

# PREA Facility Audit Report: Final

**Name of Facility:** Pittsburgh Community Corrections Center

**Facility Type:** Community Confinement

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 03/13/2019

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"/>
<b>Auditor Full Name as Signed:</b> Julie Ustruck Wetzel	<b>Date of Signature:</b> 03/13/2019

AUDITOR INFORMATION	
<b>Auditor name:</b>	Ustruck-Wetzel, Julie
<b>Address:</b>	
<b>Email:</b>	Julie.UstruckWetzel@wisconsin.gov
<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	01/30/2019
<b>End Date of On-Site Audit:</b>	01/31/2019

FACILITY INFORMATION	
<b>Facility name:</b>	Pittsburgh Community Corrections Center
<b>Facility physical address:</b>	535 South Aiken Avenue, Pittsburgh, Pennsylvania - 15232
<b>Facility Phone</b>	412-681-1202
<b>Facility mailing address:</b>	
<b>The facility is:</b>	<input type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
<b>Facility Type:</b>	<input type="radio"/> Community Treatment Center <input checked="" type="radio"/> Halfway house <input type="radio"/> Restitution center <input type="radio"/> Alcohol or drug rehabilitation center <input type="radio"/> Mental health facility <input type="radio"/> Other community correctional facility

Primary Contact			
<b>Name:</b>	Richard K. Dotson	<b>Title:</b>	Center Director 1
<b>Email Address:</b>	ridotson@pa.gov	<b>Telephone Number:</b>	412-681-1202

Facility Director			
<b>Name:</b>	Richard Dotson	<b>Title:</b>	Center Director
<b>Email Address:</b>	ridotson@pa.gov	<b>Telephone Number:</b>	412-681-1202

Facility PREA Compliance Manager			
<b>Name:</b>	Richard Dotson	<b>Email Address:</b>	ridotson@pa.gov

Facility Health Service Administrator			
<b>Name:</b>		<b>Title:</b>	
<b>Email Address:</b>		<b>Telephone Number:</b>	

Facility Characteristics			
<b>Designed facility capacity:</b>		48	
<b>Current population of facility:</b>		44	
<b>Age Range</b>	<i>Adults: 18+</i>	<i>Juveniles:</i>	<i>Youthful Residents:</i>
<b>Facility security level/resident custody levels:</b>		Minimum	
<b>Number of staff currently employed at the facility who may have contact with residents:</b>		19	

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

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

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



## AUDIT FINDINGS

### **Narrative:**

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

The Prison Rape Elimination Act (PREA) audit of Pittsburgh Community Corrections Center (CCC) located at 535 S. Aiken Avenue Pittsburgh PA was conducted by Department of Justice (DOJ) certified PREA auditors Julie Ustruck Wetzel and Maria Silao-Johnson. 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 January 30, 2019, audit notices were sent to the PREA Compliance Manager (PCM) at Pittsburgh CCC on December 12, 2018. The role of PCM at Pittsburgh CCC 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 December 19, 2018, photographs depicting notices displayed in four locations throughout the facility were emailed to this auditor by the Pennsylvania Department of Corrections PREA Coordinator to confirm timely placement. The locations confirmed placement in various areas of the facility frequented by staff and reentrants; the door of the Facility Director's office (located in the main entrance of the facility), door of the secretary's office, hallway bulletin board, and in the resident living room. No correspondence was received from a reentrant at Pittsburgh CCC.

The Pre-Audit Questionnaire was completed and submitted via the PREA Online Audit System (OAS) by facility and Bureau staff. Prior to the on-site visit this auditor reviewed the Pre-Audit Questionnaire and attached documents. Attached document included BCC-ADM PREA Policy and Procedures Manual, Grievance Policies and Procedures, Legal Policy and Procedures, examples of forms indicating facility procedures, training materials, training records, investigation documents, and Letters of Agreement. Additionally, this auditor reviewed PA DOC's website specific to Pittsburgh CCC and PREA, including the Pittsburgh CCC final PREA Audit Report dated March 13, 2016. Further, this auditor reviewed the facility layout, staff schedule, and Pittsburgh CCC Census Report. The documents and information submitted through the Pre-Audit Questionnaire were detailed, providing a picture of the policies, procedures, and operations of Pittsburgh CCC.

The on-site portion of the audit was conducted on January 30, 2019 and January 31, 2019. The on site visit began with an entrance meeting with both auditors, acting Facility Director Brian McCollim, Lieutenant Allen Lynch, and Corrections Counselor Tara Marhefka. The entrance meeting consisted of introductions, a schedule of the visit, and logistics of the on-site interviews. It should be noted, the assigned Facility Director was on leave beginning in December and extending to mid-February. Early correspondence regarding Pittsburgh CCC, occurred between this auditor and the acting Facility Director and PREA Coordinator.

Following the entrance meeting, the auditors were provided a comprehensive facility tour. The tour began on the third floor which consisted of three bedrooms, three bathrooms and a common living room

area. The second floor was then toured, which consisted of four bedrooms, three bathrooms, and a counselor's office. The first floor, the main floor of the facility, contained the kitchen area, secretary's office, living room, Director's office, monitors office and two bathrooms. Finally, the tour moved to the basement which housed the Lieutenant's office, two counselor offices, furnace and store room, laundry room, day room, and bathroom. During the tour, audit notices and PREA Information were visible throughout the facility on all four levels. Camera and mirror placements were noted and visible throughout the facility to minimize blind spots and ensure the safety of staff and reentrants. During the tour, the first staff of the opposite gender announced their presence by loudly stating "male on the floor" when entering the second and third floors or into a bedroom.

Following the facility tour, staff and reentrant interviews were conducted. Interviews were conducted by auditors in private office setting. Due to the number of staff at Pittsburgh CCC, all Community Corrections Center Monitors (CCCM) present on first and second shift were offered and accepted an interview. Third shift staff were interviewed by phone. Additionally all Corrections Counselors present were also offered and accepted an interview. Given the nature of the facility, CCCM staff serve as First Responders and all CCCMs provide intake when reentrants first arrive to the facility. Corrections Counselors also have the potential to serve as First Responders as well as screening for risk of sexual abuse or sexual harassment. Interviews were conducted using the DOJ protocols that question PREA knowledge, including PREA protections for reentrants and reporting mechanisms available to staff and reentrants. Pittsburgh CCC is designed for reentrants to leave the facility for employment, treatment, and community service. Given the fluid scheduled of reentrants, reentrants present at the facility the first day were offered an interview and reentrants interviewed the second day were selected by auditors, being respectful of reentrant's schedules outside of the facility. All reentrants who were offered an interview, accepted the interview. Staff and reentrants consistently reported an awareness of the zero tolerance policy and rights of reentrants to be free from sexual abuse and sexual harassment. Staff were aware of their responsibilities in assuring these rights are being met, and should an incident occur, staff knew their role in responding and reporting. Additionally, staff were aware of their responsibility to educate reentrants upon arrival and throughout their placement at Pittsburgh CCC.

While on site, interviews were also conducted with the PREA investigator. In addition to the interview, PREA investigation working files were reviewed. Further the acting Facility Director was interviewed regarding his knowledge about Pittsburgh CCC as it relates to PREA duties and responsibilities.

In addition to the staff interviews, one contracted service provider who provides group programming at Pittsburgh CCC for reentrants was interviewed in person. This service provider confirmed that he has been trained in his responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response according to Pennsylvania Department Of Corrections policy and procedures.

A total of 15 Pittsburgh CCC staff were interviewed or provided information for this audit during the on site visit. 12 random staff were interviewed, 11 from the Community Corrections Center Monitor classification. CCCMs are centrally located within the facility. All three shifts were represented during the staff interviews. Specialized interviews were also conducted of staff and were chosen based on the responsibilities and assigned duties at Pittsburgh CCC. Most staff were assigned multiple duties and were able to answer more than one specialized interview. For example, CCCMs are responsible for the day to day contact with reentrants and essentially provide security of the facility, but are also responsible for intake and are prepared to be first responders. In addition to the random interviews, four CCCMs were asked intake questions and two were asked specific first responder questions. Likewise, the Corrections Counselors are responsible for screening but could potentially serve as first responders. Therefore, the

Corrections Counselors were asked random staff questions, first responder questions, and screening questions. Although only five staff were questioned using the DOJ recommended questions for first responder, within the random questions, CCCMs and Corrections Counselors were assessed on their knowledge of first responder duties and are were aware of their responsibilities. In addition to the already noted specialized interviews, the following specialized interviews were conducted: Facility Director, PREA Compliance Manager, Staff who conduct investigations, staff on the incident review teams, and staff who monitor retaliation. The PREA Coordinator and Contract Administrator were interviewed by phone following the on site visit. The following staff interviews were not conducted: education and program staff who work with youthful reentrants, staff who supervise reentrants in segregated housing, medical and mental health staff on site, and staff who conduct cross gender non-medical strip searches. Pittsburgh CCC does not house youthful offenders, does not utilize segregated house, and non-medical cross-gender strip searches do not occur. Pittsburgh CCC does not offer on site medical and mental health programming, but refers reentrants to community providers. Two community providers were interviewed by phone during the post-audit.

Additionally, interviews were conducted for previously completed audits and referenced in this audit. On October 26, 2018 PREA Auditor Paula Stoudt completed the Agency Head interview. In May 2018 the following specialty interviews were completed by this auditor: lead PREA investigator assigned to the Bureau of Community Corrections - Management Operations Center, Human Resources Analyst for the Office of Administration, and Bureau of Community Corrections Security Administrative Officer responsible for tracking staff training. Further, in May 2018 this auditor drafted and mailed through US Postal Service a letter to the Pennsylvania State Police (PSP) at the address provided to staff and reentrants as a mechanism for reporting sexual abuse and sexual harassment. This auditor received a phone call in response to the letter from the PSP fourteen days after the letter was mailed and ultimately interviewed an employee in the PSP Bureau of Criminal Investigations on June 12, 2018. PSP confirmed they are a third party to receive allegations of sexual abuse incidents stemming from DOC facilities and that they do receive PREA correspondence from Pennsylvania DOC. Upon receiving the letter, it is immediately scanned and sent to the PREA Coordinator at DOC. PSP does not begin an investigation at this time.

Fourteen reentrants were interviewed, consisting of random and targeted interviews according to DOJ interview protocols. Most reentrants were selected randomly by the auditors, ensuring at least one reentrant was interviewed from each of the nine bedrooms. Additionally, some reentrants were chosen because they were present at the facility during the interview times. The following targeted interviews were not conducted as there were no reentrants identified who met the criteria for interview: youthful reentrant, reentrant in segregated housing, disabled or limited English proficiency, transgender or intersex, reentrants who reported sexual abuse or sexual harassment, or disclosed during risk screening. All reentrants who were offered an interview, accepted. Reentrants consistently answered that male staff announce themselves when entering the upstairs living areas, reentrants are aware of their rights to be free from sexual abuse and sexual harassment, and have a right not to be punished for reporting sexual abuse or sexual harassment. Reentrants consistently indicated they were asked questions about their sexual safety the day they arrived at the facility and most recalled being asked those questions again. All reentrants knew at least one manner in which to report sexual abuse or sexual harassment, and overwhelmingly, most of the reentrants were comfortable reporting to staff, identifying which staff they were most likely to report to.

Many documents and file material was available through the Pre-Audit Questionnaire. On site, the auditors reviewed investigative file material, the reentrant handbook, and the PRAT Tracking form both

electronically and paper copy. An intake of a new reentrant was observed. During the intake, the CCCM reviewed all necessary documents with the reentrant, including the PREA Intake form which included the Department's policy, definitions, how to report sexual abuse and sexual harassment, what to expect if a reentrant is a victim, and how to receive support services if a victim of sexual assault or sexual harassment. Additionally, auditors also observed reentrant education in which a reentrant and the Corrections Counselor watched the PREA Video from the PREA Resource Center followed by discussion. The video was in English with subtitles. During the tour, auditors viewed a posting of a 1-800 phone number for the Inmate Abuse Hotline. During interviews with reentrants and some staff, a 1-800 number was mentioned as a mechanism to report sexual abuse and sexual harassment. Given this was not provided as an option to reentrants on any of the PREA handouts or posters, nor was it included in the overhead announcement system, auditors questioned the validity of this number as a PREA reporting option. With the acting Facility Director, the 1-800 number was called. This number is specific for inmates to report violations of DC-001 Excessive Force. The recording indicates types of situations which can be reported. PREA, sexual abuse or sexual harassment are not listed in the recording, however, if a PREA report is made, PREA reports are forwarded to the Bureau of Community Corrections - Management Operations Center. Given this hotline is specific to Secure Correctional Institution Inmates, the acting Facility Director removed the hotline number.

At the conclusion of the on-site phase of the audit, an exit meeting was conducted with the acting Facility Director, Lieutenant Allen Lynch, PREA Coordinator 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.

During the post-audit phase, additional interviews were conducted. On February 21, 2019, the Facility Director was interviewed by phone based on DOJ interview protocols for the Warden/Director, PREA Compliance Manager, Retaliation Monitoring, and Incident Review. On February 27, 2019, the Vice President of the Center for Victims was interviewed. The Center for Victims offers advocacy, counseling, and crisis intervention services to victims of sexual assault. A formal letter of agreement has solidified the relationship with Pennsylvania DOC and on February 21, 2019, the Letter of Agreement was updated to specifically name Pittsburgh CCC. The updated letter was subsequently emailed to this auditor for verification. A phone number is utilized to receive services from The Center For Victims. This phone line is staffed twenty four hours a days by employees, not volunteers, who are able to provide needed services. Although reentrants can obtain services independent of Pittsburgh CCC, the Center for Victims staff could not recall a reentrant from Pittsburgh CCC being referred to the agency during the past twelve months. This is consistent with information received from Pittsburgh CCC. On March 1, 2019 the Clinician/Forensic Coordinator for the Emergency Department of Magee Womens Hospital of UPMC was interviewed. Magee Womens Hospital of UPMC provides sexual assault forensic examinations and has formally entered into a relationship with Pittsburgh CCC via letter of Agreement dated May 19, 2015. Magee Womens Hospital of UPMC trains all of their nurses to conduct forensic examinations and schedules at least one nurse on each shift who can conduct the exams. If a nurse is not available, victims of sexual assault will then receive services from UPMC Mercy Hospital. Magee Womens Hospital could not recall a reentrant from Pittsburgh CCC being admitted for a forensic examination during the past twelve months. This is consistent with reports from Pittsburgh CCC.

Additionally during the post-audit phase, additional questions and clarifications were made by email regarding the storage of signed reentrant education forms, training for staff, and monitoring technology.

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.

Pittsburgh Community Corrections Center (CCC) is operated by the Department of Corrections, Bureau of Community Corrections. This is a residential program to assist and supervise female reentrants under the jurisdiction of the Pennsylvania Department of Corrections during the latter portion of their incarceration transition into the community from a Secure Correctional Institution. Reentrants are encouraged to be employed or engage in community service, maintain sobriety, and take personal accountability for their decisions.

Pittsburgh CCC is housed in its own building in the Shadyside area of Pittsburgh and consists of four levels. The facility is locked, and visitors must be buzzed in and successfully navigate a metal detector prior to entry into the main areas of the facility. The main level houses the Director's office, the monitors office, living room, main and back kitchens, and the secretary's office. There is a backyard with a screened porch accessible to reentrants. The basement level consists of the lieutenant's office, two counselor offices, the laundry room, a day room for reentrants, bathroom, and locked furnace rooms and storage closets. The second floor of Pittsburgh CCC consists of a counselor's office, five bedrooms consisting of six or eight beds, a main bathroom, and two bathrooms connected to bedroom four and bedroom two. The third floor consists of a common area/living room, four bedrooms with multiple beds, a main bathroom and two bathrooms connected to bedroom nine and bedroom seven. Signs are posted and it is common knowledge among staff and reentrants that reentrants only dress and change clothing in the bathroom. Signs are also posted on the doors of bedrooms with a connecting bathroom. All bathrooms have a black "PREA" curtain inside the bathroom door to obstruct any view of a reentrant not properly dressed should the door be opened. At the entrance of the second and third floor, signs are posted reminding staff of the gender of the facility and per PREA standards, staff of the opposite gender must announce their presence. Announcing gender occurred regularly throughout the time auditors were on site. Additionally, when anyone of the opposite gender of reentrants enters the building an announcement is made. This announcement was heard regularly during the on site visit when maintenance workers, deliveries, visitors, or staff entered the building. Further, line staff and supervisory staff are required and make regular rounds throughout the facility.

Reentrants at Pittsburgh CCC are allowed out of the facility during the day. Many reentrants are employed or engaged in community service and participate in treatment programming. Reentrants are required to turn in a schedule which must be approved prior to leaving the facility. Reentrants are required to sign in and out and must clear the metal detector prior to entry into the facility.

Pittsburgh has 27 cameras throughout the facility, supplemented by mirrors. Cameras were recently installed to supplement and replace cameras not working properly. Additional cameras for outside of the building have been ordered and will be installed when weather permits. Cameras are placed in all of the stairways, hallways, common rooms, and facing doorways. Cameras are monitored real time by Community Corrections Center Monitors and the Facility Director and recorded footage is stored for 30 days.

Various PREA signs were posted throughout Pittsburgh CCC on all four levels. The PREA Audit Notice, PREA Notice, Zero Tolerance Policy, and If you are the Victim of Sexual Assault signs were consistently viewed. Further, community resources were posted and information available for reentrants to access in the community. Community Resources included the Sexual Assault Hotline, Center for Victims, and Pennsylvania Action Against Rape (PAAR).

## AUDIT FINDINGS

### Summary of Audit Findings:

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

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

<b>Number of standards exceeded:</b>	2
<b>Number of standards met:</b>	39
<b>Number of standards not met:</b>	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: 2

115.211

115.218

Number of standards met: 39

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	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures <ul style="list-style-type: none"> <li>BCC-ADM 008 Policy</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 Prevention and Training</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 Responding to a Report of Sexual Abuse</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 Disciplinary and Administrative Actions</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section Glossary of Terms</li> </ul> </li>   <li>3. Documents <ul style="list-style-type: none"> <li>BCC Vision Statement</li> </ul> </li>   <li>4. Interviews <ul style="list-style-type: none"> <li>PREA Coordinator</li> </ul> </li> </ol> <p>Findings:</p> <p>Subsection (a):</p> <p>Pittsburgh CCC follows a comprehensive policy and procedures on sexual abuse and sexual harassment in BCC-ADM 008, Bureau of Community Corrections PREA Policy and corresponding Prison Rape Elimination Act (PREA) Procedures Manual effective May 30, 2017 (hereinafter referred to as BCC-ADM 008). This policy covers all Bureau of Community Corrections facilities. The policy mandates zero tolerance for sexual abuse and sexual harassment and prohibits retaliation against reentrant or any staff who reports sexual harassment or sexual abuse against a reentrant, or cooperates with an investigation. The accompanying Procedures Manual outlines how Pittsburgh CCC is to implement the policy to prevent, detect and respond to such conduct. The Policy and Procedures Manual mirrors language found in the federal standards outlined in 28 C.F.R. Part 115.</p> <p>Section 2 of the Procedures Manual addresses prevention and training to ensure zero tolerance towards all forms of sexual abuse and sexual harassment and how the Department will implement the federal PREA standards to ensure that all areas of operations work toward preventing, detecting and responding to sexual abuse and sexual harassment. Strategies are noted in Section 2, and includes duties of the Department PREA Coordinator in developing and revising policies, overseeing PREA Compliance Division to ensure PREA compliance, working with each facility to ensure compliance, developing and training PREA curriculum to all staff, volunteers, reentrants, and service providers, and annually reviewing each facility to</p>

determine and document if adjustments are needed to available facility resources to prevent, detect, and respond to sexual abuse and sexual harassment. Section 4 of the Procedures Manual addresses how staff in various classifications respond to reports of sexual abuse to ensure that incidents are responded to appropriately in the areas of first responders, investigation, medical, mental health, and facility leadership. Section 7 addresses Disciplinary and Administrative Action when an employee, contractor, or volunteer violates the zero tolerance policy, as well how to respond to reentrants who engage in sexual abuse, sexual harassment, or any sexual activity.

BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual also includes a seven page Glossary of Terms consistent with definitions found in 28 C.F.R. Part 115.05 and 115.06. The Glossary describes prohibited behavior regarding sexual abuse, sexual harassment, and sexual grooming.

Subsection (b):

BCC-ADM 008 directs the Department to designate an agency-wide PREA Coordinator to develop, implement, and oversee the Department's efforts to comply with federal PREA standards and gives the PREA Coordinator authority to make necessary decisions to ensure compliance. Section 2 of the Procedures Manual further designates this to be the sole responsibility of the PREA Coordinator. Additionally each facility is directed to designate a PREA Compliance Manager (PCM) to coordinate the facility's efforts to comply with the standards. The Director of each Community Corrections Center is designated as the PREA Compliance Manager and reports directly to the PREA Coordinator regarding PREA matters. Per policy and as evidenced by the organizational charts and interviews, the PREA Coordinator is housed in the Bureau of Standards, Audits, and Accreditation who reports directly to the Executive Deputy Secretary.

An interview on February 1, 2019 with the Pennsylvania Department of Corrections PREA Coordinator confirmed that DOC does designate a PREA Coordinator whose sole responsibility is PREA compliance within the Department. Each facility has a PREA Compliance Manager (PCM), totaling 37 PCMs throughout the Department. Twice a year, the PREA Coordinator schedules time with all of the PCMs to provide training and ensure messages are being conveyed consistently to all Department PCMs. The PREA Coordinator is available for technical assistance, distributing policy and procedure revisions, reviewing PREA investigations, reviewing and providing input into staffing plans, and compiling annual reports.

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

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 Prevention and Training

3. Documents

Contract Extensions - 14 examples from August 2018

Invitation for Bid for Housing and Treatment Services January 4, 2013

Memorandum Of Understanding (MOU) between Pennsylvania and the County of Chester 2015

Memorandum of Understanding (MOU) between Pennsylvania and the County of Cambria 2015

PREA Contract Compliance Monitoring Report Gateway Rehabilitation Centers - Gateway - Erie

PREA Contract Compliance Monitoring Report Firetree, LTD Capital Pavilion

PREA Contract Compliance Monitoring Report GEO Group, Inc. Hoffman Hall

PREA Contract Compliance Monitoring Report GEO Group, Inc. Alle-Kiski Pavilion

PREA Contract Compliance Monitoring Report Keystone Correctional Services, Inc.

PREA Contract Compliance Monitoring Report Treatment Trends, Inc. Keenan House

PREA Contract Compliance Monitoring Report Tomorrows Hope, LLC.

4. Interviews

Agency Contract Administrator

Findings:

Subsection (a):

BCC-ADM 008, Section 2 - Prevention and Training requires the Department to include in any new contract or renewal for housing of a reentrant the obligation to adopt and comply with the PREA standards and the Department's policies related to PREA compliance. According to the Pre-Audit Questionnaire, the Department renewed all Community Confinement contracts as of October 1, 2018. There are 24 contracts covering 36 facilities. The contracts stem from a bid request in 2012 which includes PREA language requiring contractors to adopt and comply with the standards of the Prison Rape Elimination Act and applicable DOC policies. Although contracts with county jail facilities have not been renewed since the last PREA audit, the Pre-Audit Questionnaire included two MOU's from 2015 between the Commonwealth of Pennsylvania and Chester County and Cambria County. Both MOU's include a section in which the County agrees to adopt and comply with all PREA regulations.

Subsection (b):

BCC-ADM 008 Section 2 Prevention and Training also requires the PREA Compliance Director

to provide contract monitoring to ensure the contractor is complying with the PREA standards and that the results are documented using the BCC PREA Contract Compliance Monitoring Report. Seven examples of contract monitoring by the PREA Compliance Director was submitted for review during the Pre-Audit. The monitoring includes a review of policy and procedures, MOU's/Letters of Agreement, a review of Department of Justice (DOJ) PREA audit reports, and a review of the annual PREA report.

Subsection (c):

BCC-ADM 008 Section 2 - Prevention and Training also states that the Department can only enter into a contract in which compliance with the PREA standards have not been met if all reasonable attempts to find a private agency or other entity in compliance with the PREA standards have failed. All unsuccessful attempts shall be documented. No agencies contracted with Pennsylvania DOC have failed to comply with PREA standards.

According to the Agency Contract Administrator, PREA compliance is built into the master contract. Each contracted facility is required to have a PREA Audit completed once every three years and the report submitted to PA DOC. In years there is not a PREA audit, contract monitoring by the Department occurs. Contract monitoring includes a review of PREA policy and ensures that the facility has adequate resources, an MOU with a rape crisis agency and an MOU with a hospital to perform sexual assault forensic examinations. Additionally, every month, each facility is required to submit a report which includes PREA incidents. Further, BCC investigates all PREA incidents involving a DOC reentrant at a contract facility. Contract compliance for 2018 was completed by October 31, 2018.

Corrective Action: None



115.213	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training  Policy 8.3.1, Bureau of Community Corrections Security Procedures Manual, Section 15 - Facility Staffing</li> <li>3. Documents  2018 BCC Annual Staffing Plan  2017 BCC Annual Staffing Plan  2016 BCC Annual Staffing Plan  Facility Population dated December 19, 2018  Camera locations  Bureau of Community Correction CCC Monitor Schedule, week of March 4, 2018; April 22, 2018; July 15, 2108; October 28, 2018</li> <li>4. Interviews  PREA Coordinator  Facility Director</li> </ol> <p>Findings:</p> <p>Subsection (a):  BCC ADM 008 Section 2 Prevention and Training requires the Bureau Director or designee to develop and document a CCC staffing plan according to Department policy 8.3.1, "Bureau of Community Corrections Security," Section 15. According to policy 8.3.1, the staffing plan should provide for adequate levels of staffing, and where applicable, video monitoring to protect offenders (reentrants) against sexual abuse. In calculating adequate staffing levels and determining a need for video monitoring, consideration should be taken for:</p> <ol style="list-style-type: none"> <li>1. the physical size and layout of the facility</li> <li>2. number and type of offenders (reentrants) assigned to the facility</li> <li>3. video monitoring capabilities to protect offenders (reentrants) against sexual abuse</li> <li>4. the prevalence of substantiated and unsubstantiated incidents of sexual abuse</li> <li>5. any other relevant factors</li> </ol> <p>According to the Pre-Audit Questionnaire, the facility maximum bed capacity is 48 with an average daily population of 40. The staffing plan for 2018 was submitted for review and was developed based on the 48 bed capacity. The staffing plan considered the physical layout of the facility, the composition of the reentrant population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse comparing the previous year's data, and placement of cameras.</p>

Subsection (b):

Pittsburgh CCC does not deviate from the staffing plan. Vacancies are addressed through voluntary and mandatory overtime. Four 2018 Monitor Schedules were submitted for review showing the use of overtime and mandatory overtime to ensure the staffing plan is followed. According to the Facility Director, there is always coverage either through regular staff assignments or through the use of overtime. Safety and security is never compromised by fiscal limitations.

Subsection (c):

According to BCC-ADM Section 2 - Prevention and Training, the PREA Coordinator is required to work with each facility annually to assess, determine, and document whether adjustment are needed to: the staffing plan, deployment of the video monitoring systems, and other monitoring technologies and the resources the facility has available to commit to ensure adherence to the staffing plan. Additionally, the PREA Coordinator reviews any documentation for non-compliance with the staffing plan. Further, according to 8.3.1 Section 15 - Facility Staffing, the Bureau Major or designee conducts an annual review of the staffing patterns at every CCC and prepares a report to the Bureau Director and Deputy Director for Facilities Management or designees with recommendations for staffing level and/or video monitoring changes. The BCC confidential staffing plan reports for 2016, 2017, and 2018 which included, Pittsburgh CCC, were submitted for review and demonstrates the policies are followed. Changes in staffing patterns and monitoring technology over the three year period are documented and the reasons articulated.

Corrective Action: None

115.215	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training  8.3.1 Bureau of Community Corrections Security Procedures Manual Section 30 - Searches</li> <li>3. Documents  2018 Pat/Strip Search log  Gender Announcement Poster  Changing Area Poster  Search Training Slides  Contraband and Search In-Service Training lesson  Searches In-Service Training Rosters</li> <li>4. Interviews  Random Staff  Random Reentrants</li> <li>5. Tour of Facility</li> </ol> <p>Findings:</p> <p>Subsection (a):  8.3.1 Bureau of Community Corrections Security Procedures Manual Section 30 - Searches prohibits Community Corrections staff from conducting body cavity searches (visual or internal) on any offender, cross gender strip searches of any offender (reentrants), and strip searches of a transgender offender. According to the Pre-Audit questionnaire, no cross gender strip or visual body searches have been conducted at Pittsburgh CCC.</p> <p>According to staff and reentrants, strip searches are always conducted by two female staff in a bathroom with the door closed. There is a sign placed on the door indicating to staff that a search is taking place and male staff should not enter. Prior to a strip search, permission is received from the facility Director or the Management Operations Center (MOC).</p> <p>Subsection (b):  8.3.1 Bureau of Community Corrections Security Procedures Manual Section 30 - Searches indicates that only female staff may conduct pat searches of female or transitioning female reentrants and that facilities shall not restrict reentrants access to regularly available programming or other opportunities if female staff are not available to conduct the search. In the past year, no cross gender pat searches were conducted. No reentrants were denied opportunities or access to services because female staff were not available to conduct a pat</p>

search.

According to staff and reentrants, pat searches are conducted by female staff. The majority of monitoring staff are female, resulting in female staff availability. All reentrants interviewed reported not being denied opportunities or access to services because of female staff availability. Reentrants denied being searched by male staff.

Subsection (c):

According to policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 30 - Searches, every strip search shall be documented on the Offender Strip Search Log. The 2018 Strip Search Log was submitted for review. The log indicated that for every strip search, two female staff were present. A copy of the Pat/Strip Search Log was also submitted and indicated one female staff conducted the pat search.

Subsection (d):

Policy BCC-ADM 008 Section 2 - Prevention and Training mandates that reentrants be allowed to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when viewing is incidental to routine dorm room checks or security rounds. Policy also requires locations to be designated throughout the facility that allows reentrants to shower, perform bodily function and change clothing with basic privacy. Further, the policy mandates that staff of the opposite gender announce their presence prior to entering a bathroom or shower area, or authorized changing area.

During the Pre-Audit, pictures of the "Authorized Changing Area" notice were submitted for review. The signs remind male staff to knock and announce when entering reentrant's bathrooms and reminds reentrants they are only allowed to be fully undressed while in the bathroom, with the door closed. Female reentrants are not allowed to lounge or sleep in their undergarments at any time. During the tour of Pittsburgh CCC, signs were affixed to all bathroom doors and doors of bedrooms with bathrooms. Reentrants consistently reported that male staff do not enter the bathrooms.

Additionally, signage is posted at the entrance to each floor reminding staff to announce "Male on Floor" every time a male enters the second and third floor housing unit, even if they had been on the unit previously. The signage was viewed during the facility tour. In addition to signage, when male staff enter the building at the beginning of shift or male contract workers or visitors enter the building, an announcement is made on the overhead announcement system. This was heard during the on site portion of the audit and confirmed during staff and reentrant interviews.

During the Pre-Audit, the training slides for Searches was reviewed. Staff were trained in this PREA standard as it relates to searching cross-gender or intersex reentrants and their ability to shower, use the toilet, and change their clothes without being viewed by nonmedical staff of the opposite gender. Staff were also trained at this time that opposite-gender staff of reentrants must announce their presence to enable reentrants to cover up. All Community Corrections Center Monitors (CCCMs) assigned to Pittsburgh CCC were trained in 2018.

Subsection (e):

Policy 8.3.1, Section 30 - Searches, forbids Community Corrections staff from conducting a search or physical examination for the sole purpose of determining any offender's (reentrant's) genital status. If the reentrant's genital status is unknown, staff may determine the status through conversations with the reentrant, by reviewing medical records, or if necessary, as part of a broader medical examination conducted in private by a medical practitioner.

Most staff were aware of the policy prohibiting them from conducting a search or examination for the sole purpose of determining a reentrant's genital status. No reentrants at Pittsburgh CCC identified as transgender or intersex, thus no reentrant was interviewed specific to this subsection.

Subsection (f):

CCCMs were trained on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner. Training records were reviewed and confirmed that the 14 CCCMs assigned to Pittsburgh CCC were trained on searches. A review of the power point confirmed the content of the training included procedures of the search as well as the requirement to search in a professional and respectful manner. Additionally, staff interviews confirmed staff were trained on conducting pat-down searches and searches of transgender and intersex reentrants, specifically in a professional and respectful manner.

Corrective Action: None

115.216	<b>Residents with disabilities and residents who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 005, Bureau of Community Corrections Resident Legal Procedures Manual Section 1 - Reasonable Accommodations  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training</li>   <li>3. Documents  Language ID  Proprio Language instruction card  Pennsylvania Department of Corrections - Foreign Language Employee Directory  Purchase Order for Proprio Language Services  PREA Notice written in Spanish</li>   <li>4. Interviews  Agency Head  Random Staff</li>   <li>5. Tour of Facility</li> </ol> <p>Findings:</p> <p>Subsection (a):  According to BCC-ADM 005, Bureau of Community Corrections Resident Legal Procedures Manual, Section 1 - Reasonable Accommodations written materials and training will be delivered in alternative formats that accommodate a resident's disability. Policy allows for the delivery of the information through alternative methods, such as reading the material to the resident or communicating through an interpreter. According to policy BCC-ADM 005, this practice is to ensure the resident's understanding of facility rules, regulations, and direction as well as information related to sexual abuse prevention, detection, and response according to PREA standards. It is the responsibility of the Facility Director or designee to ensure staff and residents have access to appropriately trained and qualified individuals who are educated in the problems and challenges faced by residents with physical and or mental impairments, programs designed to educate and assist residents, and all legal requirements for the protections of residents with disabilities. This is reiterated in BCC-ADM 008 which ensures reentrants with disabilities have an equal opportunity to participate in or benefit from all aspects of Department efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p>According to the Agency Head interview conducted on October 26, 2018 by Auditor Paula Stoudt, interpretation services are available for reentrants who are limited in English</p>

proficiency, and for reentrants who are hearing or visually impaired. Additionally, written materials and postings are available in English and Spanish. These written materials were viewed during the Pre-Audit and during the facility tour.

Subsection (b) and (c):

PA DOC prohibits the use of reentrants to act as a translator or assistant for sexual abuse or physical abuse related interviews or reporting. PA DOC provides a list of bi-lingual staff who are qualified to translate. If staff are not available, the contracted Proprio Language Services should be utilized to meet the language needs. Proprio Language Services offers translation services in over 33 languages including American Sign Language. Information on how to access this service has been provided to DOC staff. There have been zero instances during the last audit cycle in which a reentrant served to translate.

During the Pre-Audit, a PREA Notice written in Spanish was submitted for review. The Noticia De PREA includes the Department's No Tolerance Policy, definition of PREA, sexual abuse, and sexual harassment and how to report. These written notices were viewed during the facility tour.

Random staff reported that they would not use other reentrants to interpret for PREA purposes. However, staff were not as familiar with available interpretation services. Some staff indicated knowledge of a phone line for TTY services but were not aware of other services. No staff mentioned an available list of staff who could interpret for reentrants. This has been addressed with the facility Director, as these are valuable resources for PREA and other situations. Pittsburgh CCC does not currently house any reentrant who has been identified having a disability or being limited in English therefore, no reentrant interviews were conducted to address this standard. Although translation services were not needed during this audit, this auditor has utilized the PROPIO language line under the PA DOC contract for previous audits. There have no barriers experienced in obtaining translators for PREA interviews.

Corrective Action: None

115.217	<b>Hiring and promotion decisions</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures       <ol style="list-style-type: none"> <li>1.1.4, Centralized Clearances Procedures Manual Section 4 - Centralized Clearance Check Procedures           <ol style="list-style-type: none"> <li>4.1.1, Human Resources and Labor Relations Procedures Manual Section 41 - Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies</li> <li>4.1.1, Human Resources and Labor Relations Procedures Manual Section 40 - Conducting Pre-Employment Background Investigations</li> <li>8.3.1, Bureau of Community Corrections Security Procedures Manual Section 31 - Contractor and Volunteer Clearances</li> </ol> </li> <li>BCC-DM 008, Bureau of community Corrections PREA Procedures Manual Section 1 - Data Collections</li> </ol> </li>   <li>3. Documents       <ul style="list-style-type: none"> <li>PREA current/prior employer letter</li> <li>Pennsylvania DOC Application for Employment</li> <li>Position Vacancy Interest Form</li> <li>Justice Network (JNET) employee sample</li> </ul> </li>   <li>4. Interviews       <ul style="list-style-type: none"> <li>Human Resources</li> <li>Random Staff</li> </ul> </li> </ol> <p>Findings:</p> <p>Subsection (a):</p> <p>Pennsylvania DOC Policy and Procedure 4.1.1, Human Resources and Labor Relations Procedures Manual Section 41 specifically states the Department will not hire or promote anyone who:</p> <ol style="list-style-type: none"> <li>a. has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution</li> <li>b. has been convicted or civilly or administratively adjudicated for engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse</li> <li>c. has been convicted of any offense under the following (or equivalent out of state offense):       <ol style="list-style-type: none"> <li>1. Title 18 Pa C.S.A. Chapter 31 - Sexual Offenses</li> <li>2. Title 18 Pa. C.S.A. Chapter 59 - Public Decency.</li> </ol> </li> </ol> <p>Per policy 1.1.4, Section 4 Centralized Clearance Check Procedures, prior to the engagement of any contractors, the contractor and all of the contractor's employees and/or subcontractors who may have contact with reentrant will be investigated to ensure that the Department does</p>



not enlist the services of anyone who:

- a. has engaged in sexual abuse in a prison, jail, community facility, juvenile facility, or other institution
- b. has been convicted or civilly or administratively adjudicated for engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.

