

# PREA Facility Audit Report: Final

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

**Facility Type:** Community Confinement

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 02/28/2019

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Maria Silao-Johnson	<b>Date of Signature:</b> 02/28/2019

AUDITOR INFORMATION	
<b>Auditor name:</b>	Silao-Johnson, Maria
<b>Address:</b>	
<b>Email:</b>	Maria.SilaoJohnson@wisconsin.gov
<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	01/27/2019
<b>End Date of On-Site Audit:</b>	02/01/2019

FACILITY INFORMATION	
<b>Facility name:</b>	Progress Community Corrections Center
<b>Facility physical address:</b>	179 Progress Drive, Waynesburg, Pennsylvania - 15370
<b>Facility Phone</b>	724-852-5560
<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>	David LeMasters	<b>Title:</b>	Center Director
<b>Email Address:</b>	dlemasters@pa.gov	<b>Telephone Number:</b>	724-852-5560

Facility Director			
<b>Name:</b>	David LeMasters	<b>Title:</b>	Center Director
<b>Email Address:</b>	dlemasters@pa.gov	<b>Telephone Number:</b>	724-852-5560

Facility PREA Compliance Manager			
<b>Name:</b>	David LeMasters	<b>Email Address:</b>	Dlemasters@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>		170	
<b>Current population of facility:</b>		97	
<b>Age Range</b>	<i>Adults: 21-90</i>	<i>Juveniles: 0</i>	<i>Youthful Residents: 0</i>
<b>Facility security level/resident custody levels:</b>		Parole	
<b>Number of staff currently employed at the facility who may have contact with residents:</b>		33	

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.

### Narrative:

A Prison Rape Elimination Act (PREA) audit was conducted at the Pennsylvania Department of Corrections (DOC), Community Corrections Center (CCC), Progress. CCC-Progress is located at 179 Progress Avenue Waynesburg, PA 15370. The purpose and objective of the audit is to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012.

The PREA audit team members are U.S. DOJ trained and certified PREA auditors Maria Silao-Johnson (lead auditor) and Julie Ustruck Wetzel (assistant auditor). The audit team are members of a PREA audit consortium between the states of Wisconsin, Pennsylvania, Maryland, and Michigan. The duration of period of the consortium is from 2017 through 2019.

The onsite review was on January 28, January 29 and February 2, 2019. On day one of the audit, the audit team conducted an entrance meeting, toured all areas of the facility and began interviews with both residents and staff. On the remaining days, the audit team continued to interview additional specialized staff and special population reentrants.

During 2016, CCC-Progress had participated in a PREA audit. The final PREA audit report dated June 14, 2016 indicated there were zero allegations of sexual abuse and/or sexual harassment during the previous 12 months (page 34 of 2016 PREA audit report).

### Pre-Onsite Audit Phase

The National PREA Resource Center (PRC) Online Audit System (OAS) was utilized by the facility's PREA Compliance Manager and staff in providing agency and facility policies, reported, files, statistics, forms, training records and educational information to the audit team members. The OAS was available for uploading information on December 13, 2018. The PCM and facility personnel completed the PREA audit questionnaire (PAQ) on January 16, 2019. Pre-audit preparation by the auditor included a review of all documentation and materials submitted by the facility. Documentation reviewed included agency policies, procedures, forms, PREA education materials, training curriculum, charts, posters, brochures and other PREA related materials that were provided to demonstrate compliance with the PREA standards.

The audit team, agency PREA coordinator, and facility PREA compliance manager (PCM), established audit goals and expectations early in the audit process by email and telephone calls in December 2018. It was during the pre-onsite audit phase that the auditor and the PCM developed goals and a means to collect documentation, a diagram of the facility, list of current reentrants housed at the site, as well as

develop an agenda for the onsite review. The audit planning and logistics communications between the facility PREA compliance manager and the PREA audit team continued from December 13, 2018 through January 28, 2019 when the team arrived at CCC-Progress

The auditor provided the facility PCM with PREA audit notices (English and Spanish) to be posted throughout the facility six weeks in advance of the onsite audit. The PREA audit notices provided the scheduled dates of the audit, the purpose of the audit, the name of the auditor, the auditor contact information and the confidentiality of any such communications. At the request of the auditor the notices were posted using colored or neon paper in an effort to differentiate the PREA audit notice from other posted information. The PCM confirmed the PREA audit notices were posted as seven date/time stamped colored photos (i.e. classroom, kitchen, living areas, visiting room, dining area, hallway, and lobby) were submitted back to the auditor six weeks before the onsite audit on January 14, 2018. The auditor received zero letters from CCC-Progress reentrants at the designated audit post office box.

The auditor utilized the Issue Log and File Review Template to track any discrepancies in the PAQ and Checklist of Documentation. Specific documentation requested by the auditor was to review every investigation file from the facility in the past 12 months. The PCM agreed to provide the investigation files to the audit team upon arrival at CCC-Progress.

The auditor researched whether the facility or agency has experienced any recent litigation specific to PREA, whether they are under a federal consent decree and if US DOJ had any active investigations specific to the conditions of confinement at CCC-Progress. This review did not reveal any such findings. The auditor also conducted web search reviews to determine if any relevant information pertaining to the history and culture of the facility needed to be addressed as part of the audit. Nothing noteworthy was discovered.

The auditor then conducted a review of the Pennsylvania Department of Corrections public website. The Agency PREA page was accessible in two clicks. The Department of Corrections public website is also linked to Facebook, Twitter, and YouTube. Posted on the website are items and resources specific to the agency's efforts to communicate, educate and promote PREA goals and objectives. The Agency has a zero tolerance policy towards all forms of sexual abuse and sexual harassment. PREA policies are posted on the website to inform the public that reentrants have the right to be free from sexual abuse and sexual harassment, the right to report sexual abuse or sexual harassment, and the right to be free from retaliation for reporting an allegations of sexual abuse or sexual harassment. The website allows for sexual abuse or sexual harassment reporting online as well as provides alternative methods for third party reporting.

A review of the state's mandatory reporting laws (049 Pa. Code §42.42 Suspected Child Abuse under 23 Pa. C.S. §6311) indicate any sexual abuse to someone under the age of 18 requires a report made to the county Office of Children, Youth and Families agencies to investigate. Pennsylvania's child welfare system is county-administered and state-supervised by the Pennsylvania Department of Human Services. CCC-Progress does not house anyone under the age of 18 according to the facility admission records.

The PCM provided the audit team with documents requested upon arrival for the onsite. It should be noted, the PREA standards define a "resident" as any person confined or detained in a juvenile facility or in a community confinement facility. The PA DOC's Bureau of Community Corrections (BCC) refers to those detained in a community confinement facility as a "reentrant." For the purposes of this report, the

audit team will refer to "reentrant" in an effort to be consistent with agency policy and practice.

### Onsite Audit Phase

The audit team arrived at CCC-Progress on Monday, January 28, 2019. The audit team was met by the Facility Director, Drug and Alcohol Treatment Supervisor, and Investigating Lieutenant. The PREA Coordinator conference called into the entrance meeting. Agenda items were discussed to include logistics, timelines, PREA audit objectives, and methodology which may differ from the previous audit. Information regarding how the PREA audit relies on a rigorous, practiced based methodology that assesses whether policies and procedures have been institutionalized. The facility was informed about what it means to conduct a practice based audit, specifically how the audit team will observe and assess relevant correctional practices pursuant to federal PREA standards. The primary purpose of the onsite phase of the PREA audit is to assess the day-to-day practices used by facility staff to promote sexual safety. At the conclusion of the entrance meeting the audit team and facility supervisors commenced the site review portion of the audit.

The Facility Director and his staff provided complete access to all areas within the facility. The onsite review included opening every door in the facility, observing camera placement, blind spots, staff posting locations, and diminished foot trafficking areas. The auditor noted in the main hallway adjacent to the vending area a locked box was available for reentrants to submit their grievance/complaints.

### Document Sampling

The audit team asked for and received the following documents from the PCM upon arrival for the onsite review:

1. Current reentrant housed in the facility roster in alphabetical order and in housing unit room order.
2. Reentrant listing by Disability, Limited English Proficiency, LGBTI, Reentrant who Reported a Sexual Abuse, and Reentrant who Reported a Sexual Victimization during Risk Screening.
3. Employee Scheduled Shift Roster for January 28 and January 29 (both security and non-security staff)
4. Contractors/Volunteers who have contact with reentrants
5. All allegations of sexual abuse and sexual harassment in the past 12 months
6. All hotline calls made during the past 12 months
7. All reports of Sexual Abuse/Sexual Harassment allegations from the past 12 months

### Interviews

In order to assess the climate, culture, and daily operations of the facility the audit team conducted multiple informal interviews with staff and reentrants throughout the site review. The audit team conducted formal interviews with staff and reentrants totaling 38 interviews. The Monitor staff (security) are also the Intake staff. The Facility Director is also the PCM, a member of the SAIR, an Intermediate staff responsible for unannounced rounds, and the Retaliation Monitor. The audit team selected a random sample of line staff from varying shift and work assignments as well as targeted interviews with staff who have specialized roles and responsibilities within the facility. The shift schedules for staff are as follows:

1st Shift: 6:00 a.m. to 2:00 p.m.;

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

The interviews for staff and reentrants were conducted individually, one at a time with one auditor, in a private office setting, The National PREA Resource Center's interview protocols were followed as a baseline for asking questions. The primary purpose of interviewing facility staff is to determine whether and to what extent they understand their responsibilities under the PREA standards, as well as the obligations imposed on the facility and agency. In addition, interviews of staff provide information on the extent to which zero tolerance culture for sexual abuse and sexual harassment has been implemented in the facility and agency.

The PCM provided the audit team with a list of reentrants currently housed at the facility in alphabetical order and in housing unit pod room order. The objective of the inmate interviews are to understand the facility's practices from the inmate's perspective and determine the extent to which inmates are knowledgeable about the facility's obligations to keep them safe from sexual abuse and sexual harassment. The sampling technique utilized to select reentrants for interviews was to identify every seventh reentrant for each of the three housing unit pods. Any reentrants meeting the targeted criteria were automatically interviewed. The sampling technique utilized to select staff for interviews was to speak to all staff working first and second shift on January 28, 2019 and January 29, 2019. A third shift staff member was interviewed via telephone at 11 p.m. on January 29, 2019 due to driving hazards and extreme weather conditions.

The audit team was able to access the Language Translation Telephone line to conduct an interview with a Limited English Proficient (LEP) reentrant. The interview with the LEP reentrant and reentrants with a disability indicated they had access to PREA information and was provided PREA education at the facility either in the form of literature or by video.

#### Staff Interviews Conducted by audit team

Agency Head/Designee – 1 Completed on October 26, 2018 by a WI DOC PREA auditor as part of audit consortium

Facility Director/Designee – 1

PREA Coordinator – 1 (Telephone Interview 2/1/2019 while onsite)

Agency Contractor Administrator – 1

Medical and Mental Health Staff – 1

Administrative/ Human Resources Staff – 1 Completed on May 18, 2018 by a WI DOC PREA auditor as part of audit consortium

SAFE/SANE – 1 (Telephone Interview 2/1/2019 while onsite)

Volunteer/Contractor – 2 (Telephone Interview 2/1/2019 while onsite)

Investigative Staff – 1 and 1 Completed on May 18, 2018 by a WI DOC PREA auditor as part of audit consortium

Staff who perform screening for risk of victimization/abusiveness – 2

Staff on the Incident Review Team – 1

Designated staff member charged with monitoring retaliation – 1

First responder - 1

Intake staff -3

Random staff – 8



## Reentrant Interviews Conducted by audit team

Reentrants with a Disability – 3

Reentrants Limited English Proficient – 1

Reentrant who identify as LGB – 5

Reentrant who identify as Transgender or Intersex - Zero (Verified by auditor when PREA assessment tracking system was reviewed).

Reentrant who reported Sexual Abuse at Screening – 1

Random Reentrants - 11

## Processes and areas observed by the Audit Team

The PREA audit team members observed the daily operations of the facility and conducted informal interviews with staff and reentrants to determine whether the facility's processes demonstrate compliance with the PREA standards.

1. Intake Process – Every Monitor line staff member (security) is trained to provide PREA education upon the reentrants arrival to the facility. The audit team observed the intake process as a reentrant was transported by the Parole agents to the facility on January 29, 2019.
2. Risk Screening – Auditor observed the intake risk screening process between an intake and facility counselor.
3. Reentrant Grievance system was explained and a secured grievance collections box is secured to a wall in the main hallway adjacent to the vending machine area.
4. Reentrant public phones are secured to walls in the lower levels of the housing unit pods. The phones are accessible to the reentrants all day except for count time and when day rooms are closed.
5. PREA posters were observed by the audit team throughout the facility (English and Spanish) providing information with reporting options for staff and reentrants. Additional posters were observed with information providing a Rape Hotline for emotional support services.
6. Camera surveillance systems are located throughout the whole facility, every entrance/exit way, common areas (i.e. kitchen, dining room, housing unit pods, classroom, library, visiting room, lobby, and laundry room), main hall way, health services office, outside recreation area and 360 degrees of the perimeter fence line. There are no cameras in the bathroom areas.

## Onsite Documentation Review

A sampling of documents and electronic records were reviewed during the onsite phase of the audit. The information from these reviews will supplement the documentation the facility provided in the Pre Audit Questionnaire (PAQ). Documentation, observations and interviews were used to corroborate and to determine whether policy directives were institutionalized as part of the daily operations.

1. The audit team members reviewed a sampling of the following documents, files and records during the onsite phase of the audit (this is an abbreviated list of the items reviewed. Further detail is provided within each of the specific standards as applicable):
2. Two investigation files (Sexual Harassment reentrant-on-reentrant) were reported within the past 12

months. File reviewed and discussed with audit team and PCM during onsite. The total number of investigations consisted of the following:

3. Zero Sexual Abuse allegations, two sexual harassment allegations (unsubstantiated), and zero retaliation allegations reported in the past 12 months. Information confirmed by the agency's (WebTAS) electronic tracking system.
4. Training Records for staff by electronic transcripts. 26 CCC-Progress facility staff and 23 BCC-MOC investigator staff. All PREA training records are current, investigator training records reviewed by the audit team indicated they received specialized investigation training specific to the criteria (115.271) and evidence required to substantiate a case for administrative action or prosecutorial referral.
5. Reentrant grievances; when a reentrant files a grievance related to sexual abuse by a reentrant or sexual abuse/sexual harassment by a staff member, the grievance officer shall immediately "reject" the grievance from the grievance system and forwarded for investigation to specialized staff. The reentrant will be notified of this action. This will be considered an exhaustion of administrative remedies.
6. Risk assessments for risk of victimization and abusiveness record were selected and reviewed during the onsite. Four random months out of a 12 month period were reviewed. Each record indicated that the reentrants were assessed within 72 hours of arriving at the facility. The records also indicated that the reassessments occurred within 20-30 days of arrival to the facility consistent with agency policy.
7. Reentrant education records; completed intake and comprehensive PREA education records were reviewed. The auditors observed facility staff document the education sessions with a signed/dated (Attachment 2-J) PREA Sexual Abuse Awareness Handout Receipt for Reentrants (hard copy filed in the reentrant record). The auditor reviewed 12 months' worth of reentrant PREA Education Receipts to confirm documentation was completed.

#### Exit Briefing

An exit briefing was conducted with the audit team, Facility Director, and the Investigative Lieutenant. The PREA Coordinator (attended via conference call). The audit team explained the next phases of the audit process; "Evidence Review and Final Report: (as applicable) which was officially initiated on February 4, 2019.

## 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.

Community Corrections Center Progress is located at 179 Progress Drive in Waynesburg, Pennsylvania. CCC Progress is one of 14 Community Corrections Center operated under the authority of the Pennsylvania Department of Corrections (PA DOC).

CCC-Progress is located adjacent to, but outside the fence line of State Correctional Institution Greene. CCC-Progress is a two story block building situated on a 128 acres site known as the Allison Tract, located in Franklin Township, Waynesburg, Pennsylvania. The Bureau of Community Corrections acquired the current building from State Correctional Institution Greene (a maximum security state prison). The Bureau of Community Corrections opened CCC-Progress on October 26, 2010. The building was originally built in March 1995 and was used to house SCI-Greene's custody Level 2 inmates.

CCC-Progress is an intensive treatment facility designed to assist the reentrant with reintegration back into the community.

The center is a fenced in facility containing a two story building and an outside recreation yard area. The first floor houses the lobby, main control center, visiting room, staff break room, investigative Lieutenant's office, social workers office, a strip search room, storage rooms, kitchen, dining room, classroom, library, health services room, Facility Director's office, Drug and Alcohol Treatment Supervisor's office, counselors offices, admin offices, maintenance office, staff bathrooms, inmate laundry room and the lower levels of three housing unit pods where the reentrant telephones are located. The shower and toilet areas are on both the lower and upper levels of the housing unit pods.

The second floor houses the upper levels of the three housing unit pods and a secured main storage room. The reentrant bathrooms are located both in the lower and upper levels of the housing unit pods.

The facility is monitored by 45 surveillance cameras. These cameras are positioned to capture movement and activity within the following locations; both entrances/exits of the facility, all movement points in stairwells from first to second floor, TV room, laundry room, kitchen, hallways that captures movement in and out of dormitories and reentrant bathroom, intake area. Movement is captured in the main thoroughfares on first floor to include movement in and out of staff offices, bathrooms and storage rooms. There is a health services office that provides limited medical services. Any additional medical and mental health access occurs at SCI-Greene. Upon notification of a report of sexual abuse the alleged victims shall be offered a SAFE/SANE exam at the Washington Health System (Greene) pursuant to their MOU and/or a mental health evaluation at the facility by contracted Medical Health Management or by SCI-Greene Mental Health Staff.

There are 38 staff positions allocated for the facility. During the onsite phase CCC-Progress had four vacant positions. One Drug and Alcohol Treatment Specialist (DATS) and four Community Corrections Center Monitors (Security Staff). The facility was operating with 34 full time staff members. Nineteen

Community Corrections Center Monitors (Security Staff) are currently assigned to CCC-Progress. 6 on first shift, 7 on 2nd shift, and 6 on 3rd shift as noted on the scheduled shift reports for January 28, 2019 and January 29, 2019 and observed by the audit team. 8 programming staff, 3 support staff, one nurse, 2 Lieutenants, and a Facility Director. Two religious volunteers provide evening services to the reentrants.

The age range of reentrants during the past 12 months is from 18-72 years of age and is primarily a male facility. The reentrant capacity is 170, during the onsite portion the reentrant count was 99.

The average length of stay for a reentrant is:

60-120 days for (Parole Violators)

90-100 days for (Parolees) stipulated to complete Basic Life Skills programming and

7-14 days for (Detainer Cases) days until a requested bed is available

## AUDIT FINDINGS

### Summary of Audit Findings:

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

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

<b>Number of standards exceeded:</b>	0
<b>Number of standards met:</b>	41
<b>Number of standards not met:</b>	0

### Summary of Audit Findings

Exceeds Standards: 0

Meets Standards: 41

115.211 115.232 115.261 115.276 115.403

115.212 115.233 115.262 115.277

115.213 115.234 115.263 115.278

115.215 115.235 115.264 115.282

115.216 115.241 115.265 115.283

115.217 115.242 115.266 115.286

115.218 115.251 115.267 115.287

115.221 115.252 115.271 115.288

115.222 115.253 115.272 115.289

115.231 115.254 115.273 115.401

Does Not Meet Standards: 0

## Standards

### Auditor Overall Determination Definitions

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

### Auditor Discussion Instructions

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

**115.211 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

1. Policies

- a. CCC-Progress Pre-Audit Questionnaire (PAQ)
- b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages
- c. Policy BCC-ADM 008 Procedures Manual, Section 4 (Responding to a Report of Sexual Abuse) 5 pages
- d. Policy BCC-ADM 008 Procedures Manual, Section 7 (Disciplinary and Administrative Action) 4 pages
- e. Policy BCC-ADM 008 Procedures Manual Glossary of Terms 7 pages
- f. Agency Organization Chart
- g. Agency Mission Statement (PA DOC Website <https://www.cor.pa.gov/About%20Us/pages/mission-statement.aspx>)

2. Interviews with the following:

- a. PREA Coordinator
- b. Random Staff
- c. Random Reentrants

Findings (By Provision):

115.211 (a) 1-5

The Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 clearly state that the Department will take appropriate actions to ensure zero tolerance toward all forms of sexual abuse and sexual harassment in order to promote the safety of reentrants. It will also implement the PREA Standards to ensure that all aspects of operations work toward preventing, detecting, and responding to such conduct resulting in a safer environment.

The Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 Manual Glossary of Terms define a list of prohibited behaviors of sexual abuse and sexual harassment as defined in the National Standards to Prevent, Detect, And Respond to Prison Rape.

The Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 Procedures Manual, Section 7 state any employee 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 shall be subject to disciplinary or administrative action. Disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies. 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. Section 7 further state that Reentrant Sanctions

shall be commensurate with the nature of the circumstances of the abuse or sexual harassment committed.

Interviews with random staff and reentrants conducted at CCC Progress during the on-site review indicated that they were aware of the zero tolerance policy in all forms of sexual abuse and sexual harassment. During the onsite review the auditors observed PREA posters throughout the facility noting the zero tolerance for sexual abuse and sexual harassment.

115.211 (b) 1-3

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 state there is one Department PREA Coordinator responsible for PREA compliance across the Department. Their sole responsibility is to develop, implement, and oversee Pennsylvania Department of Corrections efforts to comply with the federal PREA standards in all of the Department's Community Corrections facilities. The agency PREA Coordinator is Mr. David Radziewicz.

A review of the agency organizational chart indicates that the PREA Coordinator reports to the Director of the Bureau of Standards, Audits and Accreditation. The Director reports to the Executive Secretary for the Department of Corrections.

An interview with the PREA Coordinator confirmed his role within the department. He stated that he has sufficient time and authority to comply within the PREA standards in all of the PA Department of Corrections facilities. He conducts monthly meetings with the facility PREA Compliance Managers (PCM) throughout the agency to discuss PREA matters. He currently has one office staff member who assists him in his duties as the agency PREA Coordinator. He is also a certified PREA Auditor and has conducted numerous PREA audits for other states Department of Corrections.

Corrective Action: None



115.212	<b>Contracting with other entities for the confinement of residents</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 (Prevention and Training) 15 pages</li> <li>c. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of Cambria 29 pages</li> <li>d. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of Chester 25 pages</li> <li>e. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of Lackawanna 28 pages</li> <li>f. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of Montgomery 26 pages</li> <li>g. Memorandum of Understanding between the Commonwealth of Pennsylvania and the County of</li> <li>h. Pennsylvania Department of Corrections Bureau of Community Corrections (PREA Contract Compliance Monitoring Report, 2017)</li> <li>i. Keystone Correctional Services</li> <li>j. Keystone Correctional PREA Audit 2018</li> <li>k. Tomorrows Hope</li> <li>l. Tomorrows Hope PREA Audit 2016m</li> <li>m. GEO Hoffman Hall (Coleman Hall)</li> <li>n. GEO Hoffman Hall PREA Audit 2018</li> <li>o. GEO Alle-Kiski Pavilion</li> <li>p. Treatment Trends – Keenan House Treatment Trends – Keenan PREA Audit 2017</li> <li>q. Gateway Erie</li> <li>r. Gateway Erie PREA Audit 2018</li> <li>s. Firetree Capital Pavilion</li> <li>t. Capitol Pavilion PREA Audit 2016</li> <li>u. Final Invitation For Bid (IFB) for Housing Treatment Services BCC Master Contract 96 pages</li> <li>v. Extension October 1, 2019 through January 31, 2019</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Agency Contract Administrator</li> <li>b. PREA Coordinator</li> </ol> </li> </ol>

Findings (By Provision):

115.212 (a) 1-4

The Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 states the Department shall include in any new contract or contract renewal for the housing of a reentrant with a private entity or other entity, including other government agencies, the entity's obligation to adopt and comply with the PREA standards and the Department's policies related to PREA compliance. All contracted entities are expected to have an official PREA audit by a Certified DOJ PREA Auditor once during every three year audit cycle as directed in PREA standard.

The CCC-Progress PAQ reported that all Community Confinement contracts were renewed as of October 1, 2018. Contracts with contracted county jails have not been renewed since the last PREA audit; however, samples are attached. The PAQ also reported 24 agreements cover a total of 36 facilities which have been renewed since the last PREA audit within the agency. All contracts require compliance with the PREA standards. This was evident in the PREA audits that were conducted on the contracted sites.

115.212 (b) 1-2

The Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 states the PCD shall provide contract monitoring to ensure the contractor is complying with the PREA standards with any new contract or contract renewal related to community corrections. The outcomes shall be documented on the BCC PREA Contract Compliance Monitoring Report (Attachment 2-B).

The CCC-Progress PAQ provided copies of the PREA Contract Compliance Monitoring Reports to the Auditor for review and showed that they were detailed in regard to explaining any changes made by the facility to ensure compliance with the PREA Standards and/or deficiencies in need of corrective action. The monitoring report is maintained as an attachment (Attachment 2-B) as part of policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 (Prevention and Training). CCC-Progress provided a completed sample of the PREA Contract Compliance Monitoring Report from Keystone Correctional Services, Tomorrows Hope, GEO Hoffman Hall, GEO Alle-Kiski Pavilion, Treatment Trends-Keenan House, Gateway Erie, and Firetreee Capital Pavilion. Per the Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2, all contracts require monitoring.

During an interview with the Agency Contract Administrator he stated that we only contract for confinement with individuals in BCC; for the reentrant population. We require every contract facility to be audited for PREA. For the years the facility is not audited, there is a contract monitoring form that is completed (PREA Contract Compliance Monitoring Report) it's a worksheet to gather basic information and review policy to ensure the facility has adequate resources, an MOU with a rape crisis agency and hospital.

115.212 (c) 1-3

The Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 states only in emergency circumstances in which all reasonable attempts to find a private agency or other entity in compliance with the PREA standards have failed, shall the Department enter into a contract with an entity that fails to comply with these standards. All unsuccessful attempts shall be clearly documented.

The CCC-Progress PAQ reported since August 20, 2012 the agency has not entered into one or more contract with a private agency or other entity that failed to comply with the PREA standards. The auditor reviewed the MOUs for the counties of Cambria, Chester, and Lackawanna. The MOUs contain PREA language under Section 15 that states the county must agree to adopt the federal PREA standards.

During an interview with the Agency Contract Administrator he reiterated that all contracts with a private agency or other entity must comply with the PREA standards.

Corrective Action: None

115.213	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. Policy 8.3.1 Bureau of Community Corrections Security Procedures manual, Section 15 (Facility Staffing) 2 pages</li> <li>d. Bureau of Community Corrections 2018 Annual Staffing Plan</li> <li>e. Bureau of Community Corrections 2017 Annual Staffing Plan</li> <li>f. Bureau of Community Corrections 2016 Annual Staffing Plan</li> <li>g. CCC-Progress Floor Plan Camera Listing</li> <li>h. CCC-Progress CCTV Equipment Upgrade meeting memo 01-09-2018</li> <li>i. CCC-Progress Facility Census</li> <li>j. CCC-Progress Overtime Hired</li> </ol> </li>   <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. PREA Coordinator</li> <li>c. PREA Compliance Manager</li> <li>d. Intermediate or Higher Level Facility Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.213 (a) 1-3</p> <p>The Pennsylvania Department of Corrections of Community Corrections Policy BCC-ADM 008 Procedures, Manual Section 2 states the Bureau Director or Designee is responsible to develop and document a CCC staffing plan in accordance with Department Policy 8.3.1 Bureau of Community Corrections Security, Section 15. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:</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 assigned to the facility</li> <li>3. Video monitoring capabilities to protect offenders against sexual abuse</li> <li>4. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and</li> <li>5. Any other relevant factors</li> </ol> <p>SCC-Progress PAQ reported the average daily number of reentrants at 83. The staffing plan was predicated on 170 reentrants. This was confirmed by the review of the Facility Census dated 1-4-2019. The Annual Staffing Plans were also reviewed for 2016, 2017, and 2018. SCC-Progress also provided maps with camera locations and functions which were reviewed by the auditor.</p>

Interviews with the Facility Director and the PREA Compliance Manager confirmed CCC-Progress has a current staffing plan, video monitoring is part of the plan, and the staffing plan is documented and is securely maintained by the Bureau Office.

During the onsite, the auditor reviewed CCC-Progress CCTV Equipment Upgrade meeting memo 01-09-2018 which identified 8 new cameras and their placement throughout the facility to provide additional coverage. Cameras were added to the visiting room, classroom 1, library, front lobby, medical room, recreation yard, and two for the hallways facing in different directions. The additional coverage afforded additional views of common areas utilized by staff and reentrants. The cameras are viewed from two locations. The control center between the lobby and the visiting room as well as the Facility Director's office. The auditor was able to observe staff and reentrants throughout the facility and the outside recreation area with the exception of the reentrant toilet/shower areas and the reentrant sleeping areas. 45 cameras total provides video coverage for CCC-Progress. 11 cameras provide a 360 degree view of the perimeter, 9 cameras cover the housing units, 4 cameras cover the main hallway and 21 cameras cover the administration and programming areas.

115.213 (b) 1-2

Policy 8.3.1 Bureau of Community Corrections Security Procedures manual, Section 15 (Facility Planning) states that the Bureau Director document circumstances and justifications for any deviation from the staffing plan.

SCC-Progress PAQ reported there was no deviation from the Staffing Plan in the past 12 months. This was confirmed during an interview with the Facility Director. He reported CCC-Progress utilized overtime to cover positions. This was verified during the on-site review as the auditor was able to review shift schedule documents where prescheduled overtime was documented to cover staff positions for the preceding month (February 2019).

115.213 (c) 1

The Pennsylvania Department of Corrections of Community Corrections Policy BCC-ADM 008 Procedures, Manual Section 2 states the Department PREA Coordinator will work with each facility on an annual basis to assess, determine, and document whether adjustments are needed to: the staffing plan, deployment of video monitoring systems and other monitoring technologies, and the resources the facility has available to commit to ensure adherence to the staffing plan. The Department PREA Coordinator shall also review any documentation for non-compliance with a staffing plan.

An interview with the PREA Coordinator indicated that BCC-Major sent him the 2019 staffing plan earlier this month (Jan 2019). He looks at them and compares them to the previous staffing plan (2018). The memorandum of the staffing plan does include at the bottom, a total number of investigations open and closed at each location. I get the opportunity to review it and provide input before it is finalized. This was confirmed by the auditor by reviewing the BCC staffing plans for 2016, 2017, and 2018.

115.213 (d)

The Pennsylvania Department of Corrections of Community Corrections Policy BCC-ADM 008 Procedures, Manual Section 2 states that PREA Administrative Tours are conducted by intermediate level supervisors or management level employees to identify and deter sexual abuse and sexual harassment.

These tours are unannounced and will be conducted at varied times each month to ensure every shift is toured once per quarter.

1. Shifts are defined as 0600-1400; 1400-2200; 2200-0600;
2. Quarters are defined as QTR1 – (Jan – Feb – Mar); QTR2 – (Apr – May – Jun); QTR3 – (Jul – Aug – Sep); QTR4 – (Oct – Nov – Dec);
3. The Contract Facility Coordinator (CFC) must participate in at least one tour every quarter; and
4. There is no minimum or maximum number of participants that must conduct the tour.....
5. PREA administrative tours shall be documented on the BCC Facility PREA Compliance Report.

An interview with an Intermediate or Higher Level Facility Staff members confirmed that the rounds were taking place. The facility Director, Lieutenant, and the Drug and Alcohol Treatment Supervisor participate in conducting the PREA Administrative Tours. They reported that staff are not informed as to when the tours are taking place. No one is informed of when the PREA Administrative tours will take place, not even the other supervisors. They report that the PREA Administrative tours occur at their time of choosing to ensure all shifts are covered. While on site the auditor reviewed the BCC Facility PREA Compliance Report (Attachment 2-A) for the 4th quarter and verified the documentation of the tours for the past three months.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. Policy BCC-ADM 8.3.1 Security Procedures Manual, Section 30 (Searches) 17 pages</li> <li>d. Bureau of Community Corrections Offender Strip Search Log (Attachment 30-B)</li> <li>e. f. Offender Searches PowerPoint</li> <li>f. Staff In-Service Training Transcripts for PREA</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. Random Reentrants</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.215 (a) 1-3  The Pennsylvania Department of Corrections of Community Corrections Policy BCC-ADM 008 Procedures, Manual Section 2 states that security staff shall be trained to conduct all reentrant searches in a professional, respectful, and least intrusive manner possible.</p> <p>CCC-Progress PAQ reported zero cross-gender strip or cross-gender visual body cavity searches of reentrants were conducted. Interviews with random staff confirmed that cross-gender strip or cross-gender visual body cavity searches are not conducted excepted under exigent circumstances. None have been conducted at CCC-Progress. Interviews with random reentrants also verify that cross-gender strip or cross-gender visual body cavity searches are not conducted at CCC-Progress.</p> <p>115.215 (b) 1-4  The Pennsylvania Department of Corrections of Community Corrections Policy BCC-ADM 8.3.1 Security Procedures Manual, Section 30 states only female staff may conduct pat searches of female or transitioning female offenders. Facilities shall not restrict these offenders access to regularly available programming or other opportunities in order to comply with these provision.</p> <p>CCC-Progress PAQ reported female reentrants are not housed at this facility and therefore zero pat-down searches of female reentrants were conducted by male staff. During the onsite review no female reentrants were observed by the audit team at CCC-Progress. Interviews with random staff and reentrants confirmed that no females are housed at this site.</p>

115.215 (c) 1-2

Policy BCC-ADM 8.3.1 Security Procedures Manual, Section 30 states that Community Corrections staff shall not conduct:

1. a body cavity search (visual or internal) of any offender
2. a cross-gender strip search of any offender, or
3. a strip search of a transgender offender.

Only female staff may conduct pat searches of female or transitioning female offenders. Facilities shall not restrict these offenders access to regularly available programming or other opportunities in order to comply with this provision.

Interviews with random staff and random reentrants confirmed that female staff members did not conduct cross-gender strip searches. During the onsite the auditor reviewed strip search logs for the previous month and noted that all the reentrants strip searched were male.

115.215 (d) 1-2

The Pennsylvania Department of Corrections of Community Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states Reentrants shall be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine dorm room checks or security rounds..... Locations shall be designated throughout the facility that allows reentrants to shower, perform bodily functions, and change clothing with basic privacy.... Staff of the opposite gender shall announce their presence prior to entering a bathroom area, shower area, or authorized changing area.

Interviews with the random staff and random reentrants indicate that female staff always announce themselves prior to entering the housing unit. During the onsite review the auditor observed multiple Female Notification Postings throughout the facility written in English and Spanish directing all female employees to make the general announcement "Female on the Unit" prior to entering this housing area." Female staff were observed announcing their presence when entering into the housing units. Also during the onsite review the auditor observed the authorized changing area postings writing in both English and Spanish attached to the toilet and shower area doors.

115.215 (e) 1-2

Policy BCC-ADM 8.3.1 Security Procedures Manual, Section 30 states that Community Corrections staff shall not conduct a search or physical examination for the sole purpose of determining any offender's genital status. If the offender's genital status is unknown, it may be determined during conversations with the offender, 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.

CCC-Progress PAQ reported that zero such searches occurred in the past 12 months. Zero transgender reentrants are housed at this site. This was confirmed by the audit team by



reviewing the PRAT Tracking System (PTS). Interviews with random staff indicated they were prohibited by policy from searching a reentrant for the sole purpose of determining any offender's genital status.

115.215 (f) 1

Policy BCC-ADM 8.3.1 Security Procedures Manual, Section 30 states that the Facility Director or designee shall.... Ensure staff are trained to conduct pat searches, strip searches, cross-gender pat searches (female staff-male offender only), and searches of transgender and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

CCC-Progress PAQ reported that 100 percent of their staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex reentrants. Interviews with random staff verified that they were trained in Offender Searches. The auditor also reviewed the Offender Searches Power Point training curriculum and it was consistent with national standards for searches of reentrants. Security staff in service training records were also reviewed for compliance.

Corrective Action: None

**115.216 Residents with disabilities and residents who are limited English proficient**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Evidence Reviewed (documents, interviews, site review):

1. Documents

- a. CCC-Progress Pre-Audit Questionnaire (PAQ)
- b. ADM 008, Section 2 (PREA Procedures Manual) 19 pages
- Policy BCC-ADM 005 Resident Legal Procedures Manual, Section 1 (Reasonable Accommodations) 3 pages
- c. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages
- d. Policy BCC-ADM 008 Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) Attachment 3-B PREA Poster Spanish
- e. PROPIO LS LLC Contract with PA DOC
- f. PA DOC Foreign Language Employee Directory
- g. Language ID poster in multiple languages

2. Interviews with the following:

- a. Agency Head
- b. Facility Director
- c. Random Staff
- d. Reentrants (Hearing Impaired)

Findings (By Provision):

115.216 (a) 1

The Pennsylvania Department of Corrections Bureau of Community Corrections policy BCC-ADM 008 Procedures Manual, Section 2 states Access to Information for special Populations as outlined in policy BCC-ADM 005 Resident Legal Procedures Manual, Section 1, Individuals with disabilities shall be assigned to a Community Corrections Center or Community Contract Facility that provides reasonable accommodations according to the individual needs of the resident; provides for his/her safety and security; provides for reintegration with residents; and provides access to programs and services. This includes individuals diagnosed as mentally and/or physically impaired..... the Department shall ensure 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.

An interview with the Facility Director indicated that they currently had one reentrant that was hard of hearing and uses a hearing aid. An interview with a reentrant with hearing loss concerns reported that his issue is due to a faulty hearing aid. He stated that he met with someone at intake, a counselor, and someone from parole about PREA information regarding his right to be free from sexual abuse and sexual harassment. He also received the same information when he was housed at another correctional institution so he knows how to report

a PREA allegation. There are TTY services available for the hearing impaired reentrants. The reentrant does not believe he has any issues communicating with them when he needs to.

115.216 (b) 1

The CCC-Progress PAQ reported that Language ID Posters, PROPIO Language Services Instruction cards for telephone interpreters, and a PA DOC Foreign Language Employee Director are available for staff in an effort to ensure Limited English Proficient reentrants can communicate PREA matters with them.

An interview with an inmate that was hard of hearing stated that his problem is with his hearing aid. His information comes to him in written form. He is aware of his rights under PREA and was able to articulate how he could report an allegation of sexual abuse and sexual assault. An interview with the PREA Coordinator indicates that the Pennsylvania Department of Corrections does have interpretation services available regardless of dialect. There are postings in English and Spanish. There is Braille information available. The Pennsylvania Department of Corrections also has designated facilities for the blind and disabled. There are sign language interpreters available. There are also written documents for PREA related materials. An interview with the Facility Director confirmed that he would coordinate interpretation services between a reentrant and the PROPIO for PREA matters. During the onsite review the auditor was able to successfully utilize and test the PROPIO LS L.L.C. during the onsite review.

115.216 (c) 1-3

The Pennsylvania Department of Corrections Policy ADM 008, Section 2 prohibits relying on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate's safety.

The CCC-Progress PAQ reported that in the past 12 months this facility has not had to utilize the translation services for their reentrants.

Interviews with random staff indicate this policy is the practice in the facility and that they were aware of how to access interpretation services via the Facility Director but have not had to use it. They are also aware of a list of staff interpreters within the PA DOC. Interviews with a reentrant who was Limited English Proficient reported that he would have no problems communicating a PREA issue to staff and he has access to the Spanish pamphlets about PREA. He had already received the same information from the other PA DOC institutions he had been housed at.

