is included in the PREA reports submitted by investigators.

Subsection (d):

Section 20 of DC-ADM 008 indicates that all data be maintained, reviewed, and collected as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. This information is housed in the PREA Tracking System.

Subsection (e):

DC-ADM 008 Section 2 addresses sexual abuse and sexual harassment prevention in contracted facilities, including notification of sexual abuse and sexual harassment incidents and the entry into the PREA Tracking System. This is also addressed in DC-ADM 008 Section 20 which states that incident-based and aggregated data shall also be collected from every facility the Department contracts with for the confinement of its inmates. CCC#4 Philadelphia submitted examples of screenshots of the PREA Tracking System which showed incidents of sexual abuse and sexual harassment in contracted facilities and an example of the Report of an Incident from the PREA Tracking System of an incident of sexual abuse from a contracted facility. Also submitted and reviewed was Sexual Abuse Incident Review report from a contracted facility.

Subsection (f):

By policy, the Annual PREA Report is required to be approved by the Secretary and posted on the Department's Website by June 30 of each year. The 2018 Annual Report was available on the Department's website and viewed by this auditor.

The PREA Coordinator confirmed that the PREA tracking System is used for PREA data collection. All allegations, including those from contracted facilities, are tracked in the PREA Tracking System. This includes all information found on the SSDIA summary for every substantiated allegation. The Department uses incident based data to evaluate current practices and make recommendations for improvement. The Coordinator confirmed the Annual Reports are completed by June 30 of each year, using the previous year's data and posted on the public website.

Corrective Action: None

115.288	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 20 - Data Collection and Retention 3. Documents PREA Annual Report - 2014, 2015, 2016, 2017, 2018 Pennsylvania DOC public website 4. Interviews Agency Head PREA Coordinator 5. Tour of the Facility <p>Subsection (a): According to DC-ADM 008, the PREA Compliance Division is responsible for reviewing data collected and annually aggregating the data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by:</p> <ol style="list-style-type: none"> a. identifying problem areas b. taking corrective action on an ongoing basis c. preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole. <p>The PREA Coordinator confirmed that incident based data is collected. This information is used to monitor locations, and identify trend, and areas of concern in order to address specific problems or address Department wide issues through training. An annual report is prepared, and includes corrective action.</p> <p>Subsection (b): In line with DC-ADM 008, the annual report includes comparison data and corrective actions for the current year with those from previous years, and an assessment of the Department's progress in addressing sexual abuse.</p> <p>Subsection (c): This is addressed in DC-ADM 008, and is followed by the PREA Coordinator, in that the annual PREA Report is authored by the Coordinator and is forwarded to to the Secretary for approval and posted on the Department's website by June 30 of each year. PREA Annual reports for 2014, 2015, 2016, and 2017 were submitted in the PAQ and reviewed. Additionally, the PREA Annual Report for 2018 is currently posted on the Pennsylvania DOC public website. The Agency Head Confirmed reviewing and signing the annual report. The Annual Reports</p>

from 2014, 2015, 2016, and 2017 have been reviewed and signed by the Department of Corrections Secretary.

Subsection (D):

According to DC-ADM 008, specific identifying information shall be redacted so that no individual is identifiable. The Department may also redact specific material from the reports when publication would present a clear and specific danger to a facility, but must indicate the nature of the material redacted. According to the PREA Coordinator, no personal identifying information is included in the reports. However, if information was included and had to be redacted, the report would be redacted and noted. The only item that is redacted is specific contact information. In a review of the PREA Annual Reports, no personal identifying information was included or redacted and there did not appear to be any information posing a threat to the safety and security of a facility.

Corrective Action: None

115.289	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Policy and Procedures DC-ADM-008 Prison Rape Elimination Act (PREA) Procedures Manual Section 20 - Data Collection and Retention 3. Documents Pennsylvania Department of Corrections public website 4. Interviews PREA Coordinator 5. Tour of the Facility <p>Subsection (a): DC-ADM 008 requires PREA data collected to be securely retained on the Department's secure servers.</p> <p>Subsection (b) & (c): According to DC-ADM 008, the Department shall make all aggregated sexual abuse data information from facilities under its direct control and contracted facilities readily available to the public through the Department website, at least annually. Specific identifying information collected for reported purposes shall be redacted so no individual is identifiable or if publication would present a clear and specific danger to the facility. The nature of the redaction must be indicated. The PREA Coordinator confirmed that incident based data is collected and that information is compiled in an annual report. No personal identifying information is included in the report. However, if it was, that information would be redacted and noted. The annual reports are easily located on the Department's public website.</p> <p>Subsection (d): Per DC-ADM 008, collected PREA data is retained for a period of no less than ten years after the date of the initial collection unless federal, state, or local law requires otherwise. In viewing the Department's public website, the annual PREA Reports for 2014, 2015, 2016, 2017, and 2018 are available for public viewing.</p> <p>Corrective Action: None</p>