In the past year, no staff have been hired at Pittsburgh CCC. Most recently, new staff to Pittsburgh CCC transferred from other DOC facilities and were not new to the Department of Corrections.

Subsection (b):

According to policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 40, when hiring or promoting, the Department will consider any incidents of sexual harassment in determining whether to hire or promote anyone. Additionally, policy 1.1.4, Centralized Clearance Check Procedures Section 4 requires the Department to consider any incidents of sexual harassment when determining whether to enlist the services of any contractor who may have contact with reentrants.

According to an interview with Human Resources on May 18, 2018, PA DOC does consider prior incidents of sexual harassment when determining whether to hire or promote someone and considers prior incidents when entering into agreements or contracts with contractors who may have contact with inmates or reentrants.

Subsection (c):

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

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

Section 6 of the application includes the applicant's employment experience for at least the past five years unless the employment was 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 must be included regardless if experience occurred more than five years previously.

The Human Resource Office submits a background check request to the Bureau of Investigations and Intelligence (BII) who is tasked with conducting background checks for all prospective new hires and rehires that have been separated for more than 60 days. Included, but not exhaustive, in the background investigation is the driving record, professional license/certification, criminal justice documentation, military records, and drug related convictions.

In addition to the criminal background check, the Department investigates the applicant's current and prior employers. BII uses the Current/Prior Employer letter which specifically asks if the applicant has:

1. engaged in sexual abuse in a prison, jail, lockup, community confinement facility juvenile facility or other location
2. been convicted or civilly/administratively adjudicated to have engaged in or attempted to engage in sexual activity in the community by force (overt or implied), coercion, or involving a non-consenting victim
3. been involved as the alleged perpetrator in any incident of sexual harassment.

During the past 12 months, there have not been any new hires or staff promotions at Pittsburgh CCC.

Subsection (d):

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.

The Criminal History check includes Justice Network (JNET), Department Visitor Tracking, the Department Inmate Phone List System, and warrants.

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

Subsection (e):

Employees are responsible to report any negative contact with Law Enforcement to the employee's supervisor as soon as possible, or the employee's next scheduled work day. In addition to this requirement, Department of Corrections utilizes the Justice Network (JNET) system to cross check all employees daily for negative law enforcement contact. Contractor and volunteers who provide services receive an annual clearance update and every two years, a criminal history check is completed by the Centralized Clearance Unit. This information is communicated with the facility requesting the background check.

Subsection (f):

When current employees apply for a vacant position within the Department, the applicant

completes a Position Vacancy Interest Form. Applicants new to the Department of Corrections complete an Application For hire on line. Both forms require the applicant to answer five 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.

Staff from Human Resources confirmed the continuing affirmative duty to disclose any such previous misconduct. All random staff interviewed acknowledged their duty to report any knowledge, information, suspicion of sexual abuse, sexual harassment, retaliations against those who have reported sexual abuse or sexual harassment, or any staff negligence resulting in a sexual assault or sexual harassment incident.

Subsection (g):

Applicants for employment are required to affirm and sign the Application for Employment, indicating the information 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.

Subsection (h):

According to the Human Resource Analyst 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	<b>Upgrades to facilities and technology</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures       <ul style="list-style-type: none"> <li>8.3.1, Bureau of Community Corrections Security Procedures Manual Section 3 - Facility Design, Operation, and Access</li> <li>8.3.1, Bureau of Community Corrections Security Procedures Manual Section 6 - Community Corrections Center (CCC) Maintenance, repair, and Construction</li> <li>8.3.1, Bureau of Community Corrections Security Procedures Manual Section 42 - CCTV Monitoring and Recording Systems</li> </ul> </li> <li>3. Documents       <ul style="list-style-type: none"> <li>APR for cameras dated July 21, 2018</li> </ul> </li> <li>4. Interviews       <ul style="list-style-type: none"> <li>Agency Head</li> <li>Acting Facility Director</li> <li>Facility Director</li> </ul> </li> <li>5. Tour of facility</li> </ol> <p>Findings:</p> <p>Subsection (a):  Procedures Manual 8.3.1 requires that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the Department shall consider the effect of the design, acquisition, expansion or modification upon the Department's ability to protect offenders (reentrants) from sexual abuse.</p> <p>According to the Agency Head interview on October 26, 2018, PA DOC considers the safety and privacy needs of inmates and reentrants to ensure good sight line and not decrease visibility.</p> <p>Since August 2012 or the last PREA Audit, Pittsburgh CCC has not expanded or modified the facility. However, during the audit, Pittsburgh CCC was planning upgrades to the two kitchen areas. According to the Facility Director during his interview, the layout of the kitchen area will remain the same, but will be more open. The area is adequately monitored by cameras, and the upgrades will not change the ability to observe the area or create any blind spots.</p> <p>Subsection (b):  Procedures Manual 8.3.1 requires the Department to consider how installing or updating video monitoring system, electronic surveillance system, or other monitoring technology may enhance the ability to protect reentrants from sexual abuse.</p>

According to the Agency Head, cameras are utilized to increase visibility. In July 2018, Pittsburgh CCC recognized a need and purchased nine cameras to enhance the safety of reentrants and staff. The new cameras replaced older cameras that no longer operated properly or were placed in the back stairways used for emergency purposes only. Prior to placement, cameras were at the entrance to each staircase, but not in the space. Pittsburgh CCC has 27 cameras and two mirrors to aid in monitoring reentrants and promote reentrant and staff safety. Additional cameras have been ordered and will be installed outside of the facility to enhance monitoring and safety around the outside of the building. The placement of cameras and mirrors at Pittsburgh CCC is designed to enhance the Department's ability in monitoring, to ensure reentrant and staff safety, and has eliminated blind spots and potential areas of concern. Cameras are monitored real time in and footage is recorded and stored for 30 days.

Corrective Action: None

115.221	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse  8.3.1, Bureau of Community Corrections Security Procedures Manual Section 24 - BCC Evidence Control</li>   <li>3. Documents  Bureau of Community Corrections PREA Report - Sexual Abuse blank form  Bureau of Community Corrections PREA Report - completed June 2018  Memorandum of Understanding between the Pennsylvania State Police and the Pennsylvania Department of Corrections dated September 24, 2013  Memorandum of Understanding between the Pennsylvania State Police and the Pennsylvania Department of Corrections dated February 16, 2017  Amendment Number One to Memorandum of Understanding between the Pennsylvania State Police and the Pennsylvania Department of Corrections, August 2018  Letter of Agreement between Magee Womens Hospital of UPMC and Pennsylvania Department of Corrections dated May 19, 2015  Victim of Sexual Abuse Services Offered (English and Spanish)  "If you are the Reported Victim of Sexual Abuse" (English and Spanish)  Letter of Agreement between Crime Victims Center (CVC) and the Department of Corrections dated June 18, 2014</li>   <li>4. Interviews  Random Staff  Facility Director  PREA Compliance Manager  SAFE/SANE Staff from Magee Womens Hospital UPMC</li>   <li>5. Tour of facility</li> </ol> <p>Findings:</p> <p>Subsection (a) :</p> <p>The Bureau of Community Corrections is responsible for administrative investigations and the Pennsylvania State Police (PSP) conducts criminal sexual abuse investigations. When an allegation of sexual abuse occurs, it is the policy of the Department in BCC-ADM 008, that the facility secures and protects the potential crime scene and law enforcement and/or outside medical professional collects the physical evidence according to 8.3.1 BCC Evidence Control. 8.3.1 Evidence Control; Crime Scene Control details 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</p>

ensure a uniform response, the Bureau of Community Corrections utilizes a First Responder Checklist and First Responder pocket cards are given to staff. The checklist and cards include victim safety and medical care, security of the crime scene, reporting, and documentation.

Community Corrections Center Monitors at Pittsburgh CCC have the potential to be first responders in the event of a sexual abuse incident. All staff interviewed could articulate the need to separate the alleged victim and alleged abuser to ensure victim safety, preserve the crime scene and physical evidence and make notifications to the Director or the Management Operations Center (MOC). Staff were aware of the chain of command for making notifications. Staff believed that either the PCM or Security Lieutenant, unless MOC assigns another investigator, would complete the investigation. Although the Pittsburgh CCC PCM does not conduct investigations, staff did articulate that it is MOC who assigns the investigator.

Subsection (b):

The relationship between the Department of Corrections (DOC) and PSP is solidified through a Memorandum of Understanding (MOU) dated February 26, 2017 with one amendment in August 2018 to address a change in DOC operations in that DOC is now responsible for Pennsylvania Board of Probation and Parole lockup detention facilities. Through the amendment, PSP will also investigate PREA allegations in these facilities. The MOU states "PSP is responsible for investigating allegations of sexual crimes that occur within DOC facilities and is familiar with PREA Standard 115.21 pertaining to the investigation of sexual assaults, the collection of pertinent evidence, and forensic examinations. PSP will endeavor to comply with PREA Standard 115.21, with the understanding that every alleged crime is unique and requires different investigative steps". On July 1, 2015, PSP submitted a letter to the DOC Secretary acknowledging PSP's familiarity with PREA standard 115.21 and their commitment to follow the standard, with the understanding that every alleged crime is unique and requires different investigative steps.

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

Subsection (c):

According to BCC-ADM 008 Section 4 - Responding to a Report of Sexual Abuse, all alleged victims of sexual abuse occurring within 96 hours will be offered access to a forensic medical examination at an outside facility, without financial cost to the alleged victim, using a SAFE or SANE where possible. If a SAFE or SANE cannot be made available, the examination may be performed by other qualified medical practitioners and documented appropriately. When services are offered, the alleged victim is provided the "Victim of Sexual Abuse Services

Offered form.

It is the responsibility of the PREA Compliance Manager at each facility to coordinate for SAFE/SANE medical services. Additionally, each facility is required to maintain a PREA SAFE/SANE Letter of Agreement. On May 19, 2015, Pittsburgh CCC entered into an agreement with Magee Womens Hospital of UPMC in Pittsburgh in which Magee Women's Hospital of UPMC agreed to provide sexual assault examinations by a trained or certified sexual assault nurse examiner when the assault occurred within 96 hours. The Letter of Agreement and relationship between Pittsburgh CCC and Magee Womens Hospital of UPMC was confirmed in an interview with the Clinician/Forensic Coordinator in the Emergency Department. All of the nurses assigned to the emergency room are trained to conduct sexual assault examinations and there is always at least one certified nurse working on each shift. If a nurse is not available to conduct the sexual assault examination, the patient is transferred to UPMC Mercy hospital in Pittsburgh.

When a reentrant is a victim of sexual abuse, they are offered medical and crisis intervention services without financial costs. Reentrants are provided a form, written in English and Spanish, offering a medical examination, mental health evaluation, and rape crisis services. Reentrants have the option of requesting or declining any or all of the services. Reentrants are advised in writing that the services are of no financial cost to the them. The form is signed and dated by the reentrant and the PREA Compliance Manager or designee.

Pittsburgh CCC has reported no sexual abuse incidents occurring within the past year requiring the need for a forensic medication examination. This was confirmed through interviews with the Security Lieutenant, Facility Director, and Magee Womens Hospital of UPMC.

Subsection (d) and (e):

Reentrants are afforded access to outside support services in BCC-ADM 008. It is the responsibility of the PREA Compliance Manger to ensure that alleged victims are offered and provided access to outside victim advocates for emotional supportive services related to sexual abuse which occurred in a confinement setting. The preferred service delivery method is in person in a confidential setting. It is the responsibility of the PREA Compliance Manager to coordinate victim services related to sexual abuse for the facility by working with the Pennsylvania Coalition Against Rape (PCAR) approved local rape crisis center. Pittsburgh CCC has entered into a relationship with Center for Victims, a PCAR agency. The relationship was initially solidified with a Letter of Agreement between the Department of Corrections and the Crime Victim Center (CVC) dated June 18, 2014, included in the Pre-Audit Questionnaire. The Letter of Agreement did not specifically name Pittsburgh CCC and the name of the advocacy agency had changed to Center for Victims. On February 21, 2019, at the request of the Pittsburgh CCC PCM, a new Letter of Agreement between Pittsburgh CCC and the Center for Victims was drafted and signed. This Letter of Agreement was subsequently forwarded to this auditor for verification. Both Letters of Agreement outline each agency's responsibilities. Center for Victims agreed to provide victim advocate services to reentrants at Pittsburgh CCC, including advocacy for and accompaniment to the forensic medical examination, confidential support services, and accompaniment to court proceedings. This relationship and services provided by the Center for Victims was confirmed in an interview with the Vice President/Chief Program Officer of the Center for Victims. She indicated they are a fully comprehensive rape



crisis center. Services are initiated through a 24 hour hotline staffed by fulltime employees. The agency provides information on referrals, crisis counseling, long term counseling, accompaniment to the medical examination and through the criminal justice system. Services are available in person and by phone.

In addition to Victims of Crime, reentrants are also provided other means of receiving support services. Reentrants have the option of working with their counselor for a referral for services through DOC. Additionally, other agencies in the Pittsburgh area offer similar services and are provided to reentrants as another option. During the tour of the facility, this information was viewed posted near the phones and outside of a counselor's office.

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):

Pittsburgh CCC does not utilize staff to conduct sexual assault examinations, collect evidence, or provide advocacy services.

Corrective Action: None

115.222	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring</li> <li>3. Documents PREA Sexual Abuse Incident Review dated September 27, 2018 Bureau of Community Corrections PREA Report - Sexual Abuse dated June 1, 2018 Memorandum of Understanding (MOU) between the Pennsylvania State police and the Pennsylvania Department of Corrections dated February 16, 2017 Amendment Number One to Memorandum of Understanding (MOU) between the Pennsylvania State police and the Pennsylvania Department of Corrections dated August 2018</li> <li>4. Interviews PREA Investigators</li> </ol> <p>Findings:</p> <p>Subsection (a) and (b): Per BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring, initial complaint information is entered into the PREA Tracking System which generates an incident number. All sexual abuse/sexual harassment allegations are required to be reported. Per policy, the Bureau Major or designee assigns an administrative investigation for every incident of sexual abuse and/or sexual harassment. Additionally, per policy, incidents appearing criminal in nature are also referred for criminal investigation.</p> <p>All allegations of sexual abuse and sexual harassment are investigated. 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.</p> <p>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.</p>

In the past twelve months, Pittsburgh CCC has had one PREA allegation. The PREA report and PREA Sexual Abuse Incident Review were made available for review during the Pre-Audit. These documents demonstrated the timeliness of the initial report and assignment of a PREA investigator, as well as referral to PSP. Based on these reports, Pittsburgh CCC and the Bureau of Community Corrections appears to have followed all aspects of BCC-ADM 008.

Subsection (c):

Per policy BCC-ADM 008, if a PREA allegation is being investigated for criminal charges, the DOC PREA administrative investigation is suspended to allow the criminal investigation to take precedence. The DOC PREA investigator is expected to work with law enforcement to obtain relevant reports and documents and to determine when to resume the administrative investigation.

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	<b>Employee training</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures <ul style="list-style-type: none"> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1- Data Collection</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 9 - Working with Transgender/Intersex Reentrants</li> </ul> </li> <li>3. Documents <ul style="list-style-type: none"> <li>Handout 1 - Sexual Abuse and Sexual Harassment (definitions)</li> <li>2017 Basic Training slides</li> <li>PREA Basic Training Participant Guide</li> <li>Course Lesson Plan Cover Sheet - PREA Basic Training</li> <li>Course Lesson Plan</li> <li>Professional Boundaries: Safety, Awareness and Expectations Course Lesson Plan Cover Sheet</li> <li>Professional Boundaries: Safety, Awareness and Expectations Participant Guide</li> <li>Professional Boundaries: Safety, Awareness and Expectations Lesson Plan/Slides</li> <li>Professional Boundaries: Safety, Awareness and Expectations Facilitator Guide</li> <li>Dynamics of Sexual Abuse and Sexual Harassment in Confinement: Males facility handout</li> <li>Dynamics of Sexual Abuse and Sexual Harassment in Confinement: Females facility handout</li> <li>Web Based Training Menus</li> <li>2015 Policy Update Training slides</li> <li>2017 Policy Update Training slides</li> <li>PREA 2018 Essentials Training slides</li> <li>PREA Orientation Receipt for Department and Contract Employees and Volunteers</li> <li>PREA Training Receipt for Department and Contract Employees and Volunteers</li> <li>PREA Essentials 2018 Pittsburgh CCC Training records</li> </ul> </li> <li>4. Interviews <ul style="list-style-type: none"> <li>Random Staff</li> </ul> </li> </ol> <p>Findings:</p> <p>Subsection (a):</p> <p>According to BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training, every person who has contact with reentrants shall be trained on his/her responsibilities related to sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Basic and refresher training includes:</p> <ol style="list-style-type: none"> <li>1. the agency's zero tolerance policy for sexual abuse and sexual harassment</li> </ol>	

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.

BCC-ADM Section 9 requires each facility to ensure staff interact professionally and respectfully toward transgender and intersex reentrants, specifically prohibiting the misuse of gender pronouns and titles and using unprofessional and derogatory references toward reentrants. This policy is reflected in the PREA basic training required of all staff.

Basic training materials were submitted and reviewed during the Pre-Audit. The performance objectives of basic training mirror the PREA standards and BCC-ADM 008 policy. The Lesson Plan and corresponding slides confirm the content of Basic PREA Training meets the performance objectives.

In addition to the Basic PREA Training, staff receive 5.5 hours of Professional Boundaries: Safety, Awareness and Expectations training. The training documents were submitted and reviewed during the Pre-Audit. Staff are trained on professional boundaries in a correctional setting, the expectations of PA DOC for individual professional boundaries, recognizing inappropriate behavior, contact, and relationships between staff and inmates/reentrants, and skills and strategies to maintain healthy professional boundaries.

All of the staff interviewed acknowledged receiving initial PREA training and then annual training thereafter. Staff indicated they were trained in topics such as the zero tolerance policy, how to detect and report incidents of sexual abuse and sexual harassment, and how to avoid inappropriate relationships with reentrants.

Subsection (b):

BCC-ADM 008 Section 2 requires an employee transferring from a single gender facility to an opposite gender or co-ed facility to receive additional training tailored to the gender of reentrants at the facility. The additional training includes: gender specific posts within the facility, facility specific procedures for announcing opposite gender staff, pat search and strip search procedures within the facility, and restrictions and areas within the facility restricted based upon staff gender. The "Dynamics of Sexual Abuse in Confinement" handout is also available for review which is gender specific.

Staff who have transferred from a male facility to Pittsburgh CCC received on the job training to cover announcing, pat and strip searches, areas at the CCC which are restricted to male staff and a review of the Dynamics of Sexual Abuse and Sexual Harassment in Confinement

handout. It was evident based upon the Pittsburgh CCC tour and interviews of staff and reentrants that staff were trained on these topics. Male staff presence is announced at the beginning of shift and when entering the second and third floors, and male staff do not enter the bathrooms. Additionally, male staff are not involved in pat or strip searches of female reentrants.