Corrective Action: None

115.217	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 PREA Procedures Manual, Section 1 (Data Collection)</li> <li>c. Policy 1.1.4, Centralized Clearances Procedures Manual, Section 4 (Centralized Clearance Check Procedures) 6 pages</li> <li>d. Policy 4.1.1, Human Resources and Labor Relations Procedures Manual , Section 3 (Employee Arrests – Felony, Misdemeanor, or Summary Offenses) 6 pages</li> <li>e. Policy 4.1.1, Human Resources and Labor Relations Procedures Manual , Section 40 (Conducting Pre-Employment Background Investigations)</li> <li>f. Policy 4.1.1, Human Resources and Labor Relations Procedures Manual, Section 41 (Employment of Job Applicants Having Prior Adverse contacts with Criminal Justice Agencies)</li> <li>g. Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 38 (Attachment 38-A PA DOC Application) Complete packet 18 pages</li> <li>h. Policy 8.3.1 Bureau of community Corrections Security Procedures Manual, Section 31 (Contractor and volunteer Clearances)</li> <li>i. Contractor background check confirmations</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Human Resources</li> <li>b. Facility Director/ PCM</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.217 (a) 1</p> <p>The Pennsylvania Department of Corrections policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 41 (Employment of Job applicants Having Prior Adverse Contacts with Criminal Justice agencies) states that the Department will ensure that any job applicant who has had adverse contact with a criminal justice agency be evaluated as to his/her suitability for employment. Consistent with PREA, the Department shall not hire or promote anyone who:</p> <ol style="list-style-type: none"> <li>1. 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);</li> <li>2. 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; or</li> <li>3. Has been civilly or administratively adjudicated for engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; and/or</li> <li>4. Has been convicted of any offense under the following (r equivalent out of state offense):</li> </ol>

- a. Title 18 Pa. C.S.A. Chapter 31 – Sexual Offenses ; or
- b. Title 18 Pa. C.S.A. Chapter 39 – Public Indecency.

Also, consistent with the PREA standards, the Department will consider any incident of sexual harassment in determining whether to hire or promote anyone.

The CCC-Progress PAQ reported that three staff members were hired within the past 12 months and provided a sample copies of their personnel file background check. An interview with the Human Resources indicated that the Application process is on line. The person must first apply through the employment.PA.Gov site, register and then do another register and take the test. For monitors, they apply on the site, PA DOC HR will receive their application. PA DOC will complete the application process at their interview, which is where the PREA questionnaire is submitted. All the PREA questions are on the application forms. During the onsite review this was confirmed by the auditor.

#### 115.217 (b) 1

Policy 1.1.4 Centralized Clearances Procedures Manual, Section 4 state that consistent with PREA, prior to the engage of any contractors, the contractor and all of the contractor's employees and/or subcontractors that may have contact with inmates will be investigated to ensure that the Department does not enlist the services of any person(s) who;

1. Has engaged in sexual abuse in a prison, jail, lockup, community facility, juvenile facility, or other institution, as defined in 42 U.S.C. §1997: and/or
2. Has been convicted or civilly or administratively adjudicated for engaging or attempting to engage in sexual activity in the community facility by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse.

The Department shall also consider any incidents of sexual harassment when determining whether to enlist the services of any contractor who may have contact with inmates.

The CCC-Progress PAQ provided samples of Current Prior Employer letter (Attachment 4-A). An interview with the Human Resources staff indicated that the agency considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

#### 115.217 (c) 1-2

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 40 state background investigations for all candidates for positions in the Department will be in accordance with management Directive 515.15, Identification, Employment, and Education Verification Checks and M505.0, commercial Driver License, Drug and alcohol Testing, and Licensing Requirements and processed in the manner listed below.

#### General Processing

Human Resources Offices will submit a background check request for all prospective new hires and rehires that have been separated for more than 60 days to the office of special Investigations and Intelligence (OSII) which will contain the following items;.....Prison Rape Elimination Act (PREA) Current/Prior Employer Letter(s) (attachment 40-B).

The CCC-Progress PAQ reported three staff members were hired in the past 12 months who may have contact with reentrants that have had criminal background record checks completed. An interview with Human Resources indicated that the background check is handled through OSII. However, OSII has since been renamed to Bureau of Investigations and Intelligence (BII). This was due to a departmental merger between DOC and Parole & Probation. Same people and location, just different name. During the onsite review the auditor was able to review the three approvals from the criminal background investigations for the new hires. Included in the packet was the Application for Employment, Centralized Clearance check Information Request form, PREA Current Prior Employer letter, and Position Vacancy Interest form.

115.217 (d) 1-2

The Pennsylvania Department of Corrections Bureau of Community Corrections Policy BCC-ADM 008 PREA Procedures Manual, Section 1 state that criminal background record checks are maintained in the Centralized Clearances database for staff and contractors as outlined in Department policy 1.1.4, Centralized Clearances.

Policy 8.3.1 Bureau of community Corrections Security Procedures Manual, Section 31 state the responsibilities;

1. All Department and contract managers shall ensure that employees enforce and comply with the outlined procedures, take corrective action regarding non-compliance, and document according to policy and procedure.
2. Department employee and intern clearance shall be conducted in accordance with Department policy 1.1.4 Centralized Clearances.
3. Requests to enter a State Correctional Institution shall be processed in accordance with Department policy 1.1.4.

4. State Operated Residential Facilities (Community Corrections Centers (CCCS)

Every person who provides recurring on-site services and has individual/group contact with offenders at a CCC, either by volunteering or through contact (medical, food service, religious groups, support groups, etc.) shall not be permitted offender contact until they receive clearance from the PA DOC.

The CCC-Progress PAQ reported five contracted staff members within the past 12 months where criminal background records checks were conducted for staff who might have contact with the reentrants. An interview with the Human Resources staff indicated that the checks were completed by the newly named Bureau of Investigations and Intelligence, previously known as the Office of Special Investigations and Intelligence (OSII). During the onsite the auditor reviewed the five records and noted they were criminal background records checks.

115.217 (e) 1

Policy 1.1.4 Centralized clearances Procedures Manual Section 4 states a clearance is only valid for a maximum of 24 months for volunteers, agency temps, mentors, reentry service providers, contract service providers, Pennsylvania Board of Probation and Parole (PBPP) staff, and the PA Prison Society official visitors and may be issued for shorter periods. Clearance for all others who require recurring access may be approved for a maximum of 12

months, however, the length of any clearance approval should always represent the period that the individual actually requires access.

Policy 4.1.1 Human Resources and labor Relations Procedures Manual Section 3 states that all Department of corrections employees are cross checked against the Justice Network (JNET) system on a daily basis to identify employees that have had negative contact with law enforcement (i.e., any criminal citation, criminal charge, arrest, etc.).

The CCC-Progress PAQ reported that all employees are monitored through (JNET) which provides a real-time notification of any employee arrest.

Interviews with Human Resources and the PCM confirmed that anytime there is a criminal complaint, even a parking ticket or speeding ticket we are notified. All employees, not just employees who have contact with reentrants. During the onsite, the auditor reviewed a JNET Notification Services sample report of three staff members.

#### 115.217 (f) 1

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 38 contains the complete PA DOC Application packet and the background Investigation questionnaire which asks all applicants if they;

1. Have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
2. 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 or
3. Has been civilly or administratively adjudicated to have engaged in the activity described in (2) of this section.

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 3 states it is the employee's responsibility to report any negative contact with law enforcement (i.e. any criminal citation, criminal charge, arrest, etc.) to his/her supervisor, security, or designee. The employee should report such contact as soon as possible or not later than his/her next scheduled work day.

Interviews with Human Resources and random staff verified that supervisors are to be notified of any negative contact with law enforcement. Staff were also aware they had the continuing affirmative duty to disclose such misconduct. Each employee applicant packet contains a form requiring them to sign and date an acknowledgement that they are affirming the information provided to the agency is true and accurate.

#### 115.217 (g) 1

Policy 8.3.1 Bureau of community Corrections Security Procedures Manual, Section 31 states that unless there are mitigating factors, the following shall be sufficient reason to deny a candidate clearance with the Department.

1. The candidate has deliberately falsified or omitted pertinent information, including PREA – related misconduct, personal relationship with an offender, criminal justice involvement, etc.

on the Community Corrections Clearance application or PREA Questionnaire.

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 38 (Attachment 38-A PA DOC Application) in the "Oath and Signature" section, it specifically states, I do solemnly swear (or affirm) that this Application and any attachments contain no misrepresentation or falsification, omission or concealment of material fact, and that the information given by me is true and complete to the best of my knowledge and belief. I understand that any material omission or provision of materially false information will be grounds for non-selection or discipline, up to and including termination of employment.

115.217 (h) 1

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 40 states the agency will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receipt of a request from another facility for whom the person has applied to work.

An interview with Human Resources verified that unless prohibited by law, the agency would provide information on substantiated allegations of PREA involving a former employee.

Corrective Action: None



115.218	<b>Upgrades to facilities and technology</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 6 (Community Corrections Center (CCC) Maintenance, Repair, and Construction) 6 pages</li> <li>c. Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 42 (Closed Circuit Television (CCTV) Monitoring and Recording Systems)</li> <li>d. Camera Locations and Capabilities</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Agency Head</li> <li>b. Facility Director</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.218 (a) 1  The Pennsylvania Department of Corrections Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 42 states when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the department shall consider how such technology may enhance the Department’s ability to protect residents from sexual abuse.</p> <p>The CCC-Progress PAQ reported that no new facility or substantial expansion or modification to the site since August 20, 2012. Interviews with the Agency head and Facility Director both confirmed no new construction at CCC-Progress. During the onsite the auditor did not observe any part of the physical plant that appeared to be a new construction project.</p> <p>115.218 (b) 1  The Pennsylvania Department of Corrections Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 6 states 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 from sexual abuse.</p> <p>The CCC-Progress PAQ reported 8 additional cameras were added to the site upon closure of another PA DOC state correctional institution. A listing of the new camera placements were documented in a meeting memo. Cameras were added to the vending area adjacent to the visiting room, classroom 1, library, front lobby, medical room outside yard, and main hall</p>

facing both directions.

Interviews with the Agency Head and the Facility Director confirmed that the additional cameras will supplement areas for both the staff and reentrants and allow for constant observation. During the onsite the auditor was able to observe the new camera placement and angles. CCC-Progress has a total of 45 cameras at the facility with the ability to record a month worth of video footage.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Bureau of Community Corrections (PREA Policy) 4 pages</li> <li>c. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>d. Policy BCC-ADM 008 Procedures Manual, Section 4 (Responding to a Report of Sexual Abuse) 5 pages</li> <li>e. BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment (Attachment 3-C)</li> <li>f. BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual, Section 4 (Attachment 4-D First Responder Checklist)</li> <li>g. BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual, Section 4 (Attachment 4-E)</li> <li>h. 8.3.1 Bureau of community Corrections Security Procedures Manual, Section 24 (BCC Evidence Control)</li> <li>i. Pennsylvania State Police Memorandum of Understanding (MOU), 2017</li> <li>j. Pennsylvania State Police Letter 2015</li> <li>k. Pennsylvania State Police Memorandum 2015</li> <li>l. Greene County and the Pennsylvania Department of Corrections Letter of Agreement (LOA) 2015 for Sexual Trauma Treatment and Recovery Services (STTARS) Program to provide services to sexual violence survivors.</li> <li>m. Letter of Agreement (LOA) between the Pennsylvania Department of Corrections and the Washington Health System (Greene) for PREA SAFE/SANE services.</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. SAFE/SANE</li> <li>c. Facility Director/ PCM</li> <li>d. STAARS (victim services)</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.221 (a) 1-4  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 4 (Attachment 4-D) provides the First Responder with a checklist. Part A of the checklist directs the First Responder to notify the Center Director and then contact the BCC-MOC and follow all directions given. CCC-Progress staff does not conduct administrative or criminal investigations pertaining to allegations of sexual abuse and sexual harassment. The Pennsylvania State Police and the PA DOC have an MOU in place where as PSP agrees to</p>

conduct criminal investigations for PA DOC. PA DOC in turn will conduct their own Administrative investigations directed and coordinated by the BCC-MOC.

Policy BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 2 states that the BCC-MOC shall prepare a confidential report, BCC PREA Report – Sexual Abuse or BCC PREA Report – Sexual Harassment to document the incident and actions taken in response. The Bureau’s PREA Captain/designee shall provide directions as necessary and:

1. Assign an investigator and request a tracking number in accordance with Department Policy 8.3.1, Section 35;
2. As applicable, forward a copy of the PREA Report to the affected Facility Director/designee, Facility PCM, external agency contact (Pennsylvania Board of Probation and Parole (PBPP, Pennsylvania State Police (PSP, etc.”, Contract Facility Coordinator (CFC), Department of PREA coordinator, and Bureau Major/designee;
3. Ensure a WebTAS extraordinary occurrence report (EOR) is generated as outlined in the Department policy 8.3.1, Section 17; and
4. Document all actions.

Interviews with the random staff and the PCM verified that BCC-MOC assigned allegations of PREA investigations for CCC-Progress. Their process includes calling 911, notification of the Facility Director, and then calling the BCC-MOC for further instructions. The BCC-MOC is staffed by a Bureau Director, a BCC Major, and multiple Captains on a 24 hour rotation. The random staff interviewed were able to articulate their responsibilities to an allegation of a sexual abuse with regards to maximizing the potential for obtaining useable physical evidence for administrative proceedings and criminal prosecutions. If the incident occurred within 96 hours of the reporting, request that the alleged victim not take any actions that could destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.

During the onsite review the auditor noted that the staff carried their PREA First Responder Cards on their person and would refer to their cards during the interview process.

#### 115.221 (b) 1-2

The CCC-Progress PAQ notes that CCC-Progress staff are responsible for evidence preservation. Law enforcement (PSP) is responsible for all forensic evidence collection. Reentrants are transported to outside hospitals for forensic examinations. All clothing and evidence would be collected at the hospital. The PAQ also reported that there were no youth housed at CCC-Progress.

Interviews with the PCM and PREA Coordinator confirm that no youth are housed at CCC-Progress. During the onsite, the auditor did not observe any youth or documentation to indicate that youth would be housed at CCC-Progress. This was verified through that facility admission records review by auditor.

#### 115.221 (c) 1-8

Policy BCC-ADM 008 Procedures Manual, Section 4 states the Prison Rape Elimination Act (PREA ) Compliance Manager (PCM) shall coordinate medical services related to sexual

abuse for his/her facility and where possible, utilize a hospital that employs a Sexual Assault forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) to conduct sexual abuse examinations. The facility shall enter into a letter of agreement with the hospital or shall document its attempts to enter into such an agreement.... On site facility medical staff shall not conduct forensic medical exams of Department of Corrections (DOC) reentrants.

An MOU between CCC-Progress and the Washington Health System (Greene) state a resident who is a victim of an alleged sexual abuse may be transported to Hospital for a Sexual Assault Nurse Examiners (SANE) or Sexual Assault forensic Examiners (SAFE).... A portion of the PREA regulations establishes standards for conducting examinations of victims of sexual abuse allegedly committed in a state correctional institution, community corrections center or community contract facility.

The CCC-Progress PAQ reported that zero SAFE/SANE were conducted in the past 12 months.

An interview with the SAFE/SANE verified that forensic medical examinations are offered without finance cost to the victim. They normally have four on staff and if one is not available, they would call one in to conduct the SAFE/SANE exam. Interviews with the SAFE/SANE and the PCM confirm that there were zero SAFE/SANE exams performed in the past 12 months.

#### 115.221 (d) 1-3

CCC-Progress and STAARS program provides the survivors of an alleged sexual assault victim services to reentrants who can't leave the facility. They provide advocacy for accompany the survivor to the hospital or other location where a forensic examination is to be conducted. Provide confidential supportive services to the survivor either by telephone, mail, or in person. Accompany the survivor to court proceedings concerning the alleged sexual assault. Work with designated DOC officials to obtain any necessary security clearance and follow all facility guidelines for safety and security. Maintain a trained pool of advocates to respond to sexual violence survivors at the DOC facility in Greene County and provide the DOC with a list of current advocates.

An interview with the PCM confirmed that there were no requests for a reported sexual abuse victim advocate from a rape crisis center during this rating period for CCC-Progress. This was verified with the STAAR service provider.

#### 115.221 (e) 1

Policy BCC-ADM 008 Procedures Manual, Section 4 states a victim advocate shall accompany and support the alleged victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals, Facility staff may not serve as victim advocates for Department-Funded Reentrants.

An interview with the PREA Coordinator, PCM, and the SAART service provider confirmed that there were zero requests for a victim advocate in the past 12 months for CCC-Progress.

115.221 (f) 1

An MOU between the Pennsylvania Department of Corrections and the Pennsylvania State Police (PSP) identifies the PSP as having the expertise and resources necessary to investigate alleged sexual crimes committed within state correctional facilities.

The CCC-Progress PAQ provided a PSP Memorandum dated 2015, from PA DOC to the PSP. The memo requested that PREA standard provisions 115.21 (a) through (e) Evidence Protocol and Forensic Medical Examinations, are effectuated when conducting criminal investigations related to institutional sexual abuse and misconduct.

115.221 (g-h)

Not applicable to CCC-Progress as staff do not conduct sexual assault or forensic exams. A Letter of Agreement (LOA) between the Pennsylvania Department of Corrections and the Washington Health System (Greene) to provide PREA SAFE/SANE services for reentrants.

Corrective Action: None

**115.222 Policies to ensure referrals of allegations for investigations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Evidence Reviewed (documents, interviews, site review):

- 1. Documents
  - a. CCC-Progress Pre-Audit Questionnaire (PAQ)
  - b. Policy BCC-ADM 008 Procedures Manual, Section 5 (Investigations and Retaliation Monitoring) 3 pages
  - c. Memorandum of Understanding (MOU) between the Pennsylvania Department of Corrections and the Pennsylvania State Police (PSP)
  - d.. PREA Tracking System (PTS)
  - e. <https://www.cor.pa.gov/About%20Us/Documents/DOC%20Policies/dc-adm-008.pdf> (PA DOC public website link containing PREA Policies & Procedures)

2. Interviews with the following:

- a. Agency Head
- b. Investigative Staff

Findings (By Provision):

115.222 (a) 1-5  
 The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 5 states Initial complaint information shall be entered into the electronic PREA Tracking system (WebTAS) which will generate an incident number. All sexual abuse/sexual harassment allegations shall be reported to CR, CEN Sexual Abuse email account indicating PREA Tracking System incident number in the email subject line.... The Bureau Major/designee shall refer incidents/allegations of sexual abuse or sexual harassment of a reentrant for criminal investigation, unless it does not involve potentially criminal behavior, and assign a Bureau of Community Corrections (BCC) investigator to track the progress.

The CCC-Progress PAQ reported two allegations of sexual harassment were received in the past 12 months (reentrant-on-reentrant). Both allegations were investigated, neither allegation of sexual harassment were referred for criminal investigation. The auditor reviewed the PREA Tracking System and confirmed the allegations are tracked by incident number, OSII case number, Incident Date, Report Created, Incident Type, Investigators assigned, Outcome, Reported to OSII, and the Date Due to OSII are captured in this database. Zero allegations of sexual harassment involved criminal behavior therefore there was no referral for criminal investigations in the past 12 months at CCC-Progress.

An interview with the Agency Head indicated that the Bureau of Investigations & Intelligence (BII) that conducts administrative investigations and limited criminal investigation as some have police powers. The Pennsylvania State Police is designated to conduct PREA criminal

investigations.