115.401	Frequency and scope of audits
	<p data-bbox="252 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 517 360">Evidence Reviewed:</p> <ol data-bbox="252 371 978 786" style="list-style-type: none"> <li data-bbox="252 371 600 405">1. Pre-Audit Questionnaire <li data-bbox="252 456 579 490">2. Policy and Procedures <li data-bbox="252 542 978 620">3. Documents Pennsylvania Department of Corrections public Website <li data-bbox="252 672 419 705">4. Interviews <li data-bbox="252 757 528 790">5. Tour of the Facility <p data-bbox="252 842 451 875">Subsection (a):</p> <p data-bbox="252 887 1465 999">PREA Audit reports are found on the Pennsylvania Department of Corrections public website. Audit Cycle 1 began in 2014, with two audits and concluded in 2016, having 39 facilities audited.</p> <p data-bbox="252 1055 451 1088">Subsection (b):</p> <p data-bbox="252 1099 1469 1301">The Pennsylvania Department of Corrections is currently in audit cycle 2, year 3. According to the PREA Coordinator, there are currently 25 State Correctional Institutions and 11 Bureau of Community Corrections Centers. There are currently 33 final PREA Audit Reports posted on the public website for Audit Cycle 2, and three pending reports with auditors. All Pennsylvania DOC Facilities have been audited this cycle.</p> <p data-bbox="252 1357 515 1391">Subsection (h) i m n:</p> <p data-bbox="252 1402 1390 1435">During the on site audit, the auditors had full access to all areas of CCC#4 Philadelphia.</p> <p data-bbox="252 1491 443 1525">Subsection (i):</p> <p data-bbox="252 1536 1469 1603">During all phases of the audit, documents and information were requested by this auditor and received timely. This auditor viewed electronically stored data as well as paper copies.</p> <p data-bbox="252 1659 459 1693">Subsection (m):</p> <p data-bbox="252 1704 1445 1771">The auditors were provided two private offices to conduct uninterrupted interviews with staff and reentrants of CCC#4 Philadelphia.</p> <p data-bbox="252 1827 451 1861">Subsection (n):</p> <p data-bbox="252 1872 1461 2074">Audit notices were sent to CCC#4 Philadelphia on April 25, 2019 for post on May 2, 2019. As requested, photographs of the notices displayed on the walls of the facility were emailed to this auditor on May 20, 2019. Additionally, during the tour, the audit notices were observed posted throughout the facility. No letters were received from a reentrant at CCC#4 Philadelphia.</p> <p data-bbox="252 2130 560 2163">Corrective Action: None</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed:</p> <p>Documents: Pennsylvania Department of Corrections Website Audit Schedule</p> <p>PREA Audit reports for the Pennsylvania Department of Corrections facilities are posted on the public website. The reports are easy to locate and are posted based on Audit Cycle and year of audit, following a standard naming pattern, "Facility PREA Report Dated ". Audit Cycle 2 lists 33 Audit Reports which is consistent with the Audits Completed by the Wisconsin Department of Corrections PREA Auditors as part of the consortium.</p> <p>Corrective Action: none</p>

Appendix: Provision Findings

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

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

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

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

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

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

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

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

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

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

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

115.215 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

115.222 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

115.252 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

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

115.252 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	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.)	yes

115.252 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	no
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	no
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	no

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

115.252 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	no
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	no
	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.)	no
	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.)	no
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	no
	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.)	no
	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.)	no

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

115.276 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

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

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

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

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

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

115.278 (d)	Disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a condition of access to programming and other benefits?	yes

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

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

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

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

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

115.282 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.282 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

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

115.283 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

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

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

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

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

115.283 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes

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

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

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

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

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