Subsection (c):

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

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

According to the Pre-Audit Questionnaire, PREA Essentials is a web-based training and is required of staff during even number years. PREA Policy Updates training is also web based and required on odd number years. The screen shot of the web based training menu confirms that in 2016 and 2018, PREA Essentials training was offered to staff working in a correctional facility, and in 2015 and 2017 PREA Policy Update was mandatory for all DOC employees. The training slides for PREA 2018 Essentials was submitted and reviewed during the Pre-Audit. This training consists of the Department's Zero Tolerance policy, retaliation, sexual orientation and identity, relationships, communication, detecting, reporting and responding to sexual abuse and sexual harassment. The training slides for PREA DC-ADM 008 Policy Update 2015 and 2017 was also submitted for review. This training covered topics such as data collection and retention, sexual abuse and sexual harassment prevention and training, reporting and responding to sexual abuse, investigating allegations, discipline, inmate notification, and working with transgender and intersex inmates.

Subsection (d):

Upon completion of PREA orientation, staff are required to complete and sign the PREA Orientation Receipt for Department and Contract Employees and Volunteers. This is a two page form introducing PREA standards, zero tolerance policy, defining sexual abuse and sexual harassment prohibitions and reporting. Staff acknowledge receiving the training and understanding the zero tolerance policy, how to report sexual abuse and sexual harassment and the methods to report. Upon completion of annual PREA Training, staff are required to complete and sign the PREA Training Receipt for Department and Contract Employees and Volunteers. By signing this form, staff acknowledge receiving and understanding the training including the zero tolerance policy and the obligation to report all forms of sexual abuse and sexual harassment. Training records are tracked and maintained in an online system and is a

centralize BCC function. Training records for 2018 PREA Essentials for Pittsburgh CCC were submitted for review. Training records indicate that the following staff at Pittsburgh CCC completed training: 14 CCCMs, two Clerk Typist 2s, one accounting Assistant, three Correctional Counselor 2s, and one Community Correctional Center Director.

This practice is consistent with BCC-ADM Section 1 and Section 2 which addresses the acknowledgment of training and maintenance of training records.

Corrective Action: None

115.232	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 11 - Non-Residential Contract Services</li>   <li>3. Documents  PREA Training Receipt for Department and Contract Employees and Volunteers  PREA Orientation Receipt for Department and Contract Employees and Volunteers  PREA Information and Reporting Requirements for Non-Residential Contract Service Providers</li>   <li>4. Interviews  Volunteer</li> </ol> <p>Findings:</p> <p>Subsection (a):  According to BCC-ADM 008 Section 2, all contractors and volunteers who have contact with reentrants are required to complete PREA training. This training includes the contractor and volunteer responsibilities as it relates to sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Following policy, contractors and volunteers are specifically trained as to the zero tolerance policy towards sexual abuse and sexual harassment as well as prohibitions and reporting requirements.</p> <p>Subsection (b):  Contractors and Volunteers who provide services at the facility receive basic PREA information during facility orientation. Individuals who provide non-residential, off-site services receives a copy of the Prison Rape Elimination Act (PREA) Information and Reporting Requirements for Non-Residential Contract Service Providers.</p> <p>Subsection (c):  Upon completing PREA training, a contractor or volunteer is required to complete and sign the PREA Training Receipt for Department and Contract Employees and Volunteers acknowledging participation in and an understanding of the PREA training. Additionally, contractor and volunteers complete and sign the PREA Information and Reporting Requirement for Non-Residential Contract Service Providers or the PREA Orientation Receipt for Department and Contract Employees and Volunteers, as applicable. Signing these</p>



documents indicate the signer has received the PREA information and understands how to report any incident of sexual abuse or sexual harassment.

This process is in line with BCC-ADM 008 Section 1 Data Collections, C. Document Retention - Staff and Contractors. BCC Regional Office maintains the signed acknowledgements for contract providers and the forms signed by volunteers are maintained in the Volunteer file at the individual facility.

Pittsburgh CCC has two contractors who have contact with reentrants and have received PREA training. Two verification forms were submitted and reviewed during the Pre-Audit.

One of the two contracted service providers at Pittsburgh CCC was interviewed for the purpose of the PREA Audit. He indicated that he has been facilitating groups at Pittsburgh CCC for three months, but has consistently provided services at other DOC facilities. He confirmed that he completed training at is relates to his responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response. Training consisted of the Departments policy, the definition of PREA and how to report incidents. He stated this training was an in-person class in Harrisburg. At the completion of training, the provider signed a form acknowledging receipt of training and an understanding of the material.

Corrective Action: None

115.233	<b>Resident education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training  11.2.1, Reception and Classification Procedures Manual Section 2 - Diagnostic and Classification Procedures  DOC Bulletin issued June 18, 2018</li>   <li>3. Documents  Inmate Handbook 2017 Edition (53 pages)  PREA Reentrant Intake Handout - English and Spanish  PREA Reentrant Intake Handout Receipt - English and Spanish  Sexual Abuse/Sexual Harassment Reentrant Education Program  PREA Education Receipt for Reentrants - English and Spanish  PREA Post - English and Spanish  Reentrant Education Receipts (27) completed  Zero Tolerance Fact Sheet Daily PREA Announcement</li>   <li>4. Interviews  Intake Staff  Reentrants</li>   <li>5. Tour of Facility</li> </ol> <p>Findings:</p> <p>Subsection (a) and (b):  According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training, every reentrant, including transfers and new receptions, receive information regarding the Agency's zero tolerance policy towards sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, and the right to be free from retaliation for reporting such incidents. Additionally, all reentrants receive information regarding policies and procedures for the Department's response to such incidents.</p> <p>Additionally, Pittsburgh CCC follows 11.2.1, Reception and Classification Procedures Manual Section 2 - Diagnostic and Classification Procedures, which states, "the Diagnostic and Classification Center (DCC) with the Department shall present an orientation program for new inmates, which includes sexual abuse/sexual harassment prevention, report and intervention". Additionally, each reentrant is issued an Inmate Handbook and a Facility Inmate Handbook Supplement within 48 hours of reception on the DCC housing unit.</p>

Reentrants at Pittsburgh CCC receive the PREA Reentrant Intake Handout upon arrival at the facility. This includes the Department's Zero Tolerance Policy, definitions of sexual abuse and sexual harassment and a reentrant's right to be free from sexual abuse and sexual harassment, what to do if a victim of sexual abuse, and how to report. Reentrants also receive the BCC Reentrant Handbook and the Pittsburgh CCC Handbook. Within one week of arrival, reentrants participate in the Sexual Abuse/Sexual Harassment Reentrant Education Program which covers the same topics, but in more detail including a video and discussion with a counselor.

Over the past 12 months, 144 reentrants were admitted to Pittsburgh CCC and received PREA information. All of the 144 reentrants arrived from another DOC facility or contract facility, with 46 of those reentrants having transferred from another Community Corrections facility.

During the site visit, an intake conducted by a Community Corrections Center Monitor (CCCM) with a new reentrant was observed. During the intake, the CCM reviewed the Reentrant Intake Handout which included the PREA policy, definitions, who to report, what to do if the reentrant is sexually abused or harassed, how to get support and who to contact. The reentrant was provided a copy of the handout and subsequently signed the receipt. Additionally, the reentrant was provided a copy of the Pittsburgh CCC Reentrant Handbook.

Subsection (c):

BCC-ADM 008 Section 2 - Prevention and Training, P. Reentrant Education requires the Facility Director or designee to ensure the reentrant orientation and education is provided in formats accessible to all reentrants, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as reentrants who have limited reading skills. Written materials such as the Inmate Handbook, PREA Intake Handout, and PREA posters are available in both English and Spanish. The language line through Propio and DOC bilingual staff are also available for languages other than English and Spanish. The PREA video is also in English and Spanish with subtitles for reentrants who are hearing impaired. Reentrants who are visually impaired could benefit from the audio portion of video and dialogue with staff facilitators. Additionally, staff facilitate the education video and are available to discuss the material for those who are limited in their reading abilities or struggle understanding the material.

Subsection (d):

According to policy, and evident in practice, each reentrant, transfers and new receptions, receive a copy of the PREA Handout in English or Spanish immediately upon arrival at the facility. The reentrant signs the PREA Sexual Abuse Awareness Handout Receipt for Reentrants. 27 examples of completed PREA Education Receipts for Reentrants from Pittsburgh CCC were submitted and reviewed during the Pre-Audit. These are dated at various times throughout 2018. This process was observed during the on-site portion of the audit.

Subsection (e):

According to BCC-ADM 008, reentrant education is provided by a trained counselor within 14 days of reception using the Sexual Abuse/Sexual Harassment Reentrant Education Program. This is a video and curriculum facilitated by the Corrections Counselor. Additionally, three

times per day at every CCC, an announcement is made over the public address system utilizing the Zero Tolerance fact Sheet. Further, reentrants are provided written materials such as the Inmate Handbook and the PREA Reentrant Intake Handout, to reference as needed. Furthermore, PREA posters are displayed throughout the facility. While on site, the auditor did observe a Corrections Counselor and reentrant watching and discussing the video. According to the Corrections Counselors, the education occurs either the same or next business day of the reentrant's arrival. During the on-site visit, a Corrections Counselor met with a reentrant who had arrived the previous day, to watch and discuss the video. The video was in English, consistent with the reentrant's language, and supplemented with English subtitles.

All Community Corrections Center Monitors are responsible for intake. Consistently, staff reported that all reentrants at the time of intake are educated on the Department's zero-tolerance policy, reentrant's right to be free from sexual abuse and sexual harassment and free from retaliation for reporting. Additionally, reentrants are educated regarding policies and procedures for the Department's response to such allegations. All reentrants to Pittsburgh CCC are arriving from a PA DOC Secure Correctional Institution or Bureau of Community Corrections Center and have previously received PREA education. However, they all receive the education again upon arrival to Pittsburgh CCC prior to further entry into the facility and bed assignments.

Reentrants consistently reported receiving PREA education upon their arrival to Pittsburgh CCC. They consistently reported being told of their rights not to be sexually abused or harassed or punished for reporting sexual abuse or sexual harassment. Most reentrants, without prompt, report being given a handout with the information.

Corrective Action: None

**115.234 Specialized training: Investigations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Evidence Reviewed:

1. Pre-Audit Questionnaire

2. Policy and Procedures

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training

3. Documents

2017 Investigator Training - 7 modules

Employee Training Transcripts- 23

4. Interviews

PREA Investigator

Findings:

Subsection (a) and (b):

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and training requires DOC employees who conduct sexual abuse investigations to receive specialized training specific to confinement settings. This training includes: techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative actions or prosecution referral. PA DOC investigators are trained using a seven module curriculum. A review of the lessons and slides submitted during the Pre-Audit showed training consisted of interviewing sexual abuse victims and suspected perpetrators, the use of Miranda and Garrity warnings, sexual abuse evidence collections, and prosecutorial collaboration.

PREA investigations are coordinated through the Bureau of Community Corrections- Management Operation Center (BCC-MOC). An interview was conducted with the lead investigator for the Bureau of Community Corrections in May 2018. During the onsite visit of Pittsburgh CCC, an interview was conducted with the Security Lieutenant assigned to Pittsburgh CCC who is a trained PREA investigator. Both investigators confirmed that in addition to the PREA training required of all staff, as PREA investigators they also completed specialized investigator training. This training consisted of techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and criteria and evidence required to substantiate a case for administrative or prosecution referral.

Subsection (c):

Upon completion of any PREA training, staff are required to sign the PREA Training Receipt for Department and Contract Employees and Volunteers. The employee is required to check the specific training completed. One such training is the investigator training. Training is

provided through the Training Academy and tracked through Central Office. There are currently 23 trained PREA Investigators in the Bureau of Community Corrections. Employee Training Transcripts for all of the PREA investigators were submitted and reviewed during the Pre-Audit. These transcripts confirmed that the PREA investigators completed standard PREA training as required by the Department as well as specialized "PREA Training For Correctional Investigators".

Corrective Action: None

115.235	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training  8.1.1, Community Corrections Health Care Services Section 5 - Resident Procedures</li>   <li>3. Documents  Letter of Agreement between Magee Womens Hospital of UPMC and PA DOC dated May 19, 2015</li>   <li>4. Interviews  SAFE/SANE Staff from Magee Womens Hospital of UPMC</li> </ol> <p>Findings:</p> <p>Subsection (a):  According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2- Prevention and Training, all full and part-time medical and mental health care practitioners who work regularly in the facilities will be trained in, or provide proof that they have been trained prior to providing service to the facility:</p> <ol style="list-style-type: none"> <li>a. how to detect and assess signs of sexual abuse and sexual harassment</li> <li>b. how to preserve physical evidence of sexual abuse</li> <li>c. how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and</li> <li>d. how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</li> </ol> <p>There are no medical or mental health care staff on site at Pittsburgh CCC nor are there contracted services provided to reentrants at Pittsburgh CCC. Reentrants receive medical and mental health care in the community. Procedures for reentrant Health Care is addressed in 8.1.1, Community Corrections Health Care Services Section 5 - Resident Procedures. Section J. Community Corrections Health Care Services, establishes procedures to ensure adequate services are available for residents under the authority of the Bureau of Community Corrections.</p> <p>Subsection (b):  Forensic Examinations are provided at Magee Womens Hospital of UPMC in Pittsburgh. This relationship has been formalized through a Letter of Agreement dated May 19, 2015 between Magee Womens Hospital of UPMC and PA DOC. The letter acknowledges PREA standards and the requirement that the sexual assault examinations be conducted by a trained or certified sexual assault nurse examiner.</p>

A phone interview with the Clinician/Forensic Coordinator of the Emergency Department at Magee Womens Hospital of UPMC confirmed the relationship between the Department of Corrections and Pittsburgh CCC through the Letter of Agreement and formal meetings between the two agencies. She confirmed that all of the nurses in the emergency room are trained to conduct sexual assault examinations and if a nurse is not yet trained, they do not conduct the examination.

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

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training

DOC Bulletin June 18, 2018

3. Documents

PRAT Training PowerPoint Presentation May 2018

PRAT User Guide May 2015

PA DOC PREA Risk Assessment Tool - English and Spanish

PRAT Tracking Sheet

4. Interviews

PREA Coordinator

Staff

Random Reentrants

5. Tour of Facility

Findings:

Subsection (a) and (b):

BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training requires every reentrant to be assessed for risk of being sexually abused by other reentrants or sexually abusive toward other reentrants within 72 hours of initial reception to the facility, including transfers from other facilities. PA DOC utilizes the PREA Risk Assessment Tool (PRAT). Within the past 12 months, 142 reentrants were received at Pittsburgh CCC and stayed for longer than 72 hours. According to the Pre-Audit Questionnaire, all 142 reentrants received the PRAT. The Pittsburgh CCC PRAT Tracking Form was submitted and reviewed during the Pre-Audit and viewed during the on site visit of Pittsburgh CCC. This tracking form included the reception date, reentrant name, when the initial PRAT was due, completed, and when the follow-up PRAT, 20-30 day from reception was due, high risk indicator for abuser or victim, and LGBTI status. This included a sample of the 142 reentrants and indicated that all but one reentrant completed the PRAT within 72 hours of reception. The one that did not, was assessed on day 4.

Corrections Counselors are responsible for completing the PRAT within 72 hours of admission. However, depending on the time of admission, the PRAT is completed the day of or the following business day after admission to Pittsburgh CCC. Through audits completed by the PREA Office in 2018, it was discovered that several of the PRATS were not completed within the time frames set forth in policy. Because of this finding, one Corrections Counselor is

now assigned to monitor and update the tracking sheet to ensure the PRAT is administered timely. Since this practice was instituted, all PRATS have been completed on time.

Reentrants are randomly assigned to a Corrections Counselor. All of the fourteen reentrants interviewed acknowledged answering questions found on the PRAT. Most of the reentrants recalled first being asked the questions by their Corrections Counselor the day they arrived to Pittsburgh CCC or the following day. Reentrants confirmed they were asked questions regarding sexual abuse, identification as gay, lesbian, or bisexual and if the reentrant thought they were in danger of sexual abuse while at Pittsburgh CCC. In reviewing the PRAT tracking sheet, all reentrants that were interviewed were administered the PRAT the day of or the day after arriving to Pittsburgh CCC. Those not having the PRAT completed the next day, did have the PRAT administered within the 72 hours time frame.

Subsection (c):

BCC-ADM 008, requires the use of an objective screening tool to assess for risk of victimization. Per policy and procedure, PREA risk assessments are conducted utilizing the PREA Risk Assessment Tool (PRAT). In May 2018, PA DOC, in consultation with the PREA Resource Center revised the PRAT to address compound structure of questions in order to provide clarity to the question and update terminology to more accurately capture sexual orientation, gender identity and gender expression. Staff responsible for conducting the PRAT, PREA Compliance Managers, nurses, and psychology staff completed PRAT training reflecting those changes, as well as the purpose of the PRAT, administration of the tool, and how to use the results.

The PRAT, in both English and Spanish, were 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?

Subsection (D) :

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

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

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.

The Corrections Counselor interviewed confirmed topics and content of the PRAT.

Subsection (F) and (g):

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training dictates that reentrants are reassessed for risk of being sexually abused by other reentrants or sexually abusive toward other reentrants between 20-30 days after initial reception, within five working days following an incident or allegation of sexual abuse or sexual harassment, or when warranted due to referral, request, or receipt of information that influences the reentrant's risk of sexual victimization or abusiveness. In reviewing the Pittsburgh CCC PRAT Tracking Form, reassessments are completed within 20-30 days of initial reception.

The Corrections Counselor confirmed that reentrants are reassessed within 30 days of admission. Reentrant interviews indicated that most reentrants recalled having been asked the PRAT questions a second time while at Pittsburgh CCC. The PRAT tracking sheet was reviewed and showed that all of the reentrants interviewed had been reassessed within 30 days of admission.

Subsection (h):

BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training prohibits reentrants from being disciplined for refusing to answer or for not disclosing complete information in response to questions during the PRAT administration. This was emphasized during staff training in May 2018. Prior to beginning the PRAT, staff administering the tool reads a paragraph to the reentrant emphasizing the

importance of the PRAT, confidentiality and " you may share as much or as little information as you feel comfortable providing.....You will not be penalized in any way if you choose not to provide any information." The practice of not disciplining reentrants for refusing to answer a question or disclose completely was confirmed with the Corrections Counselors.

Subsection (I):

Policy states that PRAT information and scores shall only be made available to designated staff and shall never be shared with other reentrants. This requirement is supported in both the PRAT user guide and the PRAT training power point from May 2018. Staff are trained not to discuss PRAT information with anyone, including the reentrant, except to the extent necessary to make a report of sexual abuse and inform housing, bed, work, and programming assignments. PRAT assessments are conducted in and scores are housed in the WebTAS System.

Interviews with the Corrections Counselor and the PREA Coordinator confirmed that the PRAT is completed in an on line database and that PRAT scores are not available to staff or reentrants. Once a PRAT is completed, the only information available is the date the PRAT was administered and if the scores indicate higher risk for being a victim or abuser of sexual abuse. Only the PREA Compliance Manager and the Corrections Counselor have access to the results of the PRAT but not the actual assessment.