During the onsite review the auditor reviewed the two closed investigations and one pending investigation alleging sexual harassment between reentrants. The investigation packets contained the following;

1. Synopsis
2. Summary of Findings
3. Conclusion
4. Recommendations
5. Attachments (statements, Reentrant Face Sheets, and Written Reports)

115.222 (b) 1-3

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 5 states that the Bureau Major/designee shall refer incidents/allegations of sexual abuse or sexual harassment of a reentrant for criminal investigation, unless it does not involve potentially criminal behavior, and assign a Bureau of Community Corrections (BCC) investigator to track the progress.... If the case is being investigated for criminal charges, the Department investigators shall suspend the administrative investigation and allow the criminal investigation to take precedence. The Bureau Major and/or OSII shall coordinate with the criminal investigator/District Attorney's Office (as applicable) to determine when to resume the administrative investigation so as to avoid interference with the criminal investigation.

An interview with an investigator confirmed that an MOU between the Pennsylvania Department of Corrections and the Pennsylvania State Police designates that PSP has the investigating authority for allegations of criminal behavior as it relates to PREA. The investigator also verified that should they have any referrals of allegations of sexual abuse or sexual harassment for criminal investigation, it would be documented on a Bureau of Community Corrections PREA Report- Sexual Abuse and Sexual Harassment for (Attachment 3-C).

The auditor was also able to confirm that the Pennsylvania Department of Corrections public website contained PREA Policies and Procedures accessible to the public at large. There were no referral for criminal investigations in the past 12 months at CCC-Progress.

115.222 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual and a Memorandum of Understanding (MOU) between the Pennsylvania Department of Corrections and the Pennsylvania State Police (PSP) verify that the criminal investigations regarding PREA would be conducted by the PSP.

Corrective Action: None



115.231	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 1 (Data Collection) 4 pages</li> <li>c. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>d. Basic PREA Training with Notes Section, 44 pages</li> <li>e. Professional Boundaries Power Point, 67 pages</li> <li>f. Dynamics of Sexual Abuse in confinement, 3 pages</li> <li>g. PREA Policy Update Training Power Point, 17 pages</li> <li>h. Web Based Training Menus, 6 pages</li> <li>i. CCC-Progress PREA Essentials Training Transcripts, 2 pages</li> </ol> </li>   <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. Random Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.231 (a) 1-10  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states 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. This shall occur as follows: Orientation, Basic Training, and Refresher Training.</p> <p>The CCC-Progress PAQ submitted PREA Training Transcripts for all staff, Training Power Points, and Training Menus which were all reviewed by the auditor for PREA standard compliance.</p> <p>Interviews with Random Staff verified that they were knowledgeable and aware of the zero tolerance policy for sexual abuse and sexual harassment, how to prevent, detect, report, and respond to allegations of sexual abuse and harassment, inmates have a right to be free from sexual abuse and sexual harassment, inmates and staff have a right to be free from retaliation for reporting sexual abuse or sexual harassment, the common reactions of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relations with inmates, how to communicate effectively and professionally with inmates including LGBTI inmates, and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p>

During the onsite the auditor verified that all CCC-Progress staff were current in their PREA trainings by reviewing the electronic training transcripts and by informal communication while observing the housing units.

115.231 (b) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states an employee shall receive additional training if the employee is reassigned from a single gender facility to an opposite gender or co-ed facility. Such training shall be tailored to the gender of the reentrants at the employee's facility.

Informal interviews with the Facility Director confirm that no staff was transferred from a female or co-ed facility in the past 12 months which would have precipitated additional training. The auditor reviewed training records and verified no staff have transferred from a female or co-ed facility in the past 12 months to CCC-Progress.

115.231 (c) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states 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.

The CCC-Progress PAQ reported that Refresher training is conducted via web-based training for 32 staff members. During the onsite the auditor reviewed the completed training transcripts for all staff.

Informal interviews with the Facility Director and Staff indicated that PREA essentials training is the full refresher course offered during the even years (i.e. 2016, 2018, 2020, etc.) and Policy update training is provided during the odd years (i.e. 2017, 2019, 2021, etc.). CCC-Progress reports that PREA training is conducted annually. Training records reviewed by the auditor confirmed the completed PREA training for the staff.

115.231 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states each individual who receives any type of training (basic, ongoing, or specialized) shall complete and sign the PREA training Receipt for Department and contract Employees and volunteers (Attachment 2-G).

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 1 states PREA Training and Understanding Verification Form for Staff shall be kept in the employee's training file.

The CCC-Progress PAQ reported that Refresher training is conducted via web-based training and electronically recorded. The tracking mechanism for the web-based training is Learning Solutions (LSO) which also prompts the trainee to acknowledge their PREA training at the end of the lesson or it does not count as a completed training session. During the onsite the auditor verified the training completions via the electronic training transcripts for staff.

	Corrective Action: None
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115.232	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. Policy BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual Section 11 (Non-Residential contract Services) 1 page</li> <li>d. BCC-ADM Section 2 Prevention and Training Orientation Receipt (Attachment 2-F) 2 pages</li> <li>e. BCC-ADM Section 11 Non-Residential Contract Services (Attachment 11-A) 2 pages</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. Volunteers who have contract with Reentrants</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.232 (a) 1-2  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 state 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. This shall occur as follows: Orientation, Basic Training, and Refresher Training.... Individuals who contract with the Department to provide non-residential reentry services (off-site) shall receive PREA information as outlined in Section 11 of this procedures manual.</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 11 state this section applies to non-residential reentry services provided to individuals on community supervision (home plan or community confinement facility) through an executed Commonwealth contract where payment for services is rendered by the Department. These series are not part of any residential contract.</p> <p>The CCC-Progress PAQ reported eight volunteers have contact with residents have been trained in agency policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. These eight volunteers also conduct programming at other PA DOC sites. They are a shared resource for the Department of Corrections.</p> <p>Interviews with the volunteers confirmed they were trained annually in PREA and they were able to articulate how they would respond to an allegation of sexual abuse or sexual harassment.</p>

115.232 (b) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 state 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.

The CCC-Progress PAQ reported all volunteers and contractors who have contact with residents are aware of the agency's zero tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Interviews with the volunteers confirmed they received their PREA training at Orientation and annually after the first training session. The volunteers were very aware of the agency's zero tolerance policy regarding sexual abuse and sexual harassment. When asked by the auditor to provide an example of an inappropriate relationship with a reentrant. Both volunteers responded with appropriate answers and what their options were in how to report an allegation of sexual abuse and sexual harassment.

115.232 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states Each individual who receives any type of training (basic, ongoing, or specialized) shall complete and sign the PREA Training Receipt for department and Contract Employees and volunteers (Attachment 2-G).

The CCC-Progress PAQ submitted 10 PREA training acknowledgement forms from CCC-Progress volunteers and contractors signed within the past 12 months. These documents were reviewed by the auditor and during the interviews with the volunteers they were able to articulate what their training consisted of related to sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

Corrective Action: None

115.233	<b>Resident education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Section 2 (Prevention and Training) 15 pages</li> <li>c. Policy 11.2.1 Reception and classification Procedures Manual Section 2 (Diagnostic and Classification Procedures) 3 pages</li> <li>d. BCC-ADM 008 Section 2 Prevention and Training, Sexual Abuse Sexual Harassment Reentrant Education Program (Attachment 2-M) 8 pages</li> <li>e. Inmate Handbook 2017 Edition</li> <li>f. BCC ADM 008 Section 2, Zero Tolerance Fact Sheet (Attachment 2-L) 1 page</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. Intake Staff</li> <li>c. Random Reentrants</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.233 (a) 1-2  The Pennsylvania Department of Corrections Policy 11.2.1 Reception and classification Procedures Manual, Section 2 state DCCs within the Department shall present an orientation program for new inmates, which includes the following, at a minimum..... Sexual abuse/sexual harassment prevention, reporting and intervention in accordance with Department policy DC-ADM 008, Prison Rape Elimination Act (PREA).</p> <p>Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual, Section 2 states every reentrant including transfers and new receptions, will receive information regarding the Agency's zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, their rights to be free from sexual abuse and sexual harassment, and to be free from retaliation for reporting such incidents, and regarding Agency policies and procedures for responding to such incidents.</p> <p>The CCC-Progress PAQ provided a Zero Tolerance Fact Sheet (Attachment 2-L), Sexual Abuse Sexual Harassment Reentrant Education Program (Attachment 2-M), PREA Education Receipt for Residents in English (Attachment 2-N), and the Inmate handbook for the auditor to review. CCC-Progress reported that 426 reentrants were admitted during the past 12 months and received this information at intake.</p>

Interviews with Intake Staff confirm that when reentrants arrive on site, they are provided with PREA Sexual Abuse handouts and a Zero Tolerance Fact Sheet. At the conclusion of their intake the reentrant is instructed to sign and date a PREA Education Receipt (Attachment 2-N) which is an acknowledgement that the reentrant has received and understand the Prison Rape Elimination Act (PREA) Sexual Abuse Education Program. The staff member providing the PREA information will sign as the staff witness. Reentrants interviewed reported they all received the PREA information at intake and have had the same PREA information provided to them at previous correctional sites. Interviews with Random Reentrants confirmed that they received the Intake PREA information on the same day they arrived and it was a Monitor staff that provided the initial Intake. The Reentrants reported that they were aware of the Agency's zero tolerance policy regarding sexual abuse and sexual harassment, they knew how to report incidents or suspicions of sexual abuse or sexual harassment, they knew their rights to be free from sexual abuse and sexual harassment, they understood their rights to be free from retaliation for report such incidents and they did receive information regarding agency policies and procedures for responding to such incidents.

During the onsite the auditor was able to observe an intake in progress and noted it was very effective as it was conducted one staff member to one reentrant. The initial intake is conducted by the Monitor staff and the PREA Education, conducted within 30 days of intake is completed by a counselor. This is predominantly due to the fact that transfers may arrive after hours at CCC-Progress or during the weekend.

#### 115.233 (b) 1-3

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual, Section 2 states every reentrant including transfers and new receptions, will receive information regarding the Agency's zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, their rights to be free from sexual abuse and sexual harassment, and to be free from retaliation for reporting such incidents, and regarding Agency policies and procedures for responding to such incidents.

The CCC-Progress PAQ provided a Zero Tolerance Fact Sheet (Attachment 2-L), PREA Handout Receipt for Reentrants in Spanish (Attachment 2-K), Sexual Abuse Sexual Harassment Reentrant Education Program (Attachment 2-M), PREA Education Receipt for Residents in English (Attachment 2-N), a PREA Education Receipt for Residents in Spanish (Attachment 2-O), and the Inmate handbook for the auditor to review. Zero number of reentrants transferred from a different community confinement facility during the past 12 months or who received refresher information.

Interviews of Intake Staff and the Facility Director confirmed that there were zero number of reentrants that transferred from another facility in the past 12 months. The earliest date of a reentrant at CCC-Progress during our on site was 9-11-2018. The average stay for a reentrant is approximately 90 days before they're released. Interviews with Random Reentrants indicated they did not transfer from another facility. The auditor reviewed intake records and noted CCC-Progress did not have transfers from another facility in the past 12 months.

115.233 (c) 1-5

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual, Section 2 states the Facility Director/designee shall ensure reentrant orientation and education is able to be 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. Additional information is outlined in Department policy BCC-ADM 005, Section 1.

The CCC-Progress PAQ reported that PREA videos are available in English and Spanish, with subtitles for deaf and hearing impaired reentrants. There are PREA training videos facilitated by staff and PREA daily announcements. PREA Reentrant Intake Handout Receipt in Spanish, PREA Education Receipt for Reentrant is Spanish, PREA Reporting Sexual Abuse and Sexual Harassment Poster in Spanish, and the PROPIO Language Services instruction card for telephone interpreters are available for use. Visually impaired reentrants can benefit from the audio portion of the PREA training video and dialog with staff facilitators. Individualized staff facilitator accommodations can be made based on the nature of the reentrants to include those limited in their reading abilities.

Informal interviews with Intake Staff, Random Staff, and Random Reentrants confirm that the PREA announcements are conducted three times a day before count time. There are no PREA announcements from 10pm to 6am due to reentrant sleeping. The PREA announcement defines sexual abuse and sexual harassment, their rights under PREA, and who they can report to. During the onsite the auditor observed the PREA announcements throughout both days during the onsite.

115.233 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 2 states each reentrant, including transfers and new receptions, will receive a copy of the PREA Handout in English (Attachment 2-H) or Spanish (Attachment 2-I) immediately upon arrival at the facility. The reentrant shall sign the PREA Sexual Abuse Awareness Handout Receipt for Reentrants in English (Attachment 2-J) or Spanish (Attachment 2-K)... Documentation that sexual abuse and sexual harassment training has occurred during orientation shall be recorded on the PREA Education Receipt for Reentrants in English (Attachment 2-N0 or Spanish (Attachment 2-O) form and maintained in the reentrant's file.

Informal interviews with Random Reentrants confirmed that they all participated in the PREA Intake upon arrival as well as the PREA Education session within 30 days of their arrival at CCC-Progress.

During the onsite the auditor reviewed Bureau of community Corrections CCC Intake Checklist Receipts for the 2018, one from each quarter. The Intake Checklists are also referred to as the PREA Education Receipts. The receipt is also an understanding verification form regarding PREA. Attached to the "Sexual Abuse Awareness, End the Silence" Brochure, the inmates also receive the following outlines:

1. What is Center Sexual Violence



2. Tips for Avoiding Sexual Abuse
3. What To DO If You Have Been Sexually Assaulted
4. How Can You Report A Sexual Abuse or Sexual Harassment

The receipt is then dated and signed by the reentrant and the staff member to verify the PREA Education took place and the reentrant participated.

115.233 (e) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 3 states Informational Prison Rape Elimination Act (PREA) Notice in English (Attachment 3-A) and Spanish (Attachment 3-B) shall be posted in facility common areas accessed by reentrants, employees, and visitors. These posters are available through the Bureau Office.

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 states a Notification (Attachment 4-C) about available services titled, "If you are the Reported Victim of Sexual Abuse," shall be laminated and posted in facility common areas accessed by reentrants. The facility shall add the address for local services prior to printing and laminating the Notification. Phones may not be posted without the written consent of the organization providing the services.

The CCC-Progress PAQ submitted Zero Tolerance Fact Sheet (Attachment 2-L), PREA Reentrant Intake Handout Spanish (Attachment 2-I), PREA Reentrant Intake Handout English (Attachment 2-H), PREA Poster Spanish (Attachment 3-B), PREA Poster English (Attachment 3-A), and CCC-Progress Supplemental Resident Handbook 18 pages for auditors review. During the onsite the auditor observed these notices either posted throughout the site or during the Intake process. Staff and reentrants were able to articulate the PREA information posted in the common areas and verified that they received PREA handouts the day they arrived at CCC-Progress.

Corrective Action: None

115.234	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. Investigator Training Lessons 1-7 Power Point</li> <li>d. PREA Investigation Training Transcripts for 23 Bureau of Community Corrections Investigators</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Investigative Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.234 (a) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states any employee who conducts sexual abuse investigations shall receive specialized training specific to confinement settings through the Department or other approved source. This training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative actions for prosecution referral.</p> <p>The CCC-Progress PAQ submitted Investigator transcripts for 23 PREA Investigators verifying they completed their training.</p> <p>Interviews with the Investigative staff indicate that they completed the seven part PREA Investigation training and have attended updates since 2017. During the onsite the auditor reviewed an investigator’s training record confirming that their PREA Investigator training was completed 06-28-2016, he received an update PREA policy training 02-10-2017, and his most recent PREA training was 12-10-2017.</p> <p>115.234 (b) 1  The CCC-Progress PAQ submitted 2017 Investigator Training Lessons 1-7 Power Point which covered the following areas Introduction to Sexual Abuse and Sexual Harassment Investigations (22 pages), Evidence Protocol and forensic medical Examinations (18 pages), Interviewing Victims and Suspected perpetrators (35 pages), Investigative Outcomes (17 pages), Documentation (30 pages), Prosecutorial Collaborations: Techniques to Get Prison Cases Prosecuted (34 pages), and PA DOC Allegation Processing Procedures (14 pages).</p>

The auditor reviewed the training curriculum which provided extensive instruction for investigators of sexual abuse and sexual harassment allegations in a confinement setting.

Interviews with the Investigative staff confirmed they received specialized 12 hour PREA Investigation training which concluded after two days of instruction.

115.234 (c) 1-2

The CCC-Progress PAQ provided 23 PREA Investigation Training transcripts for each of the Bureau of Community Corrections investigators responsible for investigations of all sexual abuse or sexual harassment allegations in a confinement setting. The auditor reviewed the transcripts and confirm that the BCC has 23 PREA investigators who have successfully completed the PREA Investigation training.

Corrective Action: None

115.235	<b>Specialized training: Medical and mental health care</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. Sexual Abuse and Sexual Harassment Handout</li> <li>d. PREA Medical and Mental Care Standards, Participant Guide</li> <li>e. PREA Specialized Training for Medical and Mental Health Care Standards</li> <li>f. Training Records of Four Medical and Mental Health Staff</li> <li>g. Letter of Agreement (LOA) between the Pennsylvania Department of Corrections and the Washington Health System (Greene) for PREA SAFE/SANE services.</li> </ol> </li>   <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Medical and Mental Health Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.235 (a) 1-3</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states 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 starting to provide service to the facility:</p> <ol style="list-style-type: none"> <li>1. How to detect and assess signs of sexual abuse and sexual harassment;</li> <li>2. How to preserve physical evidence of sexual abuse;</li> <li>3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and</li> <li>4. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</li> </ol> <p>Staff may complete training offered by the Department or by another source whose curriculum complies with the federal PREA standards. Each individual who receives any type of training (basic, ongoing, or specialized) shall complete and sign the PREA Training Receipt for Department and Contract Employees and Volunteers. All orientation and training information will be maintained by the PCM for non-employees and made part of the Agency's official personnel file for employees.</p> <p>The CCC-Progress PAQ reported that there are a total of three medical and mental health care staff who work regularly at the facility and all three have completed the training required by agency policy.</p>

An interview with the Medical and Mental Health staff confirmed that the PREA training was provided to them, the last update training was 2018. During the onsite the auditor verified that PREA training was completed for the three staff members.

115.235 (b) 1

A Letter of Agreement (LOA) between the Pennsylvania Department of Corrections and the Washington Health System (Greene) for PREA SAFE/SANE services. CCC-Progress does not conduct forensic examinations.

An interview with the Medical and Mental Health staff confirmed that any forensic examinations are conducted at the hospital by a SAFE/SANE nurse not CCC-Progress. Informal interviews with the PCM confirmed that zero medical staff at CCC-Progress are trained to conduct forensic examinations.

115.235 (c) 1

The CCC-Progress PAQ provided training records (Attachment 2-F) for their medical and mental health staff for the auditor's review. Informal interviews with the Medical and Mental Health staff confirmed they completed their PREA training and the documentation is maintained by the Agency.

Corrective Action: None

115.241	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. PRAT English</li> <li>d. PREAT Spanish</li> <li>e. PREA Training 2018, 57 pages</li> <li>f. PRAT User Guide Revised 2018, 19 pages</li> <li>g. CCC-Progress PRATs</li> <li>h. PREA WebTAS and Movement Report</li> </ol> </li>   <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. PREA Compliance Manager</li> <li>c. Staff Responsible for Risk Screening</li> <li>d. Random Reentrants</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.241 (a) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states every reentrant shall be assessed for risk of being sexually abused by other reentrants or sexual abusive toward other reentrants.</p> <p>Interviews with Random Reentrants and Staff Responsible for Risk Screening reported that reentrants received their assessments within days of arriving at the facility. The Risk Screenings are conducted by a counselor. The PREA Risk Assessment Tool (PRAT) is electronic and collects the risk results as well as maintains the information attained into the PRAT Tracking System (PTS). During the onsite the auditor observed that the PRATs regularly take place in the counselor’s offices providing minimal distractions.</p> <p>115.241 (b) 1-2  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states every reentrant shall be assessed for risk of being sexually abused by other reentrants or sexual abusive toward other reentrants within 72 hours of initial reception to the facility, including transfers.</p> <p>The CCC-Progress PAQ reported 422 residents (100 percent) entering the facility within the</p>

past 12 months were screened for risk of sexual victimization or risk of sexually abusing other reentrants, within 72 hours of arrival at the facility. Interviews with Random Reentrants and Staff Responsible for Risk Screening confirmed they received their PRAT screening within 72 hours of arrival. The auditor reviewed the PRAT Tracking System (PTS) and noted that the reentrants PRATs were completed within 24 hours of intake regularly.