Corrective Action: None

115.242	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2- Prevention and Training  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 9 - Working with Transgender/Intersex Reentrants</li> <li>3. Documents  PRAT Training Power Point  PRAT User Guide  Pittsburgh CCC PRAT Tracking Form  Gender Review Committee (GRC) Checklist  Gender Review Reassessment Checklist</li> <li>4. Interviews  Staff  PREA Coordinator</li> <li>5. Tour of Facility</li> </ol> <p>Findings:</p> <p>Subsection (a) and (b):  Per BCC-ADM 008, Bureau of Community Corrections PREA Manual Section - 2 Prevention and Training, the information received through the administration of the PRAT is used to make individualized determinations regarding housing, work, education and program assignments to ensure the sexual safety of reentrants by keeping separate reentrants who are at high risk of being sexually victimized from reentrants who are at high risk of being sexually abusive. This requirement is reiterated in the PRAT User Guide, page 15-18 which details the application of the PRAT score in decision making. Additionally, staff are trained to apply the PRAT scores in reentrant housing, work, education, and program assignments as evidenced by the review of the PRAT Training PowerPoint. The PRAT Scores are maintained on the Pittsburgh CCC PRAT Tracking Form. In addition to ensuring that the PRAT is administered timely, the form also notes when a reentrant scores as a higher risk of being a sexual abuser and higher risk of being a sexual victim.</p> <p>According to interviews of staff at Pittsburgh CCC, PRAT scoring information is used for bed assignments and ensuring that reentrants scoring higher risk for abusers and higher risk for victimization are assigned different bedrooms. Additionally, reentrants would not be allowed to work or complete community services together,</p>

Subsection (c) and (d):

According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 9 - Working with Transgender/Intersex Reentrants, in deciding whether to assign a transgender/intersex reentrant to a facility for male or female reentrants, and in making other housing and programming assignments, the Bureau of Community Corrections (BCC) shall consider, on a case-by-case basis, whether a placement would ensure the reentrant's personal health and safety, other reentrants' health and safety, and whether the placement would present management or security problems. When making the housing and programming assignments, the reentrant's own views regarding their own safety is given serious consideration. This process is reiterated in the PRAT User Guide and staff were trained on this topic in May 2018 during the PRAT Training.

According to policy, when a reentrant is identified as transgender or intersex, the facility PREA Compliance Manager (PCM) meets with the reentrant within the next business day to discuss appropriate accommodations. This meeting is documented using the Gender Review Committee (GRC) Checklist which is signed by both the PCM and the reentrant. The reentrant is given the opportunity to discuss safety and security concerns with the current housing placement and agree or disagree with the housing recommendation.

At this time, there is not a transgender reentrant assigned to Pittsburgh CCC and the GRC process has not been utilized.

Subsection (e):

According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 9- Working with Transgender/Intersex Reentrants and confirmed by Pittsburgh CCC staff, transgender and intersex reentrants are given the opportunity to shower separately from other reentrants. Reentrants at Pittsburgh CCC have the ability shower separately from other reentrants. Pittsburgh CCC has six individual bathrooms with doors and showers that are partitioned and covered with a curtain. In addition to the door and shower curtain, another black curtain is installed immediately behind the door, so if someone does open the door, the black curtain will provide privacy. Further, a single room with attached bathroom is available to reentrants to ensure additional privacy. This is typically used as the "honors room" but available for safety purposes.

Subsection (f):

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2- Prevention and Training Section N reads: "The Department shall not place LGBTI reentrants in dedicated facilities, units or wings solely on the basis of such identification or status, unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such reentrants."

Pennsylvania DOC does not place reentrants identifying as lesbian, gay, bisexual, transgendered or intersex (LGBTI) in dedicated facilities or housing units. The PREA Coordinator confirmed that there are not dedicated facilities or housing units in PA DOC for LGBTI identified reentrants and inmates. Every facility can house LGBTI reentrants and inmates, however, DOC has identified five of the Secure Correctional Institutions that do not have the capability to allow inmates to shower individually or privately, resulting in LGBTI identified inmates being placed in other institutions.

	Corrective Action: None
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115.251	<b>Resident reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 1 - Grievance Reporting  BCC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 2 - Grievance Processing and Response  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment</li>   <li>3. Documents  PREA Notice  PREA Reentrant Intake Handout - English and Spanish  Zero Tolerance Fact Sheet Daily PREA Announcement  DC-904A Official Resident Grievance form  DC-904B Facility Grievance Response form  PA DOC Public Website  PA DOC Public Website screenshot  2017 PREA Basic Training PowerPoint slides  PREA 2018 Essentials</li>   <li>4. Interviews  Pennsylvania State Police (PSP)</li>   <li>5. Tour of Facility</li> </ol> <p>Findings:</p> <p>Subsection (a) and (b):  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment allows for a report, complaint, or allegation of sexual abuse, sexual harassment or retaliation for reporting sexual abuse and/or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents can be reported verbally, in writing, anonymously, or by third party. BCC-ADM 008 further states that a reentrant may privately report to the following: any staff member, the Facility Director/designee, the facility PREA Compliance Manager (PCM), or the Department PREA Coordinator, or to the third party reporting. Per BCC-ADM 008, staff, volunteers, contractors, reentrants, family, friends, and the general public may make a private written report to the Pennsylvania State Police, a third party, not part of or contracted with the Department.</p> <p>Reentrants are provided these reporting options through various mean. Upon intake</p>



reentrants receive the PREA Reentrant Intake Handout which outlines five ways in which a reentrant can report sexual abuse or sexual harassment: tell any staff member to immediately report the incident, tell any supervisor or manager to immediately report the incident, make a written request to any staff member, supervisor, or manager, send a written report to the third party reporting address established with the Pennsylvania State Police (PSP) at the address provided on the handout, and have your family call to notify the facility or contact PSP. Additionally, PREA Notices are posted throughout the facility which provide reentrants with methods of reporting and include verbal report to any staff member, written report to any staff member or written report to BCI/PREA Coordinator at the address provided. Further, daily on each shift, a Daily PREA Announcement is read over the overhead announcement system and advises reentrants they may report sexual abuse and sexual harassment by contacting the nearest non-involved staff or reporting the incident directly to PSP. Reentrants are directed to the posters located near the reentrant telephones for the PSP contact information. Finally, methods of reporting abuse can be found on the PA DOC public website.

If a reentrant files a grievance regarding an allegation of sexual harassment or sexual abuse by a staff or other reentrant, the grievance will not be addressed through the Resident Grievance System, but the Grievance Officer will be immediately notify the Bureau of Community Corrections Management Operations Center (BCC-MOC) verbally and then complete the First Responder duties. The Grievance Office will not investigate the incident unless directed to do so by BCC-MOC. The grievance will be rejected and notice provided to the reentrant using the DC-904B Facility Grievance Response. The checkbox on the form states: "Your grievance is based on an allegation of sexual abuse, sexual harassment or physical abuse and is rejected". It further clarifies that the allegation has been forwarded to the BCC Security Division for investigation. The incident will be investigated by a trained PREA Investigator assigned through BCC-MOC.

Reentrants interviewed for the audit reported being able to report sexual abuse and sexual harassment to a staff at Pittsburgh CCC, specifically their counselor or a monitor that is not involved in the incident. Over half of the reentrants also talked about the 1-800 phone number or PREA Hotline. Pittsburgh CCC does not offer a phone number for reentrants to report sexual abuse and sexual harassment. However, an inmate abuse hotline phone number is posted by the public phones. This phone number was called during the on site visit. This is a recorded line to report excessive force or oral or written threats of violence as it relates to DC-001 Excessive Force. PREA is not mentioned in the recording. If a PREA incident is reported, it is forwarded to BCC-MOC. Prior to the auditors leaving the facility, the acting Facility Director removed these notices from display.

Pittsburgh CCC staff were able to report several ways in which a reentrants could report sexual abuse and sexual harassment including telling staff at the facility or contacting Pennsylvania State Police.

In May 21, 2018, this writer mailed a letter to the Pennsylvania State Police (PSP), using the address provided to reentrants, staff and the public. A phone response was received on June 4, 2018. Through the phone conversation, confirmation was received by this auditor that letters are received by the PSP, Bureau of Criminal Investigations. Any PREA related letters are immediately scanned and sent to the PA DOC PREA Coordinator. PSP does not investigation PREA complaints at this time.

Subsection (c):

BCC-ADM 008 requires employees to accept reports made verbally, in writing, anonymously and from a third party. When the employee receives a report, the employee must promptly document the report using a DC-121 Bureau of Community Correction Employee Report of Incident and immediately notify the Facility Director or designee.

The PowerPoint slides for the 2017 Basic PREA training and the PREA 2018 Essentials training indicate that staff are trained to accept reports of sexual abuse and sexual harassment directly from reentrants verbally and in writing, by a third party such as another reentrant or inmate, family, or friend of the reentrant, and from reports received anonymously or where a victim is not named. DOC staff are trained to immediately document and report every allegation or suspicion of sexual abuse.

All staff interviewed were aware of their responsibility to accept reports of sexual abuse and sexual harassment and immediately forward the information either to the PREA Compliance Manager or Security Lieutenant or to BCC-MOC after hours. Additionally, staff acknowledged the requirement to document the incident, many citing the DC-121 as the specific form to complete.

Subsection (d):

Per BCC-ADM 008, staff may privately report reentrant sexual abuse and sexual harassment incidents by writing a letter to PSP. 2017 Basic PREA Training indicate that DOC are trained in their requirement to report any PREA related activity or any staff neglected or violations of responsibilities that may have contributed to an incident. Staff may report privately by writing to PSP or by reporting verbally or in writing to the PREA Compliance Manager or PREA Coordinator. Additionally, PREA Notices posted at Pittsburgh CCC also provide methods of reporting for staff and include verbal or written to the PREA Compliance Manager or in writing to PSP at the provided address.

Staff interviewed were aware of several ways staff could report sexual abuse and sexual harassment, incidents of retaliation, or violations of staff responsibilities leading to an incident of sexual abuse or sexual harassment. Staff specifically noted talking with the Security Lieutenant, Facility Director, BCC-MOC, or Pennsylvania State Police.

Corrective Action: None

115.252	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures  BCC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 1 - Grievance Reporting  BCC-ADM 003, Community Corrections Resident Grievances Procedures Manual Section 2 - Grievance Processing and Response  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3</li> <li>3. Documents  DC-904A Official Resident Grievance  DC-904B Facility Grievance Response  Request to OSII - Case Review dated July 18, 2017</li> <li>4. Interviews</li> </ol> <p>Findings:</p> <p>According to Department policy BCC-ADM 003, every resident in community corrections has access to a formal procedure in which to seek resolution for a problem or area of concern. For every issue, there is a procedure in place to review the problem or concern and provides a process for appeal. According to BCC-ADM 003, Section 1, Section 2, and Section 3, Community Corrections Resident Grievances Policy and Procedures Manual, if a grievance is submitted which alleges sexual abuse or sexual harassment by a staff or resident, the allegation will not be addressed through the Resident Grievance System, but the Grievance Officer will reject the grievance and immediately and verbally refer the allegation to the Bureau of Community Corrections - Management Operations Center (BCC-MOC). The Grievance Officer is prohibited from investigating the PREA complaint, unless directed to do so by BCC-MOC. The Grievance Officer subsequently provides notice to the reentrant that the grievance was rejected. All rejections are documented.</p> <p>A request to OSII - Case Review and supporting documents totaling 26 pages was submitted and reviewed. The incident occurred in 2017 at Scranton CCC and demonstrates the process in which a reentrant filed a grievance which alleging sexual abuse or sexual harassment. On June 26, 2017, the reentrant completed an Official Resident Grievance form. On the same date, the acting facility Director forwarded the grievance to BCC-MOC for investigation by a trained PREA Investigator.</p> <p>At no time during the interviews with staff and reentrants did anyone indicate they would report sexual abuse and sexual harassment utilizing the grievance process. There are no identified reentrants at Pittsburgh CCC who reported sexual abuse or sexual harassment while in a confined setting and therefore, no reentrant was interviewed specifically for that purpose.</p>

	Corrective Action: None
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115.253	<b>Resident access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse</li>   <li>3. Documents  PREA Reentrant Intake Handout - English and Spanish  If you are the Reported Victim of Sexual Abuse services offered  Photographs of posted "If you are the Reported Victim of Sexual Abuse" notification (6)  Pittsburgh Action Against Rape, rape crisis center brochure  PREA Report - Sexual Abuse blank form  Letter of Agreement between DOC and Crime Victims Center dated June 28, 2014  Letter of Agreement between DOC an Center for Victims dated February 21, 2019</li>   <li>4. Interviews  Facility Director  Vice President/Chief Program Officer Center for Victims</li>   <li>5. Tour of Facility</li> </ol> <p>Findings:</p> <p>Subsection (a):  According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse, it is the responsibility of the PREA Compliance Manager to ensure that alleged victims are offered and provided with access to outside victim advocates for emotional supportive services related to sexual abuse which occurred in a confinement setting. The preferred method of service delivery is in person in a confidential setting. Per policy, the notice "If you are the Reported Victim of Sexual Abuse" containing the address and phone number of local services shall be laminated and posted. According to pictures submitted during the Pre-Audit and the tour of the facility, these signs are posted and include the address and website of PCAR (Pennsylvania Coalition of Against Rape). PAAR support services, Center for Victims, and other victim service agencies are also posted in the facility common areas. At the time of intake, reentrants are given the PREA Reentrant Intake Handout which provides contact information for the Pennsylvania Coalition of Against Rape (PCAR) for victim services and instructs reentrants that they may contact the PCM to arrange services through the local rape crisis center.</p> <p>When an incident of sexual abuse is reported, reentrants are offered counseling and advocacy referrals by the PCM. This is documented on the "If you are the Reported Victim of Sexual Abuse" completed and signed by the reentrant and PCM and noted on the PREA Report -</p>

Sexual Abuse. Reentrants at Pittsburgh CCC have access to support and advocacy services through Pittsburgh Action Against Rape (PAAR) and the Pennsylvania Coalition Against Rape (PCAR).

Support services for reentrants at Pittsburgh CCC are available in the community. Most reentrants have their own cell phones and are routinely in the community rather than in the facility. Reentrants may access support services by phone or in person on their own.

Subsection (b):

When an allegation of sexual abuse is reported and the reentrant is offered services using the "If you are the Reported Victim of Sexual Abuse" form, the staff or the reentrant can initiate services using the hotline number for Center for Victims. Each time services are obtained from the Center for Victims, the staff at the Center for Victims reviews the standard confidentiality and limits of confidentiality with each client. It is done verbally over the phone or in writing if the services are provided in person.

Subsection (c):

According to BCC-ADM 008 Section 4, the PCM is responsible for coordinating victim services for the facility and working with PCAR to establish a Letter of Agreement or other documented agreement for the coordination of services. On June 28, 2014, a Letter of Agreement was signed between the Department of Corrections and the Crime Victims Center to provide confidential support services for sexual abuse victims. This letter was signed by the DOC Secretary and the Executive Director of Crime Victims Center and specifically named SCI-Pittsburgh. On February 21, 2019, the PCM of the Pittsburgh CCC initiated an updated Letter of Agreement between Pittsburgh CCC and the Center for Victims, reflecting the agency's name change and specifically naming Pittsburgh CCC in the Letter of Agreement. The interview with the Vice President/Chief Program Officer, the formal relationship between agencies has been in existence since the signing of the original Letter of Agreement signed in 2014.

Corrective Action: None

115.254	<b>Third party reporting</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment</li> <li>3. Documents PREA Reentrant Intake Handout - English and Spanish If you are the Reported Victim of Sexual Abuse services offered PA DOC website and screenshot of website PREA Notice - English and Spanish</li> <li>4. Interviews Random Staff Random Reentrants Pennsylvania State Police interview June 11, 2018</li> </ol> <p>Findings:</p> <p>According to BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment, anyone can make a private report of an allegation of sexual abuse or sexual harassment on behalf of a reentrant. The method stated in section 3 and posted on the PA DOC public website is to write a letter to the Pennsylvania State Police at the listed address. This method of reporting is also provided to reentrants on the PREA Reentrant Intake Handout and the PREA notice posted throughout the facility. Additionally, staff are trained in this method of reporting as an option for both staff and reentrants to utilize.</p> <p>On May 21, 2018, for PREA auditing purposes, this writer sent a letter to the Pennsylvania State Police (PSP) using the third party address provided to staff and reentrants. On June 4, 2018, this writer received a call from the PSP Bureau of Criminal Investigations and subsequently interviewed the caller . The PSP staff confirmed that PSP is the third party reporter and all reports received are immediately scanned and emailed to the Pennsylvania DOC PREA Coordinator for investigation. PSP does not investigate these incidents at this time.</p> <p>Interviews with staff and reentrants consistently confirmed PSP as a third party to receive reports of sexual abuse and sexual harassment.</p> <p>Corrective Action: None</p>

115.261	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment</li>   <li>3. Documents  PREA Report - Sexual Abuse - blank form  PREA Report - Harassment - blank form  BCC First Responder Checklist  DC-121 Employee Report of Incident</li>   <li>4. Interviews  Random Staff  PREA Coordinator  Facility Director  PREA Investigators</li> </ol> <p>Findings:</p> <p>Subsection (a):  According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment, all staff, contractors, and volunteers shall immediately report to the Facility Director or designee any knowledge, suspicion, or information regarding alleged incident of sexual abuse or sexual harassment that occurred in any facility, retaliation against reentrants or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This information is required to be documented on a DC-121.</p> <p>During the Pre-Audit, examples of forms were submitted, as well as the one DC-121 which was generated from Pittsburgh CCC during the last 12 months.</p> <p>According to BCC-ADM 008, in instances of sexual abuse, staff acting as first responders should follow the BCC First Responder Checklist. In this instance, safety of the victim and security of the scene takes precedence and then notification to the Center Director or designee followed by written documentation on the DC-121.</p> <p>All staff interviewed acknowledged the requirement to report knowledge, information, or suspicion of sexual abuse or sexual harassment, retaliation against those who have reported such incidents, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment. All staff would immediately report to the Security Lieutenant or Facility Director and if after hours, staff would contact BCC-MOC for</p>



reporting and further direction.

Subsection (b):

Additionally, BCC-ADM 008 forbids anyone from revealing any information related to a sexual abuse report to anyone except those specified in the procedures manual, to make treatment decision, investigation, or other security and management decisions. Staff interviewed indicated they would not tell anyone else of the incident unless necessary to fulfill first responder duties to separate and protect the alleged victim from the alleged abuser.

Subsection (c):

Further, BCC-ADM 008 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 precluded by federal, state, or local law.

Subsection (d):

Although Pittsburgh CCC does not house anyone under 18 years old, BCC ADM 008 addresses victims under the age of 18 and considers them vulnerable adults under the Vulnerable Persons statute. Facilities housing reentrants under the age of 18 year old are required to report the allegation to the designated state or local services agency under applicable mandatory reporting laws. The PREA Coordinator stated that the staff who receive the sexual abuse report notifies Child Line who sends an investigator from the Children and Family Agency to investigate.