115.241 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT) in English (Attachment 2-C) or Spanish (Attachment 2-D) otherwise known as the PRAT.

The CCC-Progress PAQ submitted the PRAT English (Attachment 2-C), PRAT Spanish (Attachment 2-D), and User Guide (Revised 2018) for review by the auditor. The PRAT asks 22 questions. 17 of the questions are for the reentrant to respond to. 5 of the questions are for the PRAT assessor to answer. The PRAT questions are:

1. Have you ever been convicted of a crime of violence?
2. Did your current offense involve 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. Some people are assigned male or female at birth but are born with sexual anatomy, reproductive organs, and/or chromosome patterns that do not fit the typical definition of male or female. This physical condition is known as intersex. This is also known as "Differences of Sex Development" or "disorders of Sex Development." Are you intersex?
7. What is your gender expression?
8. What is your gender identity?
9. Have you ever been sexually victimized prior to this incarceration?
10. Have you ever 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 ever involve sexually victimizing a child victim?
14. Did any of your offenses ever 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 reentrant appear to have a developmental disability?
19. Do you feel vulnerable while incarcerated?
20. Describe the physical build of the reentrant:
21. Describe the presentation of the reentrant:
22. Is the reentrant detained solely for civil immigration purposes?

The core purpose of the PRAT is to provide an objective means of identifying an inmate's relative risk of becoming a victim of sexual abuse or an abuser in the prison setting with the goal of addressing the safety concerns of vulnerable populations. The scores generated by the assessment are used to enhance inmate/reentrants' personal safety when making

decisions regarding programming, work, education, housing and bed placement.

115.241 (d-e) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states the PREA risk assessments shall be conducted utilizing the PREA Risk Assessment Tool (PRAT) in English (Attachment 2-C) or Spanish (Attachment 2-D) otherwise known as the PRAT. The tool will be an objective instrument that shall consider, at a minimum, the following criteria to assess reentrants for risk of sexual victimization:

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

Interviews with the Staff Responsible for Risk Screening indicated that the initial PRAT screenings considered the minimum criteria. They were also very cognizant of the timelines for the PRAT to take place. The initial PRAT would be conducted within 72 hours of the reentrant's arrival at CCC-Progress by a counselor. On the 20-30 day mark, the PRAT reassessment is conducted by the Drug and Alcohol Treatment (DAT) Supervisor. The Staff Responsible for the Risk Screening also reported that the PRAT was not accessible to the screeners once the information was entered into the PTS. Only the PREA Coordinator and the PREA Compliance Manager had access to the information provided by the reentrants. The auditor noted that the facility's risk screening instrument (PRAT) mirror the criteria to assess reentrants for risk of sexual victimization pursuant to the PREA standards.

115.241 (f) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states every reentrant shall be assessed for risk of being sexually abused by other reentrants or sexually abusive tower other reentrants.... Between 20-30 days after initial reception.

The CCC-Progress PAQ submitted a sample of the PRAT tracking system (PTS). The auditor noted that the PTS and Movement Report lists reentrant by bed assignment, Date of 72 hour PRAT completion, 20 Day Date from arrival at CCC-Progress, 30 Day Deadline Date for PRAT reassessment, Risk of Abusive behavior, Risk of Victimization, and LGBTI status. Thus ensuring that the PRATs are timely and complete.

The PAQ also reported that 99 percent of residents entering the facility within the past 12 months whose length of stay in the facility was for 30 days or more were reassessed for their risk of sexual victimization or of being sexual abusive within 30 days after their arrival based



upon any additional, relevant information received since intake.

Interviews with Staff Responsible for Risk Screening and Random Reentrants indicated the all arrivals to CCC-Progress received their initial PRATs within 72 hours and their PRAT reassessments within 30 days. During the onsite the auditor reviewed the PTS for CCC-Progress and confirmed that the PRATs for all reentrants housed at the facility were current and timely.

#### 115.241 (g) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states every reentrant shall be assessed for risk of being sexually abused by other reentrants or sexually abusive tower other reentrants.... When warranted due to referral, request, or receipt of additional information that bares on the reentrant's risk of sexual victimization of abusiveness.

Interviews with Staff Responsible for Risk Screening and the PREA Compliance Manager confirm that any referral, request, incident of sexual abuse, or receipt of additional information bearing a resident's risk of sexual victimization or abusiveness would initiate a PREA reassessment. Zero allegations of sexual abuse were reported to CCC-Progress in the past 12 months therefore there were no records to review while on site for this provision.

#### 115.241 (h) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states reentrants shall not be disciplined for refusing to answer, or for not disclosing complete information in response to the questions regarding prior victimization, disabilities, their perception of vulnerability, or their sexual orientation.

Interviews with Staff Responsible for Risk Screening reported that reentrants are not disciplined in any way for refusing to respond to the following:

1. Whether the reentrant has a mental, physical, or developmental disability
2. Whether the reentrant is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming
3. Whether the inmate has previously experienced sexual victimization
5. The inmate's own perception of vulnerability

Informal interviews with Random Reentrants also confirmed that they were aware they were not required to answer any questions of the assessment that they did not want to. During the onsite the auditor reviewed the PRAT (Attachment 2-C) and verified reentrants are not to be disciplined in any way for refusing to respond. The first paragraph of page 1 of 3 states "The Prison Rape Elimination Act, known as PREA, is a law designed to protect reentrants from sexual abuse. PREA requires prison staff to ask ever reentrant the following series of assessment questions. You may share as much or as little information as you feel comfortable providing. The results of the assessment are sued to help keep you and other reentrants safer, and the Department is committed to confidentiality or regarding the information that you share. You will not be penalized in anyway if you choose not to provide any information."

115.241 (i) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states the PRAT information and scores shall only be made available to designated staff to aid in housing, bed, and program assignment with the goal to keep separate those reentrants at high risk of being sexually victimized from those reentrants at high risk of being sexually abusive, and shall never be shared with other reentrants.

An interview with the PREA Coordinator, the PREA Compliance Manager, and the Staff Responsible for Risk Screening all reported that the PRAT is password protected and only the staff with a "Need to Know" could even access the database. Once the PRAT information is entered by a counselor, that counselor can no longer access that PRAT report. The PREA Coordinator and the PREA Compliance Manager can access the PRAT but not the person that conducted the assessment once the responses to the PRAT questions have been entered and the assessment is completed.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. Policy BCC-ADM 008 Procedures Manual, Section 9 (Working with Transgender/Intersex Reentrants)</li> <li>d. BCC-ADM 008 Section 9 Gender Review Committee (GRC) Checklist (Attachment 9-A)</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Staff Responsible for Risk Screening</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.242 (a) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states the information received through the administration of the PRAT shall be used to make individualized determinations regarding housing, work, education, and program assignments with the goal of keeping reentrants safe and keeping separate those reentrants at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>Interviews with the PREA Coordinator and the Staff Responsible for Risk Screening reported that the safety of the reentrants are a priority and the first concern is housing, ensuring that reentrants at risk for victimization is not housed with a reentrant that is at risk for abusiveness. The PRAT identifies the high risk reentrants and bed assignments are then determined to keep the reentrants safe. The PRAT provides a case-by-case determination for housing, work, education, and programming assignments.</p> <p>During the onsite the auditor reviewed a current PRAT Tracking System (PTS) spreadsheet and noted that the identified high risk reentrants were appropriately disbursed throughout the facility.</p> <p>115.242 (b) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states the information received through the administration of the PRAT shall be used to make individualized determinations regarding housing, work, education, and program assignments with goal of keeping reentrants safe and keeping separate those reentrants at high risk of being sexually victimized from those at high risk of being sexually abusive.</p>

Interviews with the Staff Responsible for Risk Screening indicated that during the first PRAT assessment individual determinations are made to keep vulnerable reentrants safe a priority. During informal interviews with Random Reentrants, they expressed they felt safe at CCC-Progress.

115.242 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 9 states 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 reentrant's health and safety, and whether the placement would present management or security problems.

An interview with the PREA Compliance Manager indicated that CCC-Progress did not have a Transgender/Intersex reentrant at the facility. This was confirmed by the auditor when reviewing the PRAT Tracking System (PTS) spreadsheets. The PREA Compliance Manager did report that should CCC-Progress have a transgender/intersex reentrant self-identify during a PRAT. The PREA Compliance Manager would ensure the reentrant had a voice regarding their own housing and programming to meet their needs and ensure their safety. These efforts would be documented via the Gender Review Committee (GRC) Checklist (Attachment 9-A). The auditor confirmed zero transgender or intersex reentrant self-identified to a PRAT screener during an assessment in the past 12 months.

115.242 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 9 states the PREA Compliance Manager shall meet with any identified transgender or intersex individual at a minimum of once every other month to review the reentrant's housing, bed placement, programming, work detail, education, and any threats to safety experienced by the reentrant. These meetings would be documented on the Gender Review Committee (GRC) Checklist (Attachment 9-A).

Interviews with the PREA Compliance Manager and Staff Responsible for Risk Screening indicated that should CCC-Progress house a transgender/intersex reentrant, the PREA Compliance Manager would meet with the individual at least once every other month to review their placements and any threats to safety experienced by the reentrant. The auditor confirmed zero transgender or intersex reentrant self-identified to a PRAT screener during an assessment in the past 12 months.

115.242 (e) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 9 states Transgender and intersex reentrants shall be given the opportunity to shower separately from other reentrants. Facilities will be evaluated by the GRC and determination will be made as their ability to accommodate this requirement.

Interviews with the PREA Compliance Manager and Staff Responsible for Risk Screening reported that transgender or intersex reentrants' views of his or her safety is given serious consideration in placement and programming. This includes having the ability to shower separately from others. CCC-Progress has single shower stalls with a privacy curtain which allows for person showering to be observed by their feet only. During the onsite the audit noted that every shower in the facility were individual showers.

115.242 (f) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 9 states the Gender Review Committee (GRC) in coordination with Office of Population Management (OPM), shall strive not to place transgender or intersex reentrants in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is necessary for their safety or such placement is in connection with a consent decree, legal settlement, or legal judgment or the purpose of protecting such reentrant.

Interviews with the PREA Compliance Manager and the PREA Coordinator indicated that CCC-Progress is not subject to a consent decree, legal settlement, or legal judgment requiring that it establish a dedicated facility, unit, or wing for LGBTI reentrants. Therefore reentrant placement on the housing units are predicated on whether they are at high risk for abusiveness or victimization, not LGBTI status. Interviews with LGB reentrants confirmed that they have not been placed on a specific unit for LGBTI reentrants. They can get assigned anywhere in the facility.

Corrective Action: None

115.251	<b>Resident reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 2 (Prevention and Training) 15 pages</li> <li>c. Policy BCC-ADM 008 Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) 6 pages</li> <li>d. BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual, Section 2 (Attachment 2-H) English</li> <li>e. BCC-ADM 008 Bureau of Community Corrections PREA Procedures Manual, Section 2 (Attachment 2-I) Spanish</li> <li>f. BCC-ADM 008 Section 2, Zero Tolerance Fact Sheet (Attachment 2-L) English</li> <li>g. 7.2.1 Counseling Services Procedures Manual, Section 3, Request Slips (Attachment 3-A) DC-135A</li> <li>h. PREA Posters (English and Spanish)</li> <li>i. 8.3.1 Community Correction Center Security Procedures Manual Section 17 (Reporting of Extraordinary Occurrences (Attachment 17-B) DC—121</li> <li>j. Basic Training Power Point, 44 pages.</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. Random Reentrants</li> <li>c. PREA Coordinator</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.251 (a) 1</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states reentrants may privately report sexual abuse, sexual harassment, retaliation by other reentrants or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Reports may be verbally, in writing, anonymously, and from third parties to:</p> <ol style="list-style-type: none"> <li>1. Any staff member</li> <li>2. The Facility Director or Designee</li> <li>3. The facility PREA Compliance Manager (PCM)</li> <li>4. The Department PREA Coordinator; or</li> <li>5. They may write to the BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110</li> </ol> <p>The CCC-Progress PAQ submitted PREA posters in English and Spanish, Zero Tolerance</p>

Fact Sheet (Attachment 2-L) reentrants receive upon arrival to the facility, and DC-135A (Inmate's Request to Staff Member, Report form completed by reentrant) to indicate multiple ways for reentrants to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Interviews with the Random Staff and Random Reentrants verified that they were knowledgeable in the multiple methods to report sexual abuse and sexual harassment and were able to articulate the steps they would need to take to file a report. The Random Reentrants were more apt to report to the Compliance Manager or a staff member they trusted. During the onsite, the auditor observed the PREA posters attached to walls throughout the facility in all the common and the public areas listing multiple options of reporting. Daily PREA announcements were conducted three times a day providing information on how to report sexual abuse and sexual harassment. The audit team observed the PREA announcements on both days of the onsite.

#### 115.251 (b) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states anyone, to include family, friend, and the general public, may make a private report of an allegation of sexual abuse or sexual harassment on behalf of a reentrant by writing to the BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110.

This address is not part of the Department or Contract Agency and is able to receive and immediately forward reports of sexual abuse and sexual harassment to Agency officials. The reporter may remain anonymous upon request. This address may be sued by anyone including employees, reentrants, friends, family, volunteers, visitors, contractors, vendors, and the general public. This information shall be posted.

Interviews with the PREA Coordinator and the Random Reentrants indicated that the information was accessible to all. During the onsite reentrants reported they had many options for third party reporting and they would likely notify a family member to report if they didn't want to report it themselves.

#### 115.251 (c) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states Employees shall accept reports made verbally, in writing, anonymously, and from third parties, promptly document any verbal reports on a DOC-121, Part 3-Bureau of Community Corrections (BCC) Employee Report of Incident and immediately notify the Facility Director or designee.

Interviews with Random Staff confirmed that employees were required to accept all reports of sexual abuse or sexual harassment and notifications are also required. The interviewed staff were very cognizant of documenting all matters related to sexual abuse and sexual harassment on a D-121 form after notifications to the PREA Compliance Manager or BCC-MOC if after hours. Interviews with Random Reentrants were able to articulate the different methods they could report. All Random Reentrants interviewed stated they would have no

problems having their friends and family report and allegation on their behalf if they felt they need to.

115.251 (d) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states A staff member, contractor, or volunteer may also make a private report as outlined in Third Party Reporting. "Anyone, to include family, friend, and the general public, may make a private report of an allegation of sexual abuse or sexual harassment on behalf of a reentrant by writing to the BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110.

The CCC-Progress PAQ submitted PREA posters, PA DOC Public Website, and Basic Training Power Point (Provided to all Uniformed Staff) to indicate the multiple methods in which staff are informed of privately reporting a sexual abuse and sexual harassment of inmates.

Interviews with Random staff confirmed they were aware of the private reporting option. During the onsite the auditor noted the PREA posters throughout the facility with the private reporting information for staff, reentrants, and the public. The PA DOC Public Website was also reviewed by the auditor and the simplified reporting process by clicking a button was user friendly.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) 5 pages</li> <li>c. Policy BCC-ADM 003 Community Corrections Resident Grievances Procedures Manual, Section 1 (Grievance Reporting)</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Compliance Manager</li> <li>b. Investigative Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.252 (a-g)</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 003, Community Corrections Resident Grievances Procedures Manual, Section 1 states a grievance regarding an allegation of sexual harassment or sexual abuse by a staff member or resident will not be addressed through the Resident Grievance System and must be addressed through Department policy BCC-ADM 008, Bureau of community Corrections Prison Rape Elimination Act (PREA).</p> <p>A grievance regarding an allegation of physical abuse by a staff member will not be addressed through the Resident Grievance System and must be addressed through Department policy BCC-ADM 002, Bureau of community Corrections Resident Safety.</p> <p>These incidents are taken seriously by the Department and will be investigated to ensure the safety of residents at all facilities. If a grievance is related to an allegation of sexual harassment or sexual abuse by staff or resident or if the grievance is regarding an allegation of physical abuse by a staff member, it will be rejected.</p> <p>Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 2 states if a reentrant files a grievance related to sexual abuse by a reentrant or sexual abuse/sexual harassment by a staff member, the grievance officer shall immediately reject the grievance and contact the BCC0-MOC for investigation. The reentrant will be notified of this action. This will be considered an exhaustion of administrative remedies.</p> <p>The CCC-Progress PAQ reported the agency has no administrative procedure for dealing with resident grievances regarding sexual abuse. An Interview with the PREA Compliance Manager and Investigative staff confirmed this was the practice.</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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 4 (Responding to a Report of Sexual Abuse) 5 pages</li> <li>c. Letter of Agreement (LOA) between Pennsylvania Department of Corrections and Sexual Trauma Treatment and Recovery Services (STTARS Greene-Progress)</li> <li>d. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual, Section 4 (Attachment 4-d. If you are the Reported Victim of Sexual Abuse</li> <li>e. Sexual Trauma Treatment and Recovery Services (STTARS) Program poster and hotline</li> <li>f. CCC-Progress Reentrant Handbook</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. PREA Compliance Manager</li> <li>c. Investigative Staff</li> <li>d. Random Reentrants</li> <li>e. Victim Services (STTAR) provider</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.253 (a) 1-3</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 4 states a notification (Attachment 4-C) titled, "If you are the Reported Victim of Sexual Abuse," shall be laminated and posted in facility common areas accessed by reentrants. The facility shall add the address for local services prior to printing and laminating the notification. Phone numbers may not be posted without the written consent of the organization providing the service.... The preferred service delivery method is in person in a confidential setting.... An alleged victim shall be offered the opportunity to talk with a victim advocate upon receipt of an allegation and receive continued care when he/she has been a victim of facility sexual abuse, no matter if he/she reported the sexual abuse immediately or made a delayed disclosure.</p> <p>The CCC-Progress PAQ submitted the notice (Attachment 4-C) and a STTARS Program poster with a hotline number listed on the page. Informal interviews with the PREA Compliance Manager and the Investigative Staff confirmed that an alleged victim of sexual abuse would have access to a victim advocate facilitated by the PREA Compliance Manager. Interviews with Random Reentrants reported that they were aware of the postings and knew the hotline was available. During the onsite the auditor observed the notices and posters throughout the</p>

facility and in the telephone areas. The auditor reviewed the LOA between the Pennsylvania Department of Corrections and STTARS (Greene-Progress) and contacted the organization. They reported that CCC-Progress has not requested their services within the past 12 months nor have they received any calls from CCC-Progress for victim services.

115.253 (b) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 4 states the facility shall inform reentrants, prior to giving them access, the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

1. Each facility shall ensure that if facility phones or public pay phones within the facility are monitored, that the level of monitoring is clearly posted next to the phone. This shall be posed in English and Spanish
2. If the facility monitors reentrant mail, the level of monitoring must be clearly posted on the reentrant's bulletin board in in the facility handbook.

The CCC-Progress PAQ provided a STTARS program notice and a Reentrant Handbook (Mail Process) for auditor's review. An informal interview with the PREA Compliance Manager and the PREA Coordinator confirmed there was an active LOA on file with the STTAR program and Green-Progress. The PREA Compliance Manager reported he would meet with the reentrant prior and provide options for the reentrant to communicate with the victim advocate as well as any mandatory reporting rules and confidentiality limits under the law. In the past 12 months CCC-Progress has not requested STTARS services. During the onsite the auditor observed the notices of the extent of phone monitoring posted near the telephones in the housing units. Interviews with Random Reentrants indicated that would just assume the communications with the outside services are confidential due to the sensitive matter.