Subsection (e):

According to BCC-008 and confirmed by DOC staff, all allegations of sexual abuse and sexual harassment are verbally reported to BCC-MOC for investigation.

Corrective Action: None

115.262	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment</li> <li>3. Documents BCC First Responder Checklist</li> <li>4. Interviews Agency Head Random Staff</li> </ol> <p>Findings:</p> <p>According to BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment, when an employee learns that a reentrant is subject to substantial risk of imminent sexual abuse, the employee is required to take immediate action to protect the reentrant and verbally contact the Facility Director or designee for further direction. Additionally, the employee is required to complete the DC-121 Incident Report. In the past 12 months, there have not been any reports at Pittsburgh CCC that a resident was subject to a substantial risk of imminent sexual abuse.</p> <p>The Agency Head was interviewed on October 26, 2018. During the interview he stated we (staff) would take immediate action to ensure the victim is separated from any threats. Consistent with the Agency Head, staff from Pittsburgh CCC overwhelmingly indicated they would move the reentrant who is at risk from the potential abuser to a safe location. They would immediately notify the Security Lieutenant or Facility Director or if after hours, contact BCC-MOC. Staff would follow up with a written report utilizing the DC-121.</p> <p>Corrective Action: None</p>

115.263	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 3 - Reporting Sexual Abuse and Sexual Harassment</li> <li>3. Documents  PREA Report - Sexual Abuse  Email from outside agency and DOC regarding alleged incident</li> <li>4. Interviews  Agency Head  Facility Director</li> </ol> <p>Findings:</p> <p>Subsection (a) and (b):  BCC-ADM 008 requires the Facility Director or designee to document any reports that a reentrant was sexually abused while confined at another facility utilizing the DC-121, Part 3-BCC and verbally notify BCC-MOC. BCC-MOC prepares the PREA Report - Sexual Abuse confidential report and electronically sends the report to the affected facility. The Bureau Director is responsible for contacting the Facility Director of the affected facility within 72 hours of the report to coordinate any immediate actions that may need to take place.</p> <p>Pittsburgh CCC had one report during the past 12 months in which it was discovered that a reentrant was the victim of sexual abuse while confined in another facility. The Facility Director confirmed the above notification and documentation process was followed. A copy of an email attached in the Pre-Audit Questionnaire was reviewed and confirmed the process and time frame of reporting.</p> <p>The agency head, confirmed there is a notification process in place that is documented and tracked.</p> <p>Subsection (c):  BCC-ADM 008 requires the PCM to maintain the PREA Report - Sexual Abuse and any electronic correspondence associated with its transmission in an electronic file.</p> <p>Subsection (d):</p>

According to BCC-ADM 008 and staff interviews, any allegation of sexual abuse or sexual harassment shall be reported to BCC-MOC. All incidents referred to BCC-MOC are immediately assigned a number and investigated. The reported incident at Pittsburgh CCC was reported and thoroughly investigated.

Corrective Action: None

115.264	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse</li> <li>3. Documents Bureau of Community Corrections (BCC) First Responder Checklist Bureau of Community Corrections PREA- Report Sexual Abuse If you are the Reported Victim of Sexual Abuse</li> <li>4. Interviews Facility Director First Responder Staff Random Reentrants</li> </ol> <p>Findings:</p> <p>Subsection (a): First Responder duties are outlined in BCC-ADM 008 Section 4 and requires staff, upon learning of an allegation that a reentrant was sexually abused should escort the alleged victim to a safe location away from others and preserve and protect any possible crime scene as outlined in Department policy 8.3.1 "Community Corrections Security", Section 24. If the incident occurred within 96 hours of the allegation being learned, the responding staff is required to request the alleged victim not take any actions that could destroy physical evidence as appropriate such as washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating. Further, BCC-ADM 008 requires first responder staff to contact BCC-MOC and follow direction provided. The BCC-MOC will assess the situation and advise if it is appropriate to ensure preservation of physical evidence contained on the alleged abuser.</p> <p>To assist staff in first responder duties, Immediate Response Pocket Cards are provided to staff which outline first responder and PREA Compliance Manager duties when an incident of sexual abuse occurs. The BCC First Responder Checklist is also available to staff and includes:</p> <ol style="list-style-type: none"> <li>A. Get the alleged victim to a safe location <ul style="list-style-type: none"> <li>- advise the victim that he/she should not shower or otherwise clean him/herself or if the assault was oral not to drink or brush his/her teeth, or otherwise take any action that could damage or destroy evidence</li> <li>- Keep the victim separated from others</li> <li>- Notify Center Director/designee</li> <li>- Secure the crime scene.</li> </ul> </li> </ol>

Additionally, the PREA Report includes a checklist ensuring the victim is in a safe location, separated from the abuser and the crime scene is secure. A blank and completed PREA Report were submitted for review. According to the Facility Director, Pittsburgh CCC has had one incident of sexual abuse which occurred in June 2018. This incident occurred at another facility but did not become known until the reentrant was transferred to Pittsburgh CCC. The completed PREA Report indicated the incident became known when a Community Corrections Center Monitor (CCCM) became aware of the incident. The CCCM did ensure the safety of the alleged victim and notifications were made.

All CCCMs also serve the role of First Responder. Staff articulated steps they would take if responding to an incident of sexual abuse. Staff indicated they would separate the alleged victim and alleged abuser and ensure safety of the victim. Staff stated they would secure the crime scene and would request the alleged victim and alleged abuser not shower, use the bathroom, eat, drink, or smoke. They would also immediately notify the Security Lieutenant or Facility Director or, if after hours, would notify BCC-MOC and follow the provided direction.

Subsection (b):

Policy BCC-ADM 008 also states that if a first responder is not security staff, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff. In the past twelve months, there has not been a sexual abuse incident in which the first responder was not security staff. However, two non-security staff who have the potential to act as first responders, were interviewed and indicated that they would separate the alleged victim and alleged abuser, ensure the victim was safe, and request the victim to not do anything that would destroy evidence. They would then make the necessary notifications to the Center Director or BCC-MOC.

Corrective Action: None

115.265	<b>Coordinated response</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse</li> <li>3. Documents 2019 Pittsburgh CCC Local Institution Plan - PREA Coordinated Response</li> <li>4. Interviews Facility Director</li> </ol> <p>Findings:</p> <p>Policy BCC-ADM 008 requires each facility to develop a written facility plan to coordinate actions taken in response to an incident of sexual abuse. The plan must include responsibilities of staff first responders, medical and mental heal providers, investigators, and facility leadership.</p> <p>A copy of the 2019 Local Institutional Plan for PREA Coordinated Response dated January 4, 2019 was submitted for review. This includes first responder duties, such as making proper notification, separating the alleged victim and alleged abuser, securing the crime scene, requesting the alleged victim and alleged abuser not shower, brush teeth, urinate, defecate, change clothing or do anything that would destroy evidence, and documenting the incident. The Facility Director is responsible for ensuring security staff and first responder staff have fulfilled their responsibilities. Additionally the Facility Director is to ensure all physical evidence is secure, First Responder Checklist is completed, the victim is offered medical and mental health services and if accepted, transported to the Magee Womens Hospital, and Law Enforcement notifications are made. Emergency medical treatment services and mental health treatment services are provided at the Magee Women's Hospital UPMC and crisis intervention and advocacy is provided through Center for Victims.</p> <p>The Facility Director confirmed there is a plan in place which includes assurances that the people involved in the incident is safe, evidence is not tampered with, notifications are made, and the alleged victim receives medical care.</p> <p>Corrective Action: None</p>

115.266	<b>Preservation of ability to protect residents from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures       <ol style="list-style-type: none"> <li>8.3.1, Bureau of Community Correction Security Procedures Manual Section 35 - Investigations           <ol style="list-style-type: none"> <li>4.1.1, Human Resources and Labor Relation 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</li> </ol> </li> </ol> </li>   <li>3. Documents       <ul style="list-style-type: none"> <li>FOSCEP Collective Bargaining Agreement</li> <li>AFSCME - 1st Level Supervisor of H1 MOU 2017-2020 signed April 10, 18</li> <li>CIVA Agreement</li> <li>AFSCME Mater Agreement July 1, 2016 to June 30, 2019</li> <li>Memo from Agency Secretary to Human Resources dated February 15, 2015</li> <li>PSCOA Act 195 Interest Arbitration Award</li> <li>Memo to 2015 PREA Auditor from Director of Human Resources dated January 13, 2015</li> <li>Memo from Secretary to Superintendents, Bureau Directors, and Regional Directors dated January 12, 2015</li> <li>MOU Between the commonwealth of Pennsylvania and OPEIU Healthcare Pennsylvania, Local 112 dated July 1, 2016 to June 30, 2019</li> <li>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</li> <li>Agreement Between Commonwealth of Pennsylvania Agreement Between Commonwealth of Pennsylvania and SEIU Local 668 dated July 1, 2016 to June 30, 2019</li> <li>Agreement Between Commonwealth of Pennsylvania Agreement Between Commonwealth of Pennsylvania and the Service Employees International Union, Healthcare Pennsylvania, CTW, CLC dated July 1, 2016 to June 30, 2019</li> </ul> </li>   <li>4. Interviews       <ul style="list-style-type: none"> <li>Agency Head</li> </ul> </li> </ol> <p>Findings:</p> <p>Subsection (a)and (b):</p> <p>According to 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35, based on the seriousness of the allegation, an accused staff member, contract service provider, volunteer, intern, or an individual who has business with or uses resources of the Department my be suspended or otherwise removed from contact with offenders (reentrants) pending the outcome of the investigation. This is in accordance with Human Resources and Labor Relations Policy 4.1.1 which allows for employees to be suspended pending an</p>



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.

According to a letter dated January 13, 2015 from the Director of Human Resources to the PREA Auditor, the PA DOC operates within the confines 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 PA DOC 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.

Eight collective bargaining agreements were submitted and reviewed. None of the agreements limited the Department's ability to remove alleged staff sexual abusers from contact with reentrants/inmates or patients pending the outcome of an investigation or of a determination of whether, to what extent discipline is warranted, disciplinary process inconsistent with PREA standards, or 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. Additionally, the PSCOA Interest Arbitration specifically removes the requirement previously cited in Article 33 Section 20 in which the Commonwealth furnish 24 hours advance written notification if an inmate or patient alleges conduct falling under the Prison Rape Elimination Act of 2003.

The interview with the Agency Head on October 26, 2018 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/inmates pending the investigation or a determination of whether and to what extent discipline is warranted.

Corrective Action: None

115.267	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring</li> <li>3. Documents If You Are the Reported Victim Of Sexual Abuse form Bureau of Community Corrections Retaliation Monitoring Form</li> <li>4. Interviews Agency Head Facility Director/PREA Compliance Manager Random Staff Random Reentrants</li> </ol> <p>Findings:</p> <p>Subsection (a): Policy BCC-ADM 008, the Department shall protect all reentrants and staff who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations from retaliation by other reentrants or staff. Policy assigns this responsibility to the PREA Compliance Manager.</p> <p>The Facility Director confirmed during an interview that he also serves as the PREA Compliance Manager and is responsible for retaliation monitoring.</p> <p>All of the reentrants interviewed were aware of their right not to be retaliated against for reporting sexual abuse or sexual harassment. Additionally, the staff interviewed were aware of their responsibility to report any incidents of retaliation when they became aware of such an incident.</p> <p>Subsection (b): Policy outlines actions that may be taken to ensure reentrants and staff are protected from retaliation. Actions include: administrative or criminal investigation, housing changes for the alleged victim or alleged abuser, removal of alleged abusers from contact with alleged victims, and/or emotional support for reentrants and staff.</p> <p>The Agency Head and the Facility Director both acknowledged the Zero Tolerance Policy for retaliation and mechanisms in place to monitor. According to the Facility Director, he ensures reentrants are aware of the policy and how to report should retaliation occur. The PCM and the counselors participate in the monitoring. Reentrants are checked in with regularly and</p>

observed for changes in behavior, personality, and isolation. If retaliation does occur it will be investigated and handled appropriately. If there is retaliation, Pittsburgh CCC has the ability to move the alleged abuser to another facility in the region to keep reentrants and staff safe.

Subsection (c):

BCC-ADM 008 requires retaliation monitoring for at least 90 days or longer if necessary following a report of sexual abuse. When retaliation is suspected, the PCM is required to immediately notify the Regional Director or designee so that appropriate steps can be taken to protect the individual and remedy any such retaliation.

When a reentrant reports being a victim of sexual abuse, the reentrant is provided information which includes notification that the reentrant will be monitored for a minimum of 90 days following the sexual abuse report to ensure the reentrant is free from retaliation and receiving requested services. Retaliation monitoring is documented on a form called the Bureau of Community Corrections Retaliation Monitoring. The staff responsible for retaliation monitoring completes a section of the form when contact is made with the reentrant and includes the date of check in, review of Disciplinary Report, evaluations, programming, housing or staff work reassignment and reported or observed negative interactions. The form is required to be completed for 90 days with the possibility of extension. Upon completion of the form, it is maintained by the PREA Compliance Manager.

The Agency Head and the Facility Director both confirmed that retaliation monitoring occurs for a minimum of 90 days. The Facility Director related that in the most recent incident, the reentrant was monitored during the time she was at Pittsburgh CCC, however she was transferred to another facility shortly after the allegation.

According to the Pre-Audit Questionnaire, no incidents of retaliation has occurred within the last 12 months. This was substantiated by the Facility Director.

Subsection (d):

According to policy, staff monitoring for retaliation meet with the reentrant bi-weekly to discuss the progress. According to the Facility Director, he, along with the assigned Corrections Counselor meets with the reentrant to discuss retaliation and check in with reentrants specifically to address concerns and safety.

Subsection (e):

Policy specifies who shall be monitored following a report of sexual abuse and includes the reentrant who reports sexual abuse, the reentrant who suffers the reported sexual abuse, staff who report sexual abuse, and any other individual who cooperates with sexual abuse or sexual harassment investigation and expresses a fear of retaliation. When retaliation is suspected, notification will immediately be made and action taken to protect the individual and remedy the retaliation.

Subsection (f):

Per BCC-ADM 008, if the allegation is unfounded, the facility's obligation to monitor will terminate.

Corrective Action: None



115.271	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures       <ul style="list-style-type: none"> <li>8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 - Prevention and Training</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring</li> </ul> </li> <li>3. Documents       <ul style="list-style-type: none"> <li>Completed PREA Sexual Abuse Investigative Packet Investigation File</li> </ul> </li> <li>4. Interviews       <ul style="list-style-type: none"> <li>PREA Investigators</li> </ul> </li> <li>5. Tour of Facility</li> </ol> <p>Findings:</p> <p>Subsection (a):        BCC-ADM 008 requires every reported incident or allegation of sexual abuse and sexual harassment be investigated promptly, thoroughly, objectively, and a confidential report compiled. According to investigative staff interviewed, all allegations of sexual abuse and sexual harassment are investigated thoroughly, including third party and anonymous reports. Staff are required to report any incidents or knowledge of sexual assault and sexual harassment to BCC-MOC. MOC immediately assigns an investigator to begin the investigation.</p> <p>Subsection (b):        According to policy 8.3.01 Section 35 - Investigations, PREA related administrative investigations are conducted by staff trained in accordance with BCC-ADM 008. BCC-ADM Section 2 - Prevention and Training requires employees who conduct sexual abuse investigations receive specialized training specific to confinement settings. Training includes interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate an allegation for administrative actions or prosecution. The investigators interviewed completed all PREA training as required by the Department of Corrections in addition to the specialized investigator training. This claim was corroborated in a review of the</p>

training records submitted for all of the PREA investigators.

Subsection (c):

Policy 8.3.1 requires investigators to:

- a. gather and/or preserve direct and circumstantial evidence, including any available physical and DNA evidence, and any available electronic monitoring data;
- b. interview alleged victim, suspected abusers, and witnesses;
- c. review prior complaints and reports of sexual abuse involving the suspected abuser.

According to the investigators interviewed, an investigation includes a review of all of the evidence, including DNA evidence, video evidence, log books, pictures, text messages, paperwork, interviews and statements from alleged victims, abusers, and witnesses. The investigation file and the investigative report submitted with the Pre-Audit Questionnaire, revealed the investigator reviewed various pieces of evidence, including text messages and pictures sent via text, and interviews with the alleged victim and witness. DNA evidence was not available and the alleged abuser could not be located for an interview.

Subsection (d):

According to policy 8.3.1, if during an administrative investigation the evidence appears to support criminal prosecution, the investigation shall stop and the Bureau Major or designee will be notified and further direction given. Compelled interviews are not conducted by BCC Investigators. The administrative investigation is placed on hold until the conclusion of the criminal investigation. According to interviews with investigative staff, any allegation appearing criminal in nature is referred to Pennsylvania State Police (PSP). PSP works with the prosecutor to determine the appropriateness of criminal charges. During the criminal investigation, the PA DOC administrative investigation is placed on hold. The investigator remains involved in the criminal case in so far as assisting with providing PA DOC evidence and information and receiving updates regarding the PSP investigation and criminal case. According to the investigation report from Pittsburgh CCC, the initial appearance of the allegations appeared criminal in nature and were forwarded to PSP. PSP completed a review of the evidence and determined the allegations did not rise to the level of criminal. During the criminal investigation, PA DOC suspended their investigation. However, DOC attempted to maintain contact with PSP. Upon receiving notice that PSP would not be investigating further, PA DOC continued their investigation.

Subsection (e):

Policy 8.3.1 and BCC-ADM 008 states that the credibility of an alleged victim, subject, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an offender (reentrant) or staff member. An offender (reentrant) who alleges unwanted or forced sexual abuse shall not be required to submit to a polygraph examination or other truth telling device as a condition of proceeding with the investigation of such an allegation. Interviews with investigative staff confirmed that the credibility of the individual is not based on status but on the evidence. Additionally staff confirmed the use of a polygraph or other truth telling devices are not utilized as a condition of proceeding with an investigation.

Subsection (f):

Policy 8.3.1 also requires the investigation to attempt to determine if staff actions or failures to act contributed to the abuse and documented in written reports that include a description of

the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. According to the investigative staff, they look at all factors that may have contributed to incident, including staff training and staffing levels.

Upon completion of the investigation, the investigator prepares a confidential investigative report, which, according to the completed report from Pittsburgh CCC and policy 8.3.1, includes:

- a. the complainants written statement or grievances
- b. all written statements and reports for staff, witnesses, and offenders
- c. all DC-121 Part 3-BCCs related to the alleged incident
- d. all reports related to the investigative assignment and response
- e. a copy of all written statement
- f. medical reports, to include psychiatric reports
- g. police reports
- h. criminal investigative summary
- i. videos or photographs
- k. any other relevant reports or documents
- l. investigative summary.

Subsection (g):

Criminal and administrative investigations are documented in a written report. The investigator coordinates with PSP to provide and obtain evidence. Any information provided to the investigator by PSP is included in the final administrative PREA report. According to one investigator, because of the Memorandum of Understanding between PA DOC and PSP, PSP does provide their final reports to PA DOC investigators.