115.253 (c) 1-4

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 4 states the PCM shall coordinate victim services related to sexual abuse for his/her facility and work with the Pennsylvania Coalition Against Rape (PCAR) approved local rape crisis center to establish a PREA Rape Crisis Center Letter of Agreement or shall document it's attempt to enter into such an agreement.

The CCC-Progress PAQ provided an LOA between Pennsylvania Department of Corrections and STTARS (Greene-Progress). During the auditor reviewed the LOA between the Pennsylvania Department of Corrections and STTARS (Greene-Progress) and contacted the organization. They reported that CCC-Progress has not requested their services within the past 12 months nor have they received any calls from CCC-Progress for victim services.

Corrective Action: None

115.254	<b>Third party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) 5 pages</li> <li>c. PREA poster (Attachment 3-A) English or (Attachment 3-B) Spanish</li> <li>d. Public Website Make a Report web link  <a href="https://www.cor.pa.gov/Facilities/Prison_Rape_Elimination_Act/Pages/default.aspx">https://www.cor.pa.gov/Facilities/Prison_Rape_Elimination_Act/Pages/default.aspx</a> </li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. Random Reentrants</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.254 (a) 1-2  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states anyone, to include family, friends, and the general public, may make a private report of an allegation of sexual abuse or sexual harassment on behalf of a reentrant by writing to the BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110.... This address may be used by anyone including employees, reentrants, friends, family, volunteers, visitors, contractors, vendors, and the general public.</p> <p>The CCC-Progress PAQ provided a web link and PREA posters that provided an address for written correspondence and a link to electronically report allegations of PREA through the Pennsylvania Department of Corrections public website. Informal interviews with Random Staff and Random Reentrant confirm that they are aware of the third party reporting option. Most were familiar with the address to the BCI/PREA Coordinator, some were aware of the public website access. During the onsite, the auditor observed the PREA posters throughout the facility.</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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training) 19 pages</li> <li>c. Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) 6 pages</li> <li>d. Policy BCC-ADM 008 Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) 5 pages</li> <li>e. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 (Attachment 4-D) First Responder Checklist</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. PREA Compliance Manager</li> <li>c. Investigative Lieutenant</li> <li>d. Random Staff</li> <li>e. Medical and Mental Health Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.261 (a) 1-3  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states all staff, contractors, and volunteers shall provide an immediate verbal report to the Facility Director/designee of any knowledge, suspicion, or information regarding an alleged incident of sexual abuse or sexual harassment that occurred in any facility (whether or not it is part of the Agency); 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 shall be documented on a DC-121, part 3-BCC. In the absence of a Facility Director, this notification will be made to the BCC-MOCC.... Note: If the report involves sexual abuse, the employee shall also complete first responder duties.</p> <p>The CCC-Progress PAQ provided a BCC PREA First Responder Checklist (Attachment 4-D) for auditor’s review. Interviews with Random Staff confirmed they were aware of their responsibilities regarding PREA reporting and could articulate how to respond to an allegation of sexual abuse. During the onsite the auditor noted that staff carried their PREA – Immediate Response Procedures pocket guide on their person.</p>

115.261 (b) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 state every report of sexual abuse or sexual harassment will be held in strict confidence; additional questioning or interviewing of the alleged victim, witnesses, or abuser(s) shall not be conducted by facility staff. The information shall not be shared amongst multiple staff or supervisors prior to contacting the BCC-MOC.... Apart from reporting to designated supervisors or officials, staff, contractors, and volunteers shall not reveal any information related to a sexual abuse report to anyone except those specified in this procedures manual, to make treatment, investigation, or other security and management decisions.

Interviews with Random Staff indicated they would immediately contact the Facility Director or the Lieutenant during business hours, if after hours they would call the BCC-MOC and seek further direction. They are aware that PREA reporting incidents are confidential and on a need to know basis only.

115.261 (c) 1

The Pennsylvania Department of Corrections Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual, Section 3 states that unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse, to inform inmates of the practitioner's duty to report, and the limitation of confidentiality, at the initiation of services.

Interviews with Medical and Mental Health Staff indicated that information disclosed shall be shared only on a need to know basis with indicated staff (i.e. Facility Director or Investigator, etc.). Staff indicated they understood their responsibility and the confidentiality requirements to protect the reentrant. Staff also reported that due to the average stay of approximately 90 days at the facility they have yet to perform these duties but they have been trained to provide this information to the reentrants. CCC-Progress reported zero allegations of sexual abuse in the past 12 months.

115.261 (d) 1

The Pennsylvania Department of Corrections Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual, Section 3 states if the alleged victim is under the age of 18, the Department shall refer the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual, Section 2 state that male youthful offenders shall be transferred to SCI-Pine Grove within 24 hours of reception by the Department. Female youthful offenders, under the age of 18 shall immediately be placed into the Youthful Inmate Unit at SCI-Muncy.

Interviews with the PREA Coordinator and the Facility Director confirmed this population is not housed at CCC-Progress. Informal interviews with Random staff verified youthful inmates are not housed at CCC-Progress. During the onsite the auditor did not observe any youthful offenders and no reentrant under the age of 18 is assigned to CCC-Progress according to the facility admission records.

115.261 (e) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states employees shall accept reports made verbally, in writing, anonymously, and from third parties, promptly document any verbal reports on a DC-121, Part 3-Bureau of community Corrections (BCC) Employee Report of Incident and immediately notify the Facility Director/designee.

Interviews with the Facility Director indicated they were all aware of the documentation requirement for allegations brought to their attention regardless of how it was received. During the onsite the auditor reviewed two investigations for sexual harassment and noted they were documented on the DC-121 appropriately. Informal interviews with the Investigative Lieutenant and Random Staff articulated the documentation requirement for any allegation of sexual abuse and sexual harassment to the audit team.

Corrective Action: None



<b>115.262</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) 5 pages</li> <li>c. BCC-ADM 008 Section 4 (Attachment 4-D) First Responder Checklist</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Agency Head</li> <li>b. Facility Director</li> <li>c. Random Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.262 (a) 1-4  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states when any employee learns that a reentrant is subject to a substantial risk of imminent sexual abuse, the employee shall take immediate action to protect the reentrant and verbally contact the Facility director/designee for additional direction. This information shall be documented on a DC-121, Part 3-BCC.</p> <p>The CCC-Progress PAQ reported that in the past 12 months zero number of times the agency or facility determined that a resident was subject to a substantial risk of imminent sexual abuse. Interviews with the Agency Head, Facility Director, Investigation Lieutenant and Random Staff indicated that the alleged victim and alleged abuser would be separated to protect the reentrant, notifications made to BCC-MOC, secure the area, and prepare to relocate the reentrants involved to another part of the facility or another facility.</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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 3 (Reporting Sexual Abuse and Sexual Harassment) 15 pages</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Agency Head</li> <li>b. Facility Director</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.263 (a) 1-3  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states upon receiving an allegation that a reentrant was sexually abused while confined at another facility, the Facility Director/designee shall document the receipt of the allegation via a DC-121, part 3-BCC and verbally notify the BCC-MOC without delay. The BCC-MOC shall prepare a confidential report; PREA Report – Sexual Abuse. The affected facility will be provided a copy of the confidential report and contact information in an electronic format for any follow-up questions. A copy of the notification and attachments shall be maintained in the Bureau Security Office case file.</p> <p>The CCC-Progress PAQ reported zero allegations were received of a reentrant being abused while confined at another facility. The Facility Director did report that the allegation would be reported to the BCC-MOC, the reentrant would be offered applicable services and notification between the BCC Director and the Facility Head of the affected facility would take place within 72 hours.</p> <p>115.263 (b) 1  Policy BCC-ADM 008 Procedures Manual, Section 3 states the Bureau Director will make initial contact with the Facility Director of the affected facility by utilizing the PREA Report – Sexual Abuse to coordinate any immediate actions that may need to be taken. The Bureau Director shall make follow-up contact with the affected Facility Director to make the formal notification to the affected facility within 72 hours of report.</p> <p>The CCC-Progress PAQ reported zero allegations were received of a reentrant being abused while confined at another facility within the past 12 months. Interviews with the Facility Director and the Investigative Lieutenant both confirmed there were no allegations received from</p>

another facility in the past 12 months.

115.263 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states upon receiving an allegation from another facility (Community Corrections Center [CCC], Community Contract Facility [CCF], State Correctional Institution [SCI], contract county Jail [CCJ], etc.) about an allegation of sexual abuse or sexual harassment, the Facility Director/designee shall document the receipt of the allegation via a DC-121, Part 3-BCC and verbally notify the BCC-MOC without delay.

The CCC-Progress PAQ reported zero allegations were received of a reentrant being abused while confined at another facility within the past 12 months therefore no documentation existed to be reviewed for the 72 hours' time limit.

115.263 (d) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 3 states upon receiving an allegation from another facility (Community Corrections Center [CCC], Community Contract Facility [CCF], State Correctional Institution [SCI], contract county Jail [CCJ], etc.) about an allegation of sexual abuse or sexual harassment, the Facility Director/designee shall document the receipt of the allegation via a DC-121, Part 3-BCC and verbally notify the BCC-MOC without delay.... The BCC-MCC will take action.

The CCC-Progress PAQ reported zero allegations were received of a reentrant being abused while confined at another facility within the past 12 months therefore no documentation existed to be reviewed. An interview with the Facility Director and Agency Head indicated that the investigation assignments will be made by the BCC-MOC. The initial point of contact is the Facility Director or the Superintendent. Per policy the designated PCM is notified then the security Captain. A copy of the allegation will go to the PREA Coordinator.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 4 (Responding to a Report of Sexual Abuse) 5 pages</li> <li>c. BCC-ADM Bureau of community Corrections PREA Procedures Manual Section 4 (Attachment 4-D) First Responder checklist</li> <li>d. First Responder Pocket Guide card</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. First Responders</li> <li>b. Random Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.264 (a) 1-11</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 4 states Upon learning of an allegation that a reentrant was sexually abused, the first staff member to respond shall take immediate action and:</p> <ol style="list-style-type: none"> <li>1. Call “911” if a physical or sexual assault is currently in progress;</li> <li>2. Escort the alleged victim to a safe location away from others;</li> <li>3. if the incident occurred within 96 hours of the reporting, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating;</li> <li>4. Notify the Facility Director/designee;</li> <li>5. Contact the BCC-MOC and follow all direction provided. The BCC-MOC will assess the situation and advise if it is appropriate to ensure the preservation of physical evidence contained on the alleged abuser;</li> <li>6. Do not interview the alleged victim or anyone else, simply report the current information;</li> <li>7. Preserve and protect any possible crime scene until appropriate steps can be taken to collect evidence;</li> <li>8. Do not take any photographs/video of the alleged victim or abuser;</li> <li>9. Complete the BCC First Responder Checklist (Attachment 4-D) and DC-121, Part 3-BCC; and</li> <li>10. Follow procedures and submit all other required written reports pursuant to this procedures manual.</li> </ol> <p>Note: If the first responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and</p>	

then notify security staff.

The CCC-Progress PAQ reported that zero allegations that a reentrant was sexually abused in the past 12 months. Zero times a security staff member responded to separate the alleged victim and abuser in the past 12 months. Zero times staff were notified within 96 hours to allow for collection of physical evidence in the past 12 months.

Interviews with the First Responders and Random Staff indicated that they were aware of their responsibilities responding to a sexual abuse. They were able to articulate to the auditor how they would respond to a sexual abuse, how it would be reported and what they would do to protect the crime scene and the alleged victim from the alleged perpetrator as well as protect any physical evidence that may still be present on the alleged victim or alleged perpetrator. They were in possession of their First Responder Pocket Guide and stated that they could use it as a reference during an incident. During the onsite the auditor reviewed the First Responder Pocket Guide and noted the actions indicated mirror the Staff first responder's duties listed in the federal PREA standards.

115.264 (b) 1-5

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 4 states upon learning of an allegation that a reentrant was sexually abused, the first staff member to respond shall take immediate action.... Note: If the first responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff....

The CCC-Progress PAQ reported zero allegations that a reentrant was sexually abused in the past 12 months. Zero responses by a non-security staff member where the staff member requested the alleged victim not take any actions that could destroy physical evidence. Zero responses by a non-security staff that a staff member notified security staff.

Interviews with the First Responders and Random Staff indicated that they were have all been trained in their responsibilities regarding Responding to allegations of sexual abuse. The non-security staff reported that they would notify the nearest security staff member or contact the Facility Director and the Investigation Lieutenant. The non-security staff were able to articulate what steps they would take to ensure that physical evidence was not compromised. The non-security staff stated they have not had to perform these duties but they would know what to do if it happened at CCC-Progress.

Corrective Action: None

115.265	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Procedures Manual, Section 4 (Responding to a Report of Sexual Abuse) 5 pages</li> <li>c. CCC-Progress Institution Plan, 3 pages</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.265 (a) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 4 states the facility shall develop a written facility plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>The CCC-Progress PAQ provided a CCC-Progress Institution Plan for the auditor’s review. The plan coordinated First Responder Duties, Facility Director Responsibilities, Emergency Medical Treatment Services, Mental Health Treatment Services, and provided a Reference guide for PREA policies and procedures.</p> <p>The plan directs the first responders to notify the BCC-MOC and the Facility Director. Immediately separate the alleged victim and alleged abuser. If the incident occurred within 96 hours, instruct the victim and perpetrator to not do anything that would destroy the physical evidence. Secure the reported crime scene. Complete a DC-121 Part 3-BCC.</p> <p>The Facility Director Responsibilities are to initiate the First Responder Checklist (Attachment 4-D) and ensure the alleged victim and alleged abuser are separated and request neither take actions that could destroy evidence. Secure all physical evidence including video, audio or photographic evidence of their incident. Notify the BCC-MOC to investigate procedures. Ensure completion of BCC-ADM forms (Attachment 4-D). Ensure alleged victim is offered SAFE/SANE if within 96 hours of incident. Document all refusals. Notify the hospital. Notify the victim advocate. Immediately contact the Pennsylvania State Police and document Trooper Name and Date/Time of contact. Complete DC-121 Part 2, Extraordinary Occurrence Report.</p> <p>The Emergency Medical Treatment Services are to offer the alleged victim evaluation by outside medical personnel and if alleged victim refuses, he/she must sign the DC-462,</p>

Release from Responsibility for Medical Treatment. If the alleged victim agrees they shall be immediately transported to SAFE/SANE for collection of forensic evidence.

Mental Health Treatment Services are to offer the alleged victim a medical health evaluation.

An interview with the Facility Director indicated that the plan provided everyone with a role and responsibilities in the event of an incident of sexual abuse specific to CCC-Progress and agency partners. It provides a road map to follow. The auditor reviewed the plan and noted the actions listed was was specific to the CCC-Progress.

Corrective Action: None

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual, Section 35 (Investigations)</li> <li>c. Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 5 – Suspension Without Pay for Exempt Employees Under the Fair Labor Standards Act and Suspension Pending Investigation for Exempt and non-Exempt Employees, 5 pages</li> <li>d. Memorandum to Superintendent Suspension Pending Investigation</li> <li>e. Suspension Pending Investigation Memo and Procedures</li> <li>f. FOSCEP Agreement 2016-2019</li> <li>g. CIVEA Agreement 2016-2019</li> <li>h. AFSCME – 1st level supervisors of H1 MOU 2017-2020</li> <li>i. AFSCME master Agreement 07-01-16 to 06-30-19</li> <li>j. PSCOA Interest Arbitration Award 2014-2017 Miller</li> <li>k. PSCOA Page 54 with memos</li> <li>l. OPEIU MOU 2016-2019</li> <li>m. PDA Agreement 2016-2019</li> <li>n. SEIU HCPA Agreement 2016-2019</li> <li>o. PSSU Agreement 2016-2019</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Agency Head</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.266 (a)  The Pennsylvania Department of Corrections Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual, Section 35 states depending on the seriousness of the allegation, an accused staff member, contract service provider, volunteer, intern, or an individual who has business with or uses the resources of the Agency may be suspended or otherwise removed from contact with offenders, pending the outcome of the investigation. This decision will be made by the Bureau Director/Designee on a case-by-case basis.</p> <p>Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 5 states the Department shall ensure that employee suspensions are consistent with the FLSA. FLSA-exempt employee suspensions without pay shall be for full work weeks, except in cases where the suspension is imposed in good faith for an employee's violation.</p>



The CCC-Progress PAQ submitted collective bargaining agreements with eight different unions. The Auditor reviewed the 8 union agreements and verified none of these collective bargaining agreements contain language that limit the ability to remove an alleged staff sexual abuser from contact with any inmates pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted. In addition, the collective bargaining agreements are silent regarding suspensions pending investigation. When the contract is silent on issues, policy then governs

An interview with the Agency Head indicated through binding arbitration, alleged staff abusers may face suspension of 30 days to termination.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008 Bureau of Community Corrections Security Procedures Manual, Section 5 (Investigations and Retaliation Monitoring)</li> <li>c. BCC-ADM 008 Section 5 (Attachment 5-A) Retaliation Monitoring</li> <li>d. BCC-ADM 008 Section 4 (Attachment 4-C) If You are the Reported Victim of Sexual Abuse English &amp; Spanish</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Agency Head</li> <li>b. Facility Director</li> <li>c. Designated Staff Member Charged with Monitoring Retaliation</li> <li>d. Random Staff</li> <li>e. Random Reentrants</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.267 (a) 1-2  The Pennsylvania Department of Corrections Policy BCC-ADM 008 Bureau of Community Corrections Security Procedures Manual, Section 5 states 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. Action may include: administrative and /or criminal investigation; housing change or transfers for alleged victims or alleged abusers; removals of alleged abusers from contact with alleged victims and or emotions support services for reentrants or staff.</p> <p>For at least 90 days, and longer if deemed necessary, following a report of sexual abuse, the PREA Compliance Manager (PCM) shall monitor the conduct and treatment of: reentrants who reported sexual abuse; reentrants who were reported to have suffered sexual abuse; staff who reported sexual abuse; and any other individual who cooperates with a sexual abuse or sexual harassment investigation and expresses fear of retaliation.</p> <p>An informal interview with the PREA Compliance Manager confirmed that he was the designated Retaliation Monitor for CCC-Progress. Informal interviews with Random Staff verified they were aware of the PCM's role as the Retaliation Monitor.</p> <p>115.267 (b) 1</p>

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Bureau of Community Corrections Security Procedures Manual, Section 5 states 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. Action may include: administrative and /or criminal investigation; housing change or transfers for alleged victims or alleged abusers; removals of alleged abusers from contact with alleged victims and or emotions support services for reentrants or staff.

Interviews with the Agency Head and the Facility Director indicated that reentrants could be moved to a different part of the facility if not to another facility. Safety of the reentrant is paramount. To protect staff communication between the Retaliation Monitor and the staff for up to 90 days to ensure that they are not experiencing any forms of retaliation. Any individual who expresses fear of retaliation will have access to emotional support staff and will be monitored for any indications of being retaliated against. The Retaliation Monitor for CCC-Progress is the Facility Director who will monitor the conduct and treatment of reentrants or staff who reported the sexual abuse or sexual harassment, and of reentrants who were reported to have suffered sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by other reentrants or staff and shall act promptly to remedy such retaliation. Items to be monitored include: disciplinary reports; housing reports; program changes; negative performance reviews; and reassignments of staff.

During the onsite the auditor reviewed BCC-ADM 008 Section 5 (Attachment 5-A) Retaliation Monitoring forms to confirm compliance with this subsection. Informal interviews with Random Staff and Random Reentrants verified to the auditor that they were aware of what retaliation is and how they would report it. Staff could articulate to the auditor the methods that would indicate when someone is being retaliated against.

#### 115.267 (c) 1-5

Policy BCC-ADM 008 Bureau of Community Corrections Security Procedures Manual, Section 5 states for at least 90 days, and longer if deemed necessary, following a report of sexual abuse, the PREA Compliance Manager (PCM) shall monitor the conduct and treatment of: reentrants who reported sexual abuse; reentrants who were reported to have suffered sexual abuse; staff who reported sexual abuse; and any other individual who cooperates with a sexual abuse or sexual harassment investigation and expresses fear of retaliation.

The PCM shall monitor these individuals to see if there are changes that may suggest retaliation by reentrants or staff by; reviewing the reentrant's disciplinary reports, infraction reports, program reports, and housing assignment; reviewing negative staff performance reviews or staff reassignment; negative interactions with other staff or other reentrants; meeting with the reentrant bi-weekly to discuss his/her progress; and document on the Retaliation Monitoring form (Attachment 5-A).

When retaliation is suspected, the PCM shall immediately notify the Facility Director/designee and Regional Director/designee so that appropriate steps may be taken by the Agency to protect the individual and remedy such retaliation.

The CCC-Progress PAQ reported that 90 days is the monitoring period for retaliation and

there were zero incidents of retaliation in the past 12 months. Interviews with the PREA Compliance Manager indicated he would watch the interaction between the staff and inmates to gauge their behaviors up to 90 days but would extend the time as needed. He confirmed there were no reports of retaliation in the past 12 months at the site.

115.267 (d) 1

Policy BCC-ADM 008 Bureau of Community Corrections Security Procedures Manual, Section 5 states

The PCM shall monitor these individuals to see if there are changes that may suggest retaliation by reentrants or staff by; reviewing the reentrant's disciplinary reports, infraction reports, program reports, and housing assignment; reviewing negative staff performance reviews or staff reassignment; negative interactions with other staff or other reentrants; meeting with the reentrant bi-weekly to discuss his/her progress; and document on the Retaliation Monitoring form (Attachment 5-A).

An interview with the PCM charged with retaliation monitoring reported that 90 days is the regular amount of time for monitoring. During the onsite the auditor reviewed the Retaliation Monitoring form (Attachment 5-A) and noted that the retaliation status checks were conducted within 12 days, 30 days, 60 days, and 90 day increments. An interview with the PCM charged with Monitoring Retaliation reported that the 90 days is the regular amount of time for monitoring.

115.267 (e) 1

Policy BCC-ADM 008 Bureau of Community Corrections Security Procedures Manual, Section 5 states for at least 90 days, and longer if deemed necessary, following a report of sexual abuse, the PREA Compliance Manager (PCM) shall monitor the conduct and treatment of: reentrants who reported sexual abuse; reentrants who were reported to have suffered sexual abuse; staff who reported sexual abuse; and any other individual who cooperates with a sexual abuse or sexual harassment investigation and expresses fear of retaliation.

Interviews with the Agency Head and the Facility Director indicated that any indications of retaliation toward a reentrant or staff will result in an investigation.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy ADM 008, Section 5 (PREA Procedures Manual)</li> <li>c. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 (Data Collections)</li> <li>d. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 (Investigations and Retaliation Monitoring)</li> <li>e. Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 35 (Investigations)</li> <li>f. Memorandum of Understanding (MOU) between the Pennsylvania Department of Corrections and the Pennsylvania State Police</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Investigative Lieutenant</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.271 (a) 1</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 5 states the Bureau director/designee shall ensure every reported incident/ allegation of sexual abuse/or sexual harassment of a reentrant is investigated promptly, thoroughly, objectively, and a confidential report complied as outlined in Department policy 8.3.1, Community Corrections Security, Section 35.</p> <p>The CCC-Progress PAQ submitted two samples of investigative reports for allegations of sexual harassment for auditor’s review. During the onsite the Auditor reviewed 2 Sexual Harassment investigations and confirmed they were prompt, thorough, and objective. The auditor noted the assigned investigator interviewed the alleged victim, witnesses, and the subject. The investigative reports were completed including a synopsis, summary of findings, conclusion, recommendations, and attachments. These were the only PREA investigations conducted at CCC-Progress in the past 12 months. Both allegations of Sexual Harassment were concluded as unfounded and completed with 30 days of assignment.</p> <p>Interviews with the Investigative Lieutenant reported he would start investigations within 24 hours if not immediately upon assignment by the BCC-MOC. He also stated that anonymous and third party reports would receive the same attention as the other reported allegations. If a case is being investigated for criminal charges, the Department investigators shall suspend the administrative investigation and allow the criminal investigation to take precedence. The Facility Director and/or BSII (Bureau of Special Investigations and Intelligence) shall</p>

coordinate with the criminal investigator/District Attorney's Office (as applicable) to determine when to assume administrative investigation so as to avoid interference with the criminal investigation. The Investigative Lieutenant reported he would start investigations within 24 hours if not immediately upon assignment by the BCC-MOC. He also stated that anonymous and third party reports would receive the same attention as the other reported allegations.

115.271 (b) 1

The CCC-Progress PAQ submitted Investigator training transcripts for 23 PREA Investigators verifying they completed their training pursuant to 115.234.

Interviews with the Investigative staff indicate that they completed the seven part PREA Investigation training and have attended updates since 2017. During the onsite the auditor reviewed an investigator's training record confirming that their PREA Investigator training was completed 06-28-2016, he received an update PREA policy training 02-10-2017, and his most recent PREA training was 12-10-2017.

115.271 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008 Procedures Manual, Section 2 states any employee who conducts sexual abuse investigations shall receive specialized training specific to confinement settings through the Department or other approved source. This training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative actions for prosecution referral.

An interview with the Investigative Lieutenant indicated that the BCC-MOC will assign an investigator and the number. He stated that depending on the allegation, it could be sent to Pennsylvania State Police. You have 30 days to complete the investigation. You review the incident reports, confiscate receipts, request slips, any video footage, phone call records, Kiosks, and consult with the Facility Director. Determine if there are witnesses, and conduct the interviews. If the Pennsylvania State Police take the investigation, the BII (Bureau of Special Investigations and Intelligence) takes on the role as liaisons.

115.271 (d-h)

The Pennsylvania Department of Corrections Policy ADM 008, Section 5 (PREA Procedures Manual) requires when the quality of evidence appears to support criminal prosecution, the Department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

The Pennsylvania Department of Corrections Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 35 (Investigations) states substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

The CCC-Progress PAQ reported there were zero allegations of sexual abuse in the past 12 months. The Auditor confirmed during the review of the two PREA investigative files that none

were referred out for prosecution of sexual abuse. Interviews with Investigators indicated the Pennsylvania State Police would consult with prosecutors if there were allegations of sexual abuse. Investigative staff were able to articulate their duties and responsibilities pursuant to this provision.

115.271 (i) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 states the Department shall retain all criminal and administrative agency investigative reports or as long as the alleged abuser is incarcerated.

An interview with investigative staff indicated that investigations were retained for the amount of time the alleged abuser is incarcerated plus 5 additional years. CCC-Progress reported two investigations of Sexual Harassment within the past 12 months that were concluded as Unsubstantiated and reviewed by the auditor.

115.271 (j) 1

Interviews with the PREA Compliance Manager and the Investigative Lieutenant indicated that the investigation would continue until its conclusion regardless of whether the staff resigned or the inmate released.

115.271 (k-l)

An MOU between the Pennsylvania Department of Corrections and the Pennsylvania State Police task the criminal investigations to the PSP.

Interviews with the PREA Coordinator, the Facility Director and the Investigative Lieutenant confirm when outside agencies investigate sexual abuse; the facility shall cooperate with outside investigators. BCC-MOC will endeavor to remain informed about the progress of the investigation. Law Enforcement criminal investigations will have first priority prior to an administrative investigation by the facility and only upon assignment from the BCC-MOC.

Corrective Action: None

115.272	<b>Evidentiary standard for administrative investigations</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="252 327 991 360">Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li data-bbox="252 416 432 450">1. Documents <ol style="list-style-type: none"> <li data-bbox="252 461 884 495">a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li data-bbox="252 506 1410 573">b. Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 35 (Investigations)</li> </ol> </li> <li data-bbox="252 674 655 707">2. Interviews with the following: <ol style="list-style-type: none"> <li data-bbox="252 719 517 752">a. Investigative Staff</li> </ol> </li> </ol> <p data-bbox="252 842 560 875">Findings (By Provision):</p> <p data-bbox="252 976 427 1010">115.272 (a) 1</p> <p data-bbox="252 1021 1481 1223">The Pennsylvania Department of Corrections 8.3.1 Bureau of Community Corrections Security Procedures, Manual Section 35 states no standard higher than a preponderance of the evidence (an event was more likely to have occurred or less likely to have occurred based on the evidence) shall be imposed in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p data-bbox="252 1267 1410 1346">The CCC-Progress PAQ reported there were only two PREA investigations in the past 12 months that were Unsubstantiated Sexual Harassment reports.</p> <p data-bbox="252 1402 1449 1559">An interview with 2 Investigators (facility/agency) indicated they would utilize the statements from the alleged victim, alleged abuser, witnesses, and examined evidence to reach a conclusion and make recommendations. The standard of evidence required to substantiate allegations of sexual abuse or sexual harassment would be the preponderance of evidence.</p> <p data-bbox="252 1659 560 1693">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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 (Notification to Reentrants) 2 pages</li> <li>c. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 (Data Collection)</li> <li>d. Policy 8.3.1. Bureau of Community Corrections Security Procedures Manual, Section 35 (Investigations)</li> <li>e. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 (Attachment 8-A) Notification to Reentrants</li> </ol> </li>   <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. Investigative Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.273 (a) 1-3  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 states following the investigation into the reentrant’s allegation that he or she suffered sexual abuse in a facility operated/contacted by the DOC, the PCM at the facility where reentrant is housed shall inform the reentrant within five business days, in writing, as to whether the allegation has been determined to be:</p> <ol style="list-style-type: none"> <li>1. Substantiated – an allegation that was investigated and determined to have occurred.</li> <li>2. Unsubstantiated – an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.</li> <li>3. Unfounded – an allegation that was investigated and determined not to have occurred.</li> </ol> <p>The Pennsylvania Department of Corrections Policy 8.3.1. Bureau of Community Corrections Security Procedures Manual, Section 35 states at the conclusion of the investigative process notifications shall be made to the alleged victim and abuser in accordance with BCC-ADM 008, section 8 for all PREA related cases.</p> <p>The CCC-Progress PAQ reported zero sexual abuse allegations were reported to the facility during the previous 12 months. Two PREA investigations were conducted on allegations of Sexual Harassment only.</p> <p>A interviews with the Facility Director and the Investigative Lieutenant confirmed zero</p>	

allegations of sexual abuse were reported at the facility in the past 12 months. During the onsite the auditor reviewed the PA DOC PREA tracking system (WebTAS) and verified no allegations of sexual abuse were reported to the facility.

115.273 (b) 1-3

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 states if another agency conducted the investigation, the Bureau of Community Corrections (BCC) PREA investigator will request the relevant information from the investigative agency and forward it to the PCM, who will inform the reentrant.

The CCC-Progress PAQ reported zero investigations of alleged resident sexual abuse in the facility were completed by an outside agency in the past 12 months. During the onsite the auditor reviewed the PA DOC PREA tracking system (WebTAS) and verified no allegations of sexual abuse were reported to the facility.

115.273 (c) 1-3

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 states 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:

1. The staff member is no longer posted within the reentrant's unit
2. The staff member is no longer employed at the facility
3. The agency learns the staff member has been criminally charged related to sexual abuse or sexual harassment within the facility; or
4. The agency learns that the staff member has been convicted on a charge related to sexual abuse or sexual harassment within the facility.

The CCC-Progress PAQ reported zero substantiated or unsubstantiated complaint of sexual abuse committed by a staff member against a resident in the past 12 months. Interviews with the Facility Director and the Investigative Lieutenant confirmed there were no reports of sexual abuse in the past 12 months at the facility. During the onsite the auditor reviewed the PA DOC PREA tracking system (WebTAS) and verified no allegations of sexual abuse were reported to the facility.

115.273 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 states 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;

1. The agency learns that the alleged abuser has been criminally charged related to the sexual abuse or sexual harassment within the facility; or
2. The agency learns that the abuser has been convicted on a charge related to sexual abuse or sexual harassment within the facility.

The CCC-Progress PAQ reported zero substantiated or unsubstantiated complaint of sexual abuse committed by a staff member against a resident in the past 12 months. This was verified through the PA DOC PREA tracking system (WebTAS).

115.273 (e) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 states the Prison Rape Elimination Act (PREA) Compliance Manager (PCM) shall document all notification or attempted notifications via the PREA Investigation Reentrant Notification form (Attachment 8-A).

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 8 states the following forms and reports shall be maintained by the BCC Security Office: PREA Investigation Reports and PREA Investigation Reentrant Notification Form (Attachment 8-A).

The CCC-Progress PAQ reported zero notifications to residents were provided pursuant to this standard. During the onsite the auditor reviewed two Sexual Harassment investigations were both concluded to be unsubstantiated. The auditor noted that the PREA Investigation Reports and PREA Investigation Reentrant Notification Form (Attachment 8-A) was present and part of the Investigation packet.

Corrective Action: None

115.276	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008, bureau of Community Corrections PREA Procedures Manual Section 7 (Disciplinary and Administrative Action)</li> <li>c. Policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 4 (Resignations in Lieu of Discharge (RILD))</li> <li>d. Policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 (Standardization of Pre-Disciplinary Conferences)</li> <li>e. Human Resources and Labor Relations 4.1.1-1, Bulletin</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Human Resources</li> <li>b. Facility Director</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.276 (a) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008, bureau of Community Corrections PREA Procedures Manual Section 7 states Department employees shall be subject to disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies. Discipline shall occur in accordance with Department policy 4.1.1 Human Resources and Labor Relations.</p> <p>The Pennsylvania Department of Corrections Human Resources and Labor Relations 4.1.1-1, Bulletin states Inmate Sexual Abuse: In accordance with the Prison Rape Elimination Act of 2003, Standard 115.76 (b), termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. In accordance with the Prison Rape Elimination Act of 1993, Standard 115.76 (c), disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the a 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>The Pennsylvania Department of Corrections Policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 state for PREA related violations, the information shall be reviewed by the Department's PREA Coordinator/designee at Central Office.</p> <p>An interview with the Resources staff reported that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p>

During the onsite CCC-Progress reported that no staff has been subject to any disciplinary or administrative actions up to and including termination.

115.276 (b) 1-2

The Pennsylvania Department of Corrections Human Resources and Labor Relations 4.1.1-1, Bulletin states Inmate Sexual Abuse: In accordance with the Prison Rape Elimination Act of 2003, Standard 115.76 (b), termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

The CCC-Progress PAQ reported zero staff from the facility have violated agency sexual abuse or sexual harassment policies in the past 12 months. During the onsite the Facility Director confirmed has not had a staff member disciplined for sexual abuse or sexual harassment in the past 12 months.

115.276 (c) 1-2

The Pennsylvania Department of Corrections Human Resources and Labor Relations 4.1.1-1, Bulletin states In accordance with the Prison Rape Elimination Act of 1993, Standard 115.76 (c), disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

The CCC-Progress PAQ reported zero staff from the facility have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies in the past 12 months. During the onsite the Facility Director confirmed has not had a staff member disciplined for sexual abuse or sexual harassment in the past 12 months.

115.276 (d) 1-2

The Pennsylvania Department of Corrections Policy 4.1.1, Human Resources and Labor Relations Procedures Manual Section 4 state RILD for PREA related offenses under Department Policy DC-ADM 008, PREA. In the event that a staff member resigns in lieu of discharge for violation of Department policy DC-ADM 008, the BHR shall notify the Office of Special Investigations and Intelligence (OSII) to determine if a potential criminal violation exists. If the violation meets criminal standards, OSII shall refer the matter to the District Attorney's Office that has jurisdiction over the affected facility. Whether or not the matter is referred to the District Attorney's Office, BHR shall notify any relevant licensing bodies.

The CCC-Progress PAQ reported zero number of staff from the facility have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.

Corrective Action: None



115.277	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <p>1. Documents</p> <p>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</p> <p>b. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 (Disciplinary and Administrative Action) 4 pages</p> <p>2. Interviews with the following:</p> <p>a. Facility Director</p> <p>Findings (By Provision):</p> <p>115.277 (a) 1-4  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states any contract employee or volunteer who engages in sexual abuse shall be prohibited from contact with reentrants and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>The CCC-Progress PAQ reported that zero contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents.</p> <p>115.277 (b) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states if a contractor or volunteer violates this procedures manual, 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>An interview with the Facility Director verified that any violation of the agency sexual abuse or sexual harassment policy by a contractor or volunteer would prompt the facility to cease the relationship between a contractor or volunteer from all 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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 (Disciplinary and Administrative Action)</li> <li>c Policy DC-ADM 801, Inmate Discipline Policy, 55 pages</li> <li>d. Policy DC-ADM 801, Inmate Discipline Procedures Manual Section 7 (Community Corrections)</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. Medical and Mental Health Staff</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.278 (a) 1-4  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states reentrants shall 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>The CCC-Progress PAQ reported zero administrative findings of resident-on-resident sexual abuse that have occurred at the facility and zero criminal findings of guilt for resident-on-resident sexual abuse that have occurred at the facility. During the onsite the auditor reviewed two Sexual Harassment investigations in which both were concluded as unsubstantiated.</p> <p>115.278 (b) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states 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.</p> <p>An interview with the Facility Director confirmed that any disciplinary sanctions imposed on an reentrant following an administrative or criminal finding that he engaged in reentrant-on-reentrant sexual abuse would be proportionate to the nature of circumstances of the abuse</p>



committed, the reentrant's disciplinary history, and the sanctions imposed for comparable offenses by other reentrant's with similar histories.

115.278 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states the disciplinary process shall consider whether a reentrant's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any should be imposed.

An interview with the Facility Director verified a reentrant with a mental disability or mental illness will have their mental state taken into consideration when determining disciplinary sanctions.

115.278 (d) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states if the allegations of sexual abuse has been substantiated, the reentrant abuser will be discharged from the facility where the sexual abuse occurred.

An interview with Medical and Mental Health Staff verified that a reentrant abuser would be discharged from CCC-Progress and transferred to another location. CCC-Progress does not offer therapy, counseling, or other intervention services designed to address and correct the underlying reasons or motivations of sexual abuse for the offender.

115.278 (e) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states 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.

The CCC-Progress PAQ reported zero substantiated occurrences of staff on reentrant sexual abuse during this rating period. During the onsite the auditor reviewed two sexual harassment investigations for the past 12 months and noted they were both concluded as unsubstantiated between two reentrants.

115.278 (f) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states 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, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Interviews with the Facility Director and the Investigative Lieutenant confirmed that no

reentrant has been disciplined for report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.278 (g) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 7 states the Department prohibits any sexual activity between reentrants and 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 (meaning it is consensual).

During the onsite the auditor reviewed DC-ADM 801 Inmate Discipline Procedures Manual, Section 1 and noted the Class I Charges (Formal Resolution Only) for misconduct: Rape, Involuntary deviate sexual intercourse, Engaging in sexual acts with others or sodomy, Sexual Harassment, and Indecent exposure.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM Bureau of community Corrections PREA Procedures Manual Section 4 (Responding to a Report of Sexual Abuse)</li> <li>c. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 (Attachment 4-E) Responding to a Report of Sexual Abuse</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. Medical and Mental Health Staff</li> <li>c. First Responders</li> <li>d. SAFE/SANE</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.282 (a) 1-3  The Pennsylvania Department of Corrections Policy BCC-ADM Bureau of community Corrections PREA Procedures Manual Section 4 states 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 a health practitioners according to their professional judgement.</p> <p>The CCC-Progress PAQ reported that the nature and scope of such services are determined by medical and health practitioners according to their professional judgment. The medical and mental health staff maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided.</p> <p>An interview with the Medical and Mental Health Staff confirmed that they would use (Attachment 4-E) English &amp; Spanish, Responding to a Report of Sexual Abuse form to document unimpeded access to emergency medical treatment and crisis intervention services. During the onsite the auditor reviewed the form and noted that it asks three specific questions, they may choose to either accept or decline a medical examination, a mental health evaluation, and rape crisis services. The form is then signed and dated by both the reentrant and the PCM/Designee. The interviews also verified there were zero reports of sexual abuse in the past 12 months at the facility.</p> <p>115.282 (b) 1</p>

The Pennsylvania Department of Corrections Policy BCC-ADM Bureau of community Corrections PREA Procedures Manual Section 4 states the BCC-MOC shall complete duties as outlined in Section 2 of this procedures manual to include the coordination of initial medical and mental health services by an external provider.