Subsection (h):

According to policy 8.3.1, substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. Additionally, allegations that appear criminal in nature prior to administrative investigation or an incident of sexual abuse, will be referred to PSP for criminal investigation. According to interviews, the determination of whether or not an allegation is criminal and will be referred for criminal prosecution lies with PSP.

Subsection (i):

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

Subsection (j):

Policy 8.3.1 prohibits the termination of an investigation if the alleged abuser or victim are no longer employed or under the control of the facility or agency. Interviewed investigators confirmed that investigations are not terminated if the alleged abuser or alleged victim terminates employment or leaves the facility before the investigation is complete. The BCC-MOC lead investigator indicated that PA DOC will not accept a resignation of a state employee until the investigation is completed. If the employee is a contract employee, the Department can terminated DOC clearance pending the outcome of the investigation, however, the investigation will continue. According to the investigator interview and investigation report, the

alleged abuser from the 2018 investigation was a contract employee whose employment was terminated from the contracted facility. The investigation was still referred to PSP and administratively investigated by PA DOC.

Subsection (l):

By policy 8.3.1, the BCC investigator shall endeavor to remain informed about the progress of the criminal investigation. This practice was confirmed during the investigator interviews. Additionally, the 2018 investigation report demonstrated this practice occurred during the investigation.

Corrective Action: None

<b>115.272</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures 8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35- Investigations BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 - Investigations and Retaliation Monitoring</li> <li>3. Interviews PREA Investigators</li> </ol> <p>Findings:</p> <p>According to policy 8.3.1, no standard higher than a preponderance of the evidence shall be imposed in determining whether allegations of sexual abuse or sexual harassment are substantiated. This BCC MOC lead investigator confirmed this is the standard he uses when substantiating allegations of sexual abuse or sexual harassment.</p> <p>Corrective Action: None</p>



115.273	<b>Reporting to residents</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures       <ul style="list-style-type: none"> <li>8.3.1, Bureau of Community Corrections Security Procedures Manual Section 35 - Investigations</li> <li>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 - Notification to Reentrants</li> </ul> </li>   <li>3. Documents       <ul style="list-style-type: none"> <li>PREA Investigation - Reentrant Notification blank form</li> <li>PREA Investigation - Reentrant Notification completed form</li> </ul> </li>   <li>4. Interviews       <ul style="list-style-type: none"> <li>Facility Director/PREA Compliance Manager</li> <li>PREA Investigators</li> </ul> </li> </ol> <p>Findings:</p> <p>Subsection (a):</p> <p>According to policy 8.3.1, at the conclusion of the investigation, notification to the alleged victim and abuser are made in accordance with BCC-ADM 008, Section 8 for all PREA related cases. BCC-ADM 008 outlines the notification process in Section 8, B. Following the investigation into an allegation of sexual abuse of a reentrant in a facility operated or contracted by DOC, the PREA Compliance Manager (PCM) at the facility where the reentrant is housed is responsible for informing the reentrant within five business days, in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>In an interview with Facility Director, he acknowledged that he, as the PCM, is responsible for notifying reentrants of the outcome of PREA investigation. The PREA investigators also acknowledged that reentrants are provided written notification when an investigation is completed and provided the finding of the allegations. According to the Reentrant Notification paperwork submitted from the most recent Pittsburgh CCC investigation, the alleged victim had been transferred to another Community Corrections Facility. The Facility Director of that facility provided the reentrant with the completed Reentrant Notification form, indicating a substantiated finding. Both the reentrant and Director signed the form.</p> <p>Subsection (b):</p> <p>According to BCC-ADM 008, if another agency conducts the investigation, the Bureau of Community Correction (BCC) PREA investigator requests the relevant information from the investigative agency and forwards it to the PCM, who informs the reentrant.</p>

Subsection (c) and (d):

Additionally, BCC-ADM 008 states that following a reentrant's allegation that a staff member has committed sexual abuse or sexual harassment against the reentrant, the PCM shall subsequently inform the reentrant when any of the following occur:

- a. the staff member is no longer posted within the reentrant's unit
- b. the staff member is no longer employed at the facility
- c. the agency learns the staff member has been criminally charged related to sexual abuse or sexual harassment within the facility
- d. the agency learns that the staff member has been convicted on a charge related to sexual abuse or sexual harassment within the facility.

BCC-ADM 008 further directs that following a reentrant's allegation that he or she has been sexually abused or sexually harassed by another reentrant, the PCM shall subsequently inform the alleged victim whenever:

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

In alignment with policy, the Reentrant Notification form includes a section for Staffing Update and another section for Criminal Action. The Staff Update section includes checkboxes for the above listed criteria and if the staff has been permanently restricted from the facility or all DOC and Contracted Sites, is no longer employed by the Department of Corrections, or is no longer employed by the Contract Facility. The Criminal Action section checkboxes if criminal charges have been filed against the abuser in relation to the sexual abuse report filed and abuser has been convicted of criminal charges related to the sexual abuse report filed. The most recent Reentrant Notification form completed the Staffing Update section but not Criminal Action, as no criminal action had been taken.

Subsection (e):

According to BCC-ADM 008 and in practice, all notifications and attempted notifications are documented on the PREA Investigation - Reentrant Notification forms. One blank form and one completed form was submitted in the PRE Audit Questionnaire. The Reentrant and reporting staff sign and date the form.

Corrective Action: None

115.276	<b>Disciplinary sanctions for staff</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures <ol style="list-style-type: none"> <li>4.1.1, Human Resources and Labor Relations Bulletin dated January 22, 2015</li> <li>4.1.1, Human Resources and Labor Relations Procedures Manual Section 4 - Resignations in Lieu of Discharge (RILD)</li> <li>4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 - Standardization of Pre-Disciplinary Conferences</li> </ol> </li> </ol> <p>BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 - Disciplinary and Administrative Action</p> <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, Department employees are subject to disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies in accordance with Department policy 4.1.1, Human Resources and Labor Relations.</p> <p>Subsection (b): According to policy 4.1.1 Human Resources and Labor relations, termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>Subsection (c): BCC-ADM 008 Section 7 specifically states that any Department or contract employee or volunteer who violates the Department's zero tolerance policy by engaging in, failing to report, or knowingly condoning sexual abuse or sexual harassment of a reentrant will be subject to appropriate disciplinary or administrative action. Further, policy 4.1.1 states that disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) will 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): BCC-ADM 008 states that all terminations for violations of Department sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. This is reiterated in Section 4 of the Department policy 4.1.1, which provides the procedure in which Bureau of Human Resources (BHR) notifies the Office of Special Investigations and Intelligence (OSII) to determine if a potential criminal violation exists. If the violation meets criminal standards, OSII will refer the matter to the District Attorney's office. Regardless of the outcome of the District Attorney's matter, BHR</p>

will notify any relevant licensing bodies. Additionally, in cases where an employee resigns while under investigation for violations of sexual abuse or sexual harassment policies, any settlement language will include provisions that permit the employer to report to any prospective institutional employer that the employee resigned during a pending investigation.

During the past twelve months, there have not been any allegations of sexual abuse or sexual harassment by Pittsburgh CCC staff. Pittsburgh CCC has had one incident of sexual abuse in which a reentrant was the victim of a staff from a previous contracted facility placement. That incident resulted in a referral to law enforcement prior to the administrative investigation taking place.

Corrective Action: None

115.277	Corrective action for contractors and volunteers
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 - Disciplinary and Administrative Action</li> <li>3. Documents</li> <li>4. Interviews Facility Director</li> </ol> <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, any contract employee or volunteer who engages in sexual abuse will be prohibited from contact with reentrants and will be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. An interview with the Facility Director confirmed that a contractor or volunteer who is alleged to have committed sexual abuse or sexual harassment against a reentrant would not be allowed to enter the facility or have direct contact with reentrants pending the investigation.</p> <p>Subsection (b): BCC-ADM 008 further states that if a contractor or volunteer violates BCC-ADM 008, other than by engaging in sexual abuse, the facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with reentrants.</p> <p>Corrective Action: None</p>



115.278	<b>Disciplinary sanctions for residents</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 - Disciplinary and Administrative Action DC-ADM 801 Inmate Discipline</li> <li>3. Documents Community Corrections - Universal Set of Rules</li> <li>4. Interviews Facility Director</li> </ol> <p>Findings:</p> <p>Subsection (a): According to BCC-ADM 008, reentrants will be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the reentrant engaged in reentrant-on-reentrant sexual abuse, reentrant-on-reentrant sexual harassment, or following a criminal finding of guilt for reentrant-on-reentrant sexual abuse.</p> <p>This policy is reflected in the Community Corrections - Universal Set of Rules which reentrants are expected to follow. Reentrants initial each rule and sign the bottom of the form indicating acknowledgment of the rules. Rule #5 reads " I will not sexually harass or sexually assault/abuse another person". During the past twelve months, no incidents of reentrant-on-reentrant sexual assault or sexual harassment occurred at Pittsburgh CCC.</p> <p>DC-ADM 801 Inmate Discipline Procedures Manual Section 7 - Community Corrections outlines the sanctioning process related to paroled offenders (reentrants) housed in community corrections facilities in that the process is conducted in accordance with the Universal Set of Rules procedures, mutually agreed upon by the Department and the PA Board of Probation and Parole (PBPP). Additionally, DC-ADM 801 states the violation and sanction process related to SIP offenders housed in Community Corrections shall be conducted as follows: a. infractions that do not necessitate a DC-141, Part 1, Misconduct Report, requiring informal, but progressive and standard sanction, shall be addressed in accordance with the Universal Set of Rules (USOR) procedures. In such cases, sanctioning staff in Community Corrections shall act as the designee for the Department's Chief of Treatment. b. Infractions that result in issuance of a DC-141 shall be referred to the Department's Chief of Treatment/designee in the Bureau of Treatment Services (BTS) for sanctioning in accordance with the SIP Sanctioning Matrix.</p>

Subsection (b):

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

Subsection (c):

BCC-ADM 008 requires the disciplinary process to consider whether a reentrant's mental disability or mental illness contributed to his or her behavior when determining what type of sanction, if any should be imposed.

Subsection (d):

BCC-ADM 008 states that if the allegation of sexual abuse has been substantiated, the reentrant abuser will be discharged from the facility where the sexual abuse occurred. Pittsburgh CCC does not offer therapy or counseling on site. Reentrants are referred to community programming through the centralized referral process. The Facility Director indicated that reentrants will go through a misconduct hearing and if warranted, criminal proceedings. Community facilities have the ability to move reentrants to other facilities within DOC.

Subsection (e):

Further, the facility may discipline a reentrant for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Subsection (f):

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

Subsection (g):

Furthermore, BCC-ADM 008 reiterates the Department's prohibition of all sexual activity between reentrants and that the Department disciplines reentrants for such activity. The Department will not deem such activity to constitute sexual abuse if the Department determines that the activity is not coerced. Rule #9 of the Universal Set of Rules prohibits reentrants from engaging in any sexual acts with other reentrants inside the facility, and reads "I will not engage in any sexual acts with other or sodomy inside the center."

Corrective Action: None

115.282	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse  8.1.1, Community Corrections Centers Procedures Manual Section 5 - Resident Procedures</li>   <li>3. Documents  If you are the Reported Victim of Sexual Abuse form  Letter of Agreement with Magee Women's Hospital of UPMC dated May 19, 2015  Letter of Agreement with Center for Victims dates June 18, 2014 and February 21, 2019</li>   <li>4. Interviews  Magee Womens Hospital of UPMC Clinician/ Forensic Coordinator, Emergency Department  Center for Victims Vice President / Chief Program Officer  Random Staff</li> </ol> <p>Findings:</p> <p>Subsection (a):  BCC-ADM 008 states that 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. Medical and Mental Health services are not provided on site at Pittsburgh CCC. Pittsburgh CCC follows policy 8.1.1, Community Corrections Centers Procedures Manual Section 5 - Resident Procedures, J. Community Corrections Health Care Services which establishes procedures for reentrants in the Bureau of Community Corrections to receive health care services.</p> <p>On May 19, 2015, PA DOC entered into an agreement with Magee Women's Hospital of UPMC in which Magee Womens Hospital agreed to provide sexual assault examinations to Pittsburgh CCC reentrants who report an incident of sexual abuse and the alleged sexual abuse was committed within 96 hours of the report. The examination will be performed by a trained or certified sexual assault nurse examiner. Magee Women's Hospital trains and certifies all of the emergency room nurses to conduct sexual assault forensics exams and always has at least one nurse on each shift who can perform these types of exams. If a nurse is not available to conduct a forensic examination or there is significant physical trauma, the reentrant will be referred to UPMC Mercy Hospital, a trauma hospital which employs nurses certified to conduct sexual assault forensics examinations. Additionally, if a nurse is not available at either Magee Woman's Hospital or Mercy Hospital, Mercy Hospital would use their nurse on call system to call a nurse in to perform the examination.</p>



On June 18, 2014 and updated on February 21, 2019, PA DOC and Pittsburgh CCC entered into an agreement with the Center for Victims to provide reentrants at Pittsburgh CCC who have been victims of sexual abuse or sexual harassment with support services. According to the Letter of Agreement and the Vice President of the Center for Victims, services include advocacy, accompaniment to medical examinations, law enforcement interviews, and criminal proceedings. Services also included crisis and on going counseling services. Reentrants receive services by calling the 24 hour hotline which is staffed by employees or any Pittsburgh CCC staff could contact the hotline on the reentrant's behalf. Services may also be received after the reentrant has terminated from Pittsburgh CCC, as the services are available to the general public, not just DOC reentrants and inmates.

Subsection (b):

Community Corrections Center Monitors are trained and have the potential to be first responders. Staff are aware of their responsibility to protect the victim by separating the alleged victim and alleged abuser and the need to preserve the crime scene. Staff are aware of their responsibility to immediately make notifications which include law enforcement and BCC-MOC after business hours. First responders utilize the First Responder Checklist to guide the steps they are required to take and follow direction provided by BCC-MOC. According to BCC-ADM 008, BCC-MOC duties include the coordination of initial medical and mental health services by an external provider. During business hours, the PCM is responsible for coordination of medical services and referrals for treatment in the community in accordance with professionally accepted standards.

Subsection (c):

Per BCC-ADM 008, victims of sexual assault must be offered treatment and referrals to include pregnancy tests for victims of sexually abusive vaginal penetrations, timely and comprehensive information about and timely access to emergency contraception, lawful pregnancy related services, sexually transmitted infections testing and follow up treatment. Magee Womens Hospital of UPMC offers sexual assault victims treatment and referrals which include pregnancy testing, access to emergency contraception, lawful pregnancy related services, sexually transmitted infections testing and treatment and HIV prophylaxis.

Subsection (d):

According to BCC-ADM 008, medical and mental health services are provided without cost to the alleged victim regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident.

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

BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 - Responding to a Report of Sexual Abuse

3. Documents

If you are the Reported Victim of Sexual Abuse form

If You are the Reported Victim of Sexual Abuse information sheet

4. Interviews

Magee Womens Hospital of UPMC Clinician/ Forensic Coordinator, Emergency Department  
Center for Victims Vice President / Chief Program Officer

Random Staff

Findings:

Subsection (a):

According to BCC-ADM 008, the PREA Compliance Manager (PCM) coordinates medical and mental health evaluations and, as appropriate, treatment for all reentrants who have been victimized by sexual abuse in any prison, jail, lockup, juvenile facility, or community confinement facility. Pittsburgh CCC does not employ medical and mental health services on site, but refers reentrants to community agencies. At Pittsburgh CCC, the assigned Corrections Counselor meets with reentrants within three days of placement and administers the PRAT. If it is determined the reentrant is a victim of sexual abuse, the Corrections Counselor will offer the reentrant services in the community. If during the reentrant's placement at Pittsburgh CCC, an incident of sexual abuse or sexual harassment occurs, the PCM along with the Correction Counselor, will meet with the alleged victim and provide the alleged victim with the "If You Are the Reported Victim of Sexual Abuse", which includes the expectation that the alleged victim "will receive timely, unimpeded access to emergency medical treatment and crisis intervention services". The alleged victim is then offered a medical examination, mental health evaluation, and rape crisis services. The reentrant has the option to receive services through insurance, or can chose to be referred by the Department of Corrections. If a reentrant chooses to receive services through the Department of Corrections, the reentrant is referred to Magee Women's Hospital of UPMC and the Center for Victims.

Subsection (b):

BCC-ADM 008 specifies that the coordinated medical and mental health evaluations, and treatment include follow-up services, treatment plans, and referrals for continued care following their release from the facility. The community victim services agency confirmed that reentrants are able to continue receiving services after release from Pittsburgh CCC.

Subsection (c):

According to policy and practice, all medical and mental health services are provided by community agencies. Reentrants receive the same level of care as other patients, regardless of Department of Corrections status.

Subsection (d)(e)(f):

According to BCC-ADM 008, medical services and treatment include pregnancy tests for victims of sexually abusive vaginal penetration during incarceration, timely and comprehensive information about and timely access to emergency contraception, lawful pregnancy-related services, sexually transmitted infections (STI) testing and follow up treatment. Magee Womens Hospital of UPMC provides these services for victims of sexual assault.

Subsection (g):

According to policy BCC-ADM 008 and confirmed through interviews, services are provided to reentrants without financial cost to the alleged victim regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Subsection (h):

Additionally, Pittsburgh CCC is required through policy to coordinate a mental health evaluation for all known reentrant-on-reentrant abusers within 60 days of learning of such abuse history and coordinate treatment when deemed appropriate by mental health practitioners. Mental Health services are available in the community and coordinated through the Corrections Counselor. However, it is likely that the alleged abuser would be transferred to another facility rather than remaining at Pittsburgh CCC.

Corrective Action: None

115.286	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 - Sexual Abuse Incident Review</li> <li>3. Documents PREA Sexual Abuse Incident Review - blank form PREA Sexual Abuse Incident Review completed packet</li> <li>4. Interviews Facility Director/PREA Compliance Manager</li> </ol> <p>Findings:</p> <p>Subsection (a) and (b): BCC-ADM 008 requires a Sexual Abuse Incident Review (SAIR) be conducted at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated. No review is required if the allegation has been determined to be unfounded. By policy, the review occurs within 30 calendar days of notice of satisfactory completion of the investigation.</p> <p>Subsection (c): BCC-ADM 008 outlines who should participate in the SAIR. The PREA Compliance Manager and the Regional Director are required to co-chair the SAIR committee and determine the composition of the SAIR team. At a minimum, policy also requires the following team members:</p> <ul style="list-style-type: none"> <li>- other manager or supervisor</li> <li>- Bureau of Community Correction (BCC) Investigator</li> <li>- facility counselor (presence not authorized for staff on reentrant accusations)</li> <li>- Department PREA Coordinator for Department sites or Contract Agency PREA Coordinator when necessary.</li> </ul> <p>Subsection (d): BCC-ADM 008 requires the SAIR Committee to utilize all available information and reports to:</p> <ol style="list-style-type: none"> <li>a. consider whether the incident or investigation indicated a need to change policy or practice to better prevent, detect, or respond to sexual abuse</li> <li>b. consider whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification status, or perceived status, or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility;</li> <li>c. examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable sexual abuse;</li> </ol>

- d. assess the adequacy of staffing levels in that area during different shifts;
- e. assess whether monitoring technology should be deployed or augmented to supplement supervision by staff;
- f. take action necessary to address immediate safety concerns;
- g. utilize the PREA Sexual Abuse Incident Review to prepare a confidential report with findings and recommendations;
- h. forward the completed report with attachments to the Bureau Major and Facility Director.

The SAIR committee completes the PREA Sexual Abuse Incident Review form as a checklist and documentation of the review. This is a five page standard form which summarizes the PREA incident and outcome of the investigation. The team specifically looks at the use of PRAT scores, if and how the scores influenced housing decision and if any subsequent PRATs were conducted. The team reviews the alleged victim and alleged abuser history, prior incidents of victimization or predatory behavior while incarcerated, the physical description, mental health, criminal offense, misconduct history and group or gang status. Further the team reviews if and how medical support services were offered to the alleged victim. Further, law enforcement involvement is discussed, including response to the referral and outcome of any investigation. Staff response to the PREA incident is reviewed. The review includes first responder actions and investigation process. Additionally, steps taken to minimize the risk of retaliation is also an area of discussion. Furthermore, the layout of the facility, including camera coverage, physical barriers and staffing levels are considered in the review.

Within five business days upon completion of the SAIR, the report is forwarded to Bureau Director and the PREA Compliance Division at Central Office. SAIR reports are randomly reviewed by the Central Office PREA Administrative Review Committee (ARC) to ensure consistent policy compliance and adherence to the PREA standards.

Subsection (e):

The Bureau Director is responsible for ensuring recommendations for improvement made by the Department's PREA Committee are implemented. If they are not implemented, documentation of the reasoning must be submitted to the Executive Deputy Secretary and the Department PREA Coordinator.

According to the Pre-Audit Questionnaire and confirmed by the PCM, the most recent SAIR incident occurred at a contract facility and was reported by Pittsburgh CCC staff. This SAIR is the only allegation of sexual abuse or sexual harassment having occurred during the past 12 months. The incident was investigated and substantiated. Pittsburgh CCC followed this policy during the last SAIR in that the PCM and Regional Director were present, as well as the Contract Facility Coordinator, the PREA Investigator, and the Facility Director and Corrections Counselor representing Johnstown CCC. The PREA Sexual Abuse Incident Review was completed in it's entirety. According to the completed SAIR packet, the SAIR was scheduled to be completed within two weeks. However, the SAIR was completed one day after the due date provided by Central Office, but still completed well within policy guidelines. No recommendations were made following the SAIR and justified in the report. If recommendations would have been made, the Regional Director and the Contract Facility Coordinator would work with the contract agency to implement those recommendations.

Corrective Action: None



115.287	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection</li> <li>3. Documents            PREA Internal Annual Report PA DOC 2013            PREA Annual Report PA DOC 2014            PREA Annual Report PA DOC 2015            PREA Annual Report PA DOC 2016            PREA Annual Report PA DOC 2017            Bureau of Justice Statistics Survey of Sexual Violence Summary Form 2011            Bureau of Justice Statistics Survey of Sexual Violence Summary Form 2012            Bureau of Justice Statistics Survey of Sexual Violence Summary Form 2013            Bureau of Justice Statistics Survey of Sexual Violence Summary Form 2014            Bureau of Justice Statistics Survey of Sexual Violence Summary Form 2015            Bureau of Justice Statistics Survey of Sexual Violence Summary Form 2016            Sample PREA Tracking of System Data Collection            Bureau of Justice Statistics Survey of Sexual Violence Summary and Incident Forms 2010            Bureau of Justice Statistics Survey of Sexual Violence Summary and Incident Forms 2011            Bureau of Justice Statistics Survey of Sexual Violence Summary and Incident Forms 2012            Bureau of Justice Statistics Survey of Sexual Violence Summary and Incident Forms 2013            Bureau of Justice Statistics Survey of Sexual Victimization Incident Forms 2015            Bureau of Justice Statistics Survey of Sexual Victimization and Substantiated Forms 2016            PREA Tracking Incident            Screenshot PREA Tracking System            Sexual Assault Incident Review Packet Gaudenzia DRC            Sexual Assault Incident Review Packet GEO Adappt</li> <li>4. Interviews PREA Coordinator</li> </ol> <p>Findings:</p> <p>Subsection (a):            Policy BCC-ADM 008, requires the Bureau of Standards, Audits, and Accreditation (BSAA) to collect accurate, uniform data for every allegation of sexual abuse at facilities under the Department's direct control using a standardized instrument and set of definitions. Data is obtained by PREA tracking system, information from the standard PREA Sexual Abuse Incident Review, and the monthly Bureau of Community Corrections Facility PREA Compliance Report.</p>

Subsection (b):

The BSAA reviews the collected data and aggregates it annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training. The data is compiled in a report published annually. Examples of the reports from 2013, 2014, 2015, 2016, and 2017 were submitted during the Pre-Audit.

Subsection (c):

According to policy BCC-ADM 008, incident-based aggregate data is also collected from every private facility the Department contracts with for the confinement of reentrants. According to policy and supported by practice, the Department produces an annual PREA report capturing data from January 1 to December 31. The annual report includes the number of allegations made at each facility, the number substantiated, unsubstantiated, and unfound investigations, the number of ongoing investigations for each facility, comparison of the rates of incidents for each facility from the preceding year to the current year, and any additional information that is required by the Survey of Sexual Violence for the Department of Justice.

PA DOC submitted numerous documents supporting compliance of this standard. Annual reports from 2013, 2014, 2015, 2016, and 2017 were submitted during the Pre-Audit. Additionally, Bureau of Justice Statistics Survey of Sexual Violence Summary Forms for 2011, 2012, 2013, 2014, 2015, and 2016 were submitted and reviewed; as well as the Bureau of Justice Statistics Survey of victimization 2016 and substantiated Form(s) and Bureau of Justice Statistics Survey of Victimization 2015 Incident Form(s). Further, a sample document from the PREA Tracking System Data Collection was submitted and reviewed.

Subsection (d):

BCC-ADM 008 requires all data to be maintained, reviewed, and collected as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. All Sexual Assault Incident Review reports from both PA DOC operated facility and contracted facilities are maintained with the PREA Compliance Division of DOC.

Subsection (e):

Incidents of sexual abuse and sexual harassment at PA DOC contracted facilities are investigated by DOC trained PREA investigators and tracked through the PA DOC PREA Tracking system. These incidents are reviewed through the Sexual Assault Incident Review and submitted to the PREA Compliance Division at Central Office. According to BCC-ADM 008, incident-based aggregate data is collected from every private facility the Department contracts with for the confinement of reentrants. Data from the contracted facilities is included in the annual report.

Two PREA Sexual Abuse Incident Review packets from contracted facilities were submitted for review. These packets demonstrated PA DOC's involvement in PREA incidents that occur at contracted facilities, including investigation, incident review, and documentation. Additionally, a screen shot of the PREA Tracking System displaying an incident from a contract facility and an example Report from the PREA Tracking System were submitted and reviewed.

Subsection (f):

According to policy, the Annual PREA Report is approved by the Secretary, provided to the



Department of Justice, and posted on the Department website by June 30. Annual PREA Reports for 2013, 2014, 2015, 2016, and 2017 were submitted and located on the PA DOC public website. These reports are approved and signed by the Department Secretary.

Corrective Action: None

115.288	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li>   <li>2. Policy and Procedures  BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection</li>   <li>3. Documents  PREA Internal Annual Report PA DOC 2013  PREA Annual Report PA DOC 2014  PREA Annual Report PA DOC 2015  PREA Annual Report PA DOC 2016  PREA Annual Report PA DOC 2017  PA DOC Public Website</li>   <li>4. Interviews  Agency Head  PREA Coordinator</li> </ol> <p>Findings:</p> <p>Subsection (a):  According to BCC-ADM 008, the Bureau of Standards, Audits, and Accreditation (BSAA) shall review data collected and aggregate it annually 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"> <li>a. identifying problem areas</li> <li>b. taking corrective action on an ongoing basis</li> <li>c. preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole.</li> </ol> <p>Subsection (b):  Policy dictates, that the annual report includes a comparison of the current year's data and corrective actions taken to reduce the incidents of sexual abuse, sexual harassment, and retaliation with those from prior years, and provides an assessment of the Department's progress in addressing sexual abuse.</p> <p>The Annual PREA reports from 2013, 2014, 2015, 2016, and 2017 were submitted and reviewed. The reports include comparison data from the current and previous year and a summary of corrective action taken. Additionally, the reports consider additional efforts the Department was making to reduce incidents of sexual abuse, sexual harassment, and retaliation.</p>

Subsection (c):

The Annual PREA Reports are reviewed and approved by the Pennsylvania Department of Corrections Secretary and made available on the Pennsylvania Department of Corrections public website. This is consistent with the requirements in BCC-ADM 008. Annual PREA reports from 2013, 2014, 2015, 2016, and 2017 were submitted for review during the Pre-Audit. The Secretary's signature, approving the report, is found on each report, except for the first report in 2013. The Annual PREA reports are readily available on line through the PA DOC website.

Subsection (d):

BCC-ADM 008 allows for information collected to be redacted so no individual is identifiable. The Department may redact specific material to ensure that publication of the material will not pose a clear and danger to the facility. However, the report must indicate the nature of the material redacted. In review of the annual reports, there appears to be no redacted information and no identifiable information is present in the reports.

According to interviews at the agency level, the PREA Compliance Division reviews, tracks, and reports incident based data. The Division reviews all sexual abuse incident documents stemming from DOC operated and contracted facilities and utilizes the data from the PREA Tracking System. The Department utilizes incident based data to determine where the Department could improve, specifically with substantiated allegations. The Division generates data for specific facilities and for specific types of allegations in order to identify trends and respond appropriately with training or policy changes to support the data. At the end of the year, data is submitted to the Bureau of Justice Assistance. Additionally, an annual report is compiled by the PREA Coordinator and published on the public website. The reports do not include any personal identifying information. However, if the report needed redacting, it would be noted. The PA DOC Secretary reviews and signs the completed report prior to it being posted on the public website. Reports are completed by June 30, utilizing the previous year's data.

Corrective Action: None

115.289	<b>Data storage, publication, and destruction</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Policy and Procedures BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 - Data Collection</li> <li>3. Documents Annual PREA Reports PA DOC Public Website</li> <li>4. Interviews PREA Coordinator</li> </ol> <p>Findings:</p> <p>Subsection (a) and (d): Policy BCC-ADM 008 requires the Department to securely retain all aggregate PREA data on the Department's secure servers, collected for a period of no less than ten years after the date of the initial collections unless federal, state or local law requires otherwise.</p> <p>According to the Pre-Audit Questionnaire, data is securely retained on the agency's network. PREA Tracking System access is controlled by user rights and is granted by the PREA Compliance Division to those staff with a need to know at each location. Sexual Abuse Incident Review data is securely retained in the PREA Compliance Division electronic file system, which can only be accessed by members of the PREA Compliance Division.</p> <p>Subsection (b): According to BCC-ADM 008, at least annually, the Department makes all aggregate sexual abuse data information from facilities under its direct control and contracted facilities, readily available to the public through the Department of website. The Department compiles reports by June 30 and posts the report on the public website. Additionally, the Bureau of Justice Statistics - PREA Summary Reports are also posted on the website for public viewing. Both types of reports present aggregate sexual abuse data information from DOC operated and contracted facilities.</p> <p>Subsection (c): BCC-ADM 008 requires specific identifying information to be redacted so that no individual is identifiable and facilities are not placed in danger because of the data. The PREA Coordinator stated that personal identifying information is not included in the annual PREA reports, and if it was, the information would be redacted and noted. In review of the reports, there was no personal identifying information or information placing the facility at risk.</p>

Corrective Action: None

115.401	<b>Frequency and scope of audits</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 517 360">Evidence Reviewed:</p> <p data-bbox="252 371 434 405">1. Documents</p> <p data-bbox="252 416 687 450">Pennsylvania DOC public website</p> <p data-bbox="252 461 699 495">Pennsylvania DOC audit Schedule</p> <p data-bbox="252 539 469 573">2. Tour of facility</p> <p data-bbox="252 629 555 663">Subsection (a) and (b):</p> <p data-bbox="252 674 1485 831">Pennsylvania Department of Corrections (PA DOC) is currently in year three of audit cycle two. PA DOC has a detailed audit schedule posted on the PA DOC public website. According to reports and the auditing schedule, each facility operated by PA DOC has been audited this audit cycle, or is scheduled to be audited before August 1, 2019.</p> <p data-bbox="252 887 1485 1043">At the conclusion of year three, audit cycle two, 20% of the Secure Correctional Institutions will have been audited and 45% of the Community Corrections Centers will be have been audited, ensuring that every facility has been audited during audit cycle 2. The schedule for year one of audit cycle 3 indicates that one third of each facility type is scheduled to be audit.</p> <p data-bbox="252 1099 453 1133">Subsection (h):</p> <p data-bbox="252 1144 1331 1178">During the on site audit, the auditors had full access to all areas of Pittsburgh CCC.</p> <p data-bbox="252 1234 443 1267">Subsection (l):</p> <p data-bbox="252 1279 1469 1391">During all phases of the audit, documents and information were requested by this auditor and received timely, both electronically and paper copy. This auditor also viewed electronically stored data and reviewed paper files.</p> <p data-bbox="252 1447 459 1480">Subsection (m):</p> <p data-bbox="252 1491 1430 1559">The auditors were allowed to conduct private interviews with reentrants at Pittsburgh CCC, using two staff offices.</p> <p data-bbox="252 1615 453 1648">Subsection (n):</p> <p data-bbox="252 1659 1485 1984">Reentrants were allowed to send confidential correspondence to the auditor. Audit Notices were sent to Pittsburgh CCC via email on December 12, 2018 for post on December 19, 2018. As requested, on December 19, 2018, Pennsylvania DOC submitted pictures to this auditor via email of the Audit Notices posted in the resident living room, Center Director's office door located at the entrance of the facility, on a bulletin board in the hallway, and on the doorway of the secretary's office. Additionally, during the facility tour, the Audit Notice was observed posted throughout each level of the facility. No letters were received from a reentrant at Pittsburgh CCC.</p> <p data-bbox="252 2040 561 2074">Corrective Action: None</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed:</p> <p>1. Documents</p> <p>Pennsylvania DOC public website</p> <p>PREA Audit Schedule</p> <p>PREA Audit Reports Cycle 1 years 1-3, and Cycle 2 years 1-3</p> <p>Findings:</p> <p>Subsection (f):</p> <p>PREA Audit Reports are posted on the Pennsylvania Department of Corrections (PA DOC) public website. PREA Audit reports are consistently identified by facility name, Final PREA Report with the date the final report was received by PA DOC. Reports are sorted by audit cycle and year the audit was completed. Reports can also be located by searching for the facility report.</p> <p>Corrective Action: None</p>

**Appendix: Provision Findings**

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

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



115.212 (c)	<b>Contracting with other entities for the confinement of residents</b>	
	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)	<b>Supervision and monitoring</b>	
	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)	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (NA if no deviations from staffing plan.)	na

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

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

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

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

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

115.216 (a)	<b>Residents with disabilities and residents who are limited English proficient</b>	
	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)	<b>Residents with disabilities and residents who are limited English proficient</b>	
	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)	<b>Residents with disabilities and residents who are limited English proficient</b>	
	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)	<b>Hiring and promotion decisions</b>	
	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)	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with 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

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

<b>115.217 (h)</b>	<b>Hiring and promotion decisions</b>	
	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

<b>115.218 (a)</b>	<b>Upgrades to facilities and technology</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect 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.)	yes

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



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

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

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

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

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

115.222 (b)	<b>Policies to ensure referrals of allegations for investigations</b>	
	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)	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for 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)	<b>Employee training</b>	
	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)	<b>Employee training</b>	
	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)	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.232 (a)	<b>Volunteer and contractor training</b>	
	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)	<b>Volunteer and contractor training</b>	
	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

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

<b>115.233 (a)</b>	<b>Resident education</b>	
	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

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

<b>115.233 (c)</b>	<b>Resident education</b>	
	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

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

<b>115.233 (e)</b>	<b>Resident education</b>	
	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

<b>115.234 (a)</b>	<b>Specialized training: Investigations</b>	
	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

<b>115.234 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of 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

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

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

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

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



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

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

115.241 (c)	<b>Screening for risk of victimization and abusiveness</b>	
	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

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

<b>115.242 (a)</b>	<b>Use of screening information</b>	
	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

<b>115.242 (b)</b>	<b>Use of screening information</b>	
	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.)	na
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na



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

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

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

115.253 (a)	<b>Resident access to outside confidential support services</b>	
	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)	<b>Resident access to outside confidential support services</b>	
	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)	<b>Resident access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide 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)	<b>Third party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of 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

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

<b>115.262 (a)</b>	<b>Agency protection duties</b>	
	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

<b>115.263 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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

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

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

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

115.264 (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)	<b>Preservation of ability to protect residents from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that 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)	<b>Agency protection against retaliation</b>	
	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)	<b>Agency protection against retaliation</b>	
	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)	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of 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)	<b>Agency protection against retaliation</b>	
	In the case of residents, does such monitoring also include periodic status checks?	yes



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

<b>115.271 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(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

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

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

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

<b>115.271 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as 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

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

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

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

<b>115.271 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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

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

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

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

<b>115.273 (a)</b>	<b>Reporting to residents</b>	
	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

<b>115.273 (b)</b>	<b>Reporting to residents</b>	
	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

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

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

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

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

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

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

115.278 (a)	<b>Disciplinary sanctions for residents</b>	
	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)	<b>Disciplinary sanctions for residents</b>	
	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)	<b>Disciplinary sanctions for residents</b>	
	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

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

<b>115.278 (e)</b>	<b>Disciplinary sanctions for residents</b>	
	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

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

<b>115.278 (g)</b>	<b>Disciplinary sanctions for residents</b>	
	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

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

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

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

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



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

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

<b>115.283 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.283(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.)	yes

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

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

<b>115.283 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

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

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

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

115.286 (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

<b>115.287 (c)</b>	<b>Data collection</b>	
	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

<b>115.287 (d)</b>	<b>Data collection</b>	
	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

<b>115.287 (e)</b>	<b>Data collection</b>	
	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

<b>115.287 (f)</b>	<b>Data collection</b>	
	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

<b>115.288 (a)</b>	<b>Data review for corrective action</b>	
	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

<b>115.288 (b)</b>	<b>Data review for corrective action</b>	
	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

<b>115.288 (c)</b>	<b>Data review for corrective action</b>	
	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

<b>115.288 (d)</b>	<b>Data review for corrective action</b>	
	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

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

<b>115.289 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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

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

<b>115.289 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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

<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	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

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	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.)	no
	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

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

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

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

<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates, 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

<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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