Interviews with First Responder Staff confirmed upon learning of an allegation that a reentrant was sexually abused, the first staff member to respond shall take immediate action and:

1. Call "911" if a physical or sexual assault is currently in progress;
2. Escort the alleged victim to a safe location away from others;
3. if the incident occurred within 96 hours of the reporting, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating;
4. Notify the Facility Director/designee;
5. Contact the BCC-MOC and follow all direction provided. The BCC-MOC will assess the situation and advise if it is appropriate to ensure the preservation of physical evidence contained on the alleged abuser;
6. Do not interview the alleged victim or anyone else, simply report the current information;
7. Preserve and protect any possible crime scene until appropriate steps can be taken to collect evidence;
8. Do not take any photographs/video of the alleged victim or abuser;
9. Complete the BCC First Responder Checklist (Attachment 4-D) and DC-121, Part 3-BCC; and

During the onsite the auditor did note that staff had easy access to their First Responder Pocket Guide and would refer to the Guide as needed. The staff reported they would immediately separate the alleged victim and alleged perpetrator to protect the victim. Contacting the Facility Director or Investigative Lieutenant during business hours. The BCC-MOC if the incident was reported after business hours for coordination.

#### 115.282 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM Bureau of community Corrections PREA Procedures Manual Section 4 states the PCM shall coordinate medical services and referrals for treatment in the community, in accordance with professionally accepted standards, to include: pregnancy tests for victims of sexually abuse 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.

An MOU between CCC-Progress and the Washington Health System (Greene) state a resident who is a victim of an alleged sexual abuse may be transported to Hospital for a Sexual Assault Nurse Examiners (SANE) or Sexual Assault forensic Examiners (SAFE).

CCC-Progress reported zero allegations of sexual abuse in the past 12 months. Interviews with the Medical and Mental Health staff confirm that resident victims of sexual abuse while incarcerated would be offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis while at the Washington Health System (Greene) Hospital.

115.282 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM Bureau of community Corrections PREA Procedures Manual Section 4 states services shall be provided without financial cost to the alleged victim and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident. This financial obligation ends when the reentrant is released from the facility. Any financial obligation incurred by the facility shall be reported to the Bureau Director/designee.

Interviews with SAFE/SANE, Medical and Mental Health Staff, and the Facility Director confirmed that treatment services would be provided to the victim without financial cost.

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 (documents, interviews, site review):

1. Documents

- a. CCC-Progress Pre-Audit Questionnaire (PAQ)
- b. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 (Responding to a Report of Sexual Abuse)
- c. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 (Attachment 4-C) English and Spanish, Notification
- d. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 (Attachment 4-E) English and Spanish, Victim of Sexual Abuse Services Offered

2. Interviews with the following:

- a. PREA Compliance Manager
- b. Medical and Mental Health Staff

Findings (By Provision):

115.283 (a-b) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 states the PCM shall coordinate 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. This includes follow-up services, treatment plans, and referrals for continued care following their release from the facility.

The CCC-Progress PAQ submitted to forms for auditor’s review (Attachment 4-C) English and Spanish, Responding to a Report of Sexual Abuse and (Attachment 4-E) English and Spanish, Victim of Sexual Abuse Services Offered. The auditor reviewed both forms.

The (Attachment 4-C) form provides the following information for reentrants. You will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Medical treatment and crisis intervention services will be provided without financial cost to you. Administrative and criminal investigations will be completed for all allegations of sexual and sexual harassment. Allegations of sexual abuse and sexual harassment will be investigated by the PA DOC or referred to an agency with legal authority to conduct criminal investigations. Victims will be notified of the investigative outcome. You will be monitored for follow-up for at least 90 days following a report of sexual abuse to ensure you are free from retaliation. You may contact the PREA Compliance Manager or you may write to Pennsylvania Coalition Against Rape (PCAR) and/or the BCI/PREA Coordinator.

The (Attachment 4-E) form asks three specific questions, they may choose to either accept or decline a medical examination, a mental health evaluation, and rape crisis services. The form is then signed and dated by both the reentrant and the PCM/Designee.

An interview with the Medical and Mental Health Staff as well as the PREA Compliance manager confirm that these forms would be utilized to ensure the reentrant was aware of services offered and the timelines for these services. The interviews also confirmed there were zero reports of sexual abuse in the past 12 months at the facility.

#### 115.283 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 states medical and mental health referrals shall occur to locations providing services consistent with the community level of care.

An interview with the Medical and Mental Health Staff as well as the PREA Compliance Manager verified there were zero reports of sexual abuse in the past 12 months at the facility. The PREA Compliance Manager also confirmed that he would ensure coordination for these services took place in the event of an allegation of sexual abuse.

#### 115.283 (d-f)

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 states the PCM shall coordinate medical services and referrals for treatment in the community, in accordance with professionally accepted standards, to include: pregnancy tests for victims of sexually abuse 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.

The CCC-Progress PAQ reported there were no female reentrants housed at the facility. Interviews with the Medical and Mental Health Staff as well as the PREA Compliance Manager verified there were no female reentrants at the facility. During the onsite the auditor did not observe any female reentrants. Also during the onsite the auditor verified there were zero reports of sexual abuse in the past 12 months at the facility through the PREA Tracking system (WebTAS).

#### 115.283 (g) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 states services shall be provided without financial cost to the alleged victim and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident. This financial obligation ends when the reentrant is released from the facility. Any financial obligation incurred by the facility shall be reported to the Bureau Director/designee.

Interviews with the PREA Compliance Manager and the Medical and Mental Health Staff indicated they were aware of the zero financial cost to the alleged victim and it's documented

on the (Attachment 4-E) Notification form and the (Attachment 4-C) Victim of Sexual Abuse Services Offered form. During the onsite the auditor verified there were zero reports of sexual abuse in the past 12 months at the facility through the PREA Tracking system (WebTAS).

115.283 (h) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 4 states the facility shall attempt 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.

An informal interview with the Facility Director indicated that while this could be facilitated, the programming time at CCC-Progress averages out to a 90 days stay, some reentrants can be released earlier if there "Home" plan is completed and approved. An interview with the Medical and Mental Health Staff also verified that due to the average short stay at CCC-Progress it would be unlikely for the reentrant abuser to still remain at the facility once found complicit of an abuse. During the onsite the auditor verified there were zero reports of sexual abuse in the past 12 months at the facility through the PREA Tracking system (WebTAS).

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 (Sexual Abuse Incident Review) 4 pages</li> <li>c. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 (Attachment 6-A) SAIR form</li> <li>d. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 (Attachment 6-B) SAIR Plan of Action form</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Facility Director</li> <li>b. PREA Compliance Manager</li> <li>c. Incident Review Team</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.286 (a-b)</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 states a Sexual Abuse Incident Review (SAIR) shall be conducted at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated. No review will be conducted if the allegation has been determined to be unfounded. The review shall occur within 30 calendar days of notice of satisfactory completion of the investigation. These reviews must take place for ALL sexual abuse investigations, whether they are conducted by the Bureau Security Division or the Office of Special Investigation and Intelligence (OSII).</p> <p>The CCC-Progress PAQ reported zero number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility. The PAQ also reported zero Sexual Abuse Incident Reviews were conducted in the past 12 months.</p> <p>An interview with the Facility Director confirmed zero allegations of sexual abuse in the past 12 months. During the onsite the auditor the PREA tracking system (WebTAS) verified zero allegations of sexual abuse in the past 12 months.</p> <p>115.286 (c) 1</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 states The Prison Rape Elimination Act</p>

(PREA) Compliance Manager (PCM) will co-chair the SAIR committee with the Regional Director and determine the exact composition of the team based on the nature of the incident. At a minimum, the SAIR Team may involve the: 1. Regional Director; 2. Facility Director/designee; 3. Other designated manager or supervisor; 4. Bureau of Community Corrections (BCC) Investigator; 5. Facility counselor; 6. Facility medical/mental health practitioner; and 7. Department PREA Coordinator (for Department sites) or contract Agency PREA Coordinator (when necessary).

An interview with the Facility Director confirmed that he would be on the SAIR team for any completed investigations of sexual abuse that occur at CCC-Progress and they would utilize (Attachment 6-A) SAIR form and (Attachment 6-B) SAIR Plan of Action form to ensure corrective action was completed. During the onsite the auditor noted zero SAIR were conducted for CCC-Progress in the past 12 months.

#### 115.286 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 states the SAIR Committee shall utilize all available information and reports to: 1. Consider whether the incident or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 2. 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; 3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable sexual abuse; 4. Assess the adequacy of staffing levels in that area during different shifts; 5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; 6. Utilize the PREA Sexual Abuse Incident Review to prepare a confidential report its findings and recommendations.

An interview with the Facility Director confirmed that sections 1-5 would be adhered to should a SAIR be conducted at CCC-Progress. He reported he would be responsible for ensuring the Plan of Action for improvement was completed. Zero sexual abuse investigations were conducted in the past 12 months at this facility. During the onsite the auditor the PREA tracking system (WebTAS) verified zero allegations of sexual abuse in the past 12 months.

#### 115.286 (e) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 states the Facility Director/designee shall implement the recommendations for improvement, or shall document reasons for not doing so. The PCM will provide a copy of the documentation to the Bureau Director/designee.

An interview with the Facility Director reported that the Plan of Action was his responsibility to complete, any parts or portions that could not be completed would need to be documented and justified. A notification email to the Bureau Director/designee would be sent out.

Corrective Action: None



115.287	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 (Data Collection) 4 pages</li> <li>c. Pennsylvania Department of Corrections PREA Annual Reports 2017, 2016, and 2105</li> <li>d. SSV Incident Forms PA DOC</li> <li>e. BJS PA DOC Survey of Sexual Victimization</li> <li>f. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 (Attachment 6-A) SAIR form</li> <li>g. BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 6 (Attachment 6-B) SAIR Plan of Action form</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.287 (a) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 states the Bureau of Standards, Audits, and Accreditation (BSAA) shall 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.</p> <p>The CCC-Progress PAQ submitted PA DOC PREA annual reports for the past three years as well as a samples of an SSV Incident Form and BJS Survey of Sexual Victimization form for the auditor’s review.</p> <p>An informal interview with the PREA Coordinator reported PA DOC collects uniform data for every allegation of sexual abuse at its facilities by using a standardized instrument and set of definitions. The incident based date includes data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency aggregates the incident based sexual abuse data annually and it’s posted on the Agency’s public website. During the onsite the auditor confirmed the PREA annual reports were listed. The auditor also noted that the information contained in the Sexual Abuse Incident Review reports provided another tool to collect data. The Agency’s set of definitions mirror the federal PREA standards (115.6).</p>

115.287 (b) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 states the BSAA shall review data collected and aggregate it annually pursuant to PREA Auditing Standards in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by; 1. Identifying problem areas; 2. Taking corrective action on an ongoing basis; and 3. Preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole.

An informal interview with the PREA Coordinator indicated the Sexual Abuse Incident Review reports provided another tool to collect data. The auditor was able to confirm the information captured in the (Attachment 6-A) SAIR form and (Attachment 6-B) SAIR Plan of Action form contain the data utilized in the PA DOC PREA Annual Report. The auditor was able to confirm the PA DOC public website did include PREA Annual Reports for the past three years 2015, 2016, and 2017.

115.287 (c) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 states incident based aggregate data will also be collected from every private facility the Department contracts with for the confinement of reentrants... The Department will produce an annual PREA report, capturing data from January 1 to December 31, and will provide the following information: 1. The number of allegations made at each facility; 2. The number of substantiated, unsubstantiated, and unfounded investigations completed as of December 31 each year; 3. The number of ongoing investigations as of December for each facility; 4. Comparison of the rates of incidents for each facility from the preceding year to the current report year and 5. Any additional information that is required by the Survey of Sexual Violence required by the Department of Justice.

The CCC-Progress PAQ submitted PREA Annual Reports for 2015, 2016, and 2017. The auditor confirmed the PREA Annual Reports were posted in the PA DOC public website and contained the data from January 1 through December 31 for all PA DOC facilities.

115.287 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 states all data information shall be maintained, reviewed, and collected as needed from all available incident based documents, including reports, investigation files, and sexual abuse incident reviews.

The CCC-Progress PAQ reported data collection for the PA DOC PREA Annual Reports are retrieved from the PREA tracking system (WebTAS) and the Sexual Abuse Incident Reviews. An interview with the PREA Coordinator confirmed that all data pertaining to allegations of sexual abuse and sexual harassment is tracked from the first incident report, investigation file, sexual abuse incident review, and through monthly reports from the facility's PREA Compliance Manager to the Agency's PREA Coordinator.

115.287 (e) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 states incident based aggregate data will also be collected from every private facility the Department contracts with for the confinement of reentrants.

Private facilities are required to report their incident based aggregated data on a monthly basis via BCC forms as they do not have access to the agency's PREA tracking system. PA DOC staff upload the data from hardcopy form into the system where the information is electronically stored. The PREA Coordinator verified this practice.

115.287 (f) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of Community Corrections PREA Procedures Manual Section 1 states the Annual PREA Report shall be approved by the Secretary, provided to the Department of Justice, and posted on the Department website by June 30 of each year.

The CCC-Progress PAQ submitted three PA DOC PREA Annual Reports for 2015, 2016, and 2017. The auditor reviewed the PA DOC public website and noted that the annual reports for the past three years are posted on the website and the auditor also noted that the PA DOC Secretary's signature approving each annual report.

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 (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 (Data Collection) 4 pages</li> <li>c. Pennsylvania Department of Corrections PREA Annual Reports 2017, 2016, 2015, 2014, and 2013</li> <li>d. Pennsylvania Department of Corrections public website (www.cor.pa.gov)</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. Agency Head</li> <li>b. PREA Coordinator</li> <li>c. Facility Director</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.288 (a) 1  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 state the Bureau of Standards, Audits, and Accreditation (BSAA) shall review data collected and aggregate it annually pursuant to PREA Auditing Standard 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by: 1. Identifying problem areas; 2. Taking corrective action on an ongoing basis; and 3. Preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole.</p> <p>The statistical data provided in the annual PREA reports for all Department of Corrections operated facilities and Contract Community Confinement Facilities (CCFs) is collected from the electronic record maintained by the agency’s Bureau of Special Investigations and Intelligence (BSII) case management system and the PREA Tracking System (PTS). The system was developed to capture all allegations reported under the Prison Rape Elimination Act and the information necessary to generate the US Department of Justice, Bureau of Justice Statistics Survey of Sexual Victimization (SSV).</p> <p>Interviews with the Agency Head and the PREA Coordinator confirmed that monthly PREA reports are submitted from the PREA Compliance Managers to the agency PREA Coordinator.</p> <p>115.288 (b) 1-2  The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community</p>

Corrections PREA Procedures Manual Section 1 state the report shall include 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 shall provide an assessment of the Department's progress in addressing sexual abuse.

The CCC-Progress PAQ submitted PREA Annual Reports 2017, 2016, 2015 for reviews. The auditor accessed the Pennsylvania Department of Corrections public website and noted that the PREA Annual Reports for 2017, 2016, 2015, 2014 and 2013 were posted. The PREA Audit Reports contained the following segments; 1. Introduction; 2. Prevention; 3. Training; 4. External Collaboration; 5. Incident Based Analysis; 6. Actions to Enhance Effectiveness; and 7. Conclusion. The PREA Annual report compared statistical data from the previous year to the current year. The annual report also provides an assessment of the agency's progress in addressing sexual abuse. The PREA Annual Reports were then signed by the PREA Coordinator, Director of Standards Audit and Accreditation, Executive Deputy Secretary, and the Secretary of the PA DOC.

115.288 (c) 1-3

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 state the Annual PREA Report shall be approved by the Secretary, provided to the Department of Justice, and posted on the Department website by June 30 of each year.

Interviews with the Agency Head confirmed that anyone can access the PREA Annual Reports on the PA DOC public website. The auditor accessed the Pennsylvania Department of Corrections public website and noted that the PREA Annual Reports for 2017, 2016, 2015, 2014 and 2013 were posted. The PREA Annual Reports were then signed by the PREA Coordinator, Director of Standards Audit and Accreditation, Executive Deputy Secretary, and the Secretary of the PA DOC.

115.288 (d) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 state specific identifying information collected for reporting purposes shall be redacted so that no individual is identifiable. In addition, the Department may redact specific material from the reports when publication would present a clear and specific danger to a facility, but must indicate the nature of the material redacted.

Interviews with the PREA Coordinator confirmed any personal identifying information (PII) is redacted from the PREA Annual Reports. It would be redacted and noted. The only information redacted is the Secretary of the Department's email address.

Corrective Action: None



115.289	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. Documents <ol style="list-style-type: none"> <li>a. CCC-Progress Pre-Audit Questionnaire (PAQ)</li> <li>b. Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 (Data Collection) 4 pages Historical data since August 20, 2012</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> </ol> <p>Findings (By Provision):</p> <p>115.289 (a)</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 state the Department shall security 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 collection unless federal, state, or local law requires otherwise.</p> <p>The CCC-Progress PAQ reported the 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 access by members of the PREA Compliance Division.</p> <p>An interview with the PREA Coordinator confirmed that only identified individuals within the agency have access to the PREA Tracking System as it is password protected with security restrictions.</p> <p>115.289 (b) 1-2</p> <p>The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 state the Department shall make all aggregated sexual abuse data information listed in subsection A.4. above, from facilities under its direct control and contracted facilities, readily available to the public through the Department website, at least annually.</p> <p>The auditor reviewed PREA Annual Reports for 2017, 2016, 2015, 2104, and 2013. The agency aggregates the incident based sexual abuse data annually and it’s posted on the Agency’s public website.</p>

115.289 (c) 1-2

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 state specific identifying information collected for reporting purposes shall be redacted so that no individual is identifiable. In addition, the Department may redact specific material from the reports when publication would present a clear and specific danger to a facility, but must indicate the nature of the material redacted.

The CCC-Progress PAQ reported the data is maintained by the Agency's PREA Compliance Division on its secure drive and within the Agency's PREA Tracking System (PTS). Sexual abuse data collected is maintained for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.

An informal interview with the PREA Coordinator confirmed any personal identifying information (PII) is redacted from the PREA Annual Reports. It would be redacted and noted. The auditor reviewed the PREA Annual Reports for 2017, 2016, and 2015. The agency removed all personal identifiers from the reports.

115.289 (d) 1

The Pennsylvania Department of Corrections Policy BCC-ADM 008, Bureau of community Corrections PREA Procedures Manual Section 1 state the Department shall security 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 collection unless federal, state, or local law requires otherwise.

The CCC-Progress PAQ reported the sexual abuse data collected is maintained for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise. The PREA Tracking System (PTS) has been operational as of June 30, 2014 for the agency.

Corrective Action: None

<b>115.401</b>	<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="252 327 434 360">1. Documents</p> <p data-bbox="252 371 1193 405">a. Pennsylvania Department of Corrections Public Website Audit Cycle 2</p> <p data-bbox="252 416 1485 488">b. Pennsylvania Department of Corrections Public Website PREA Audit Schedule Year 2 &amp; 3 of Audit Cycle 2 and Year 1 of Cycle 3</p> <p data-bbox="252 584 657 618">2. Interviews with the following:</p> <p data-bbox="252 629 523 663">a. PREA Coordinator</p> <p data-bbox="252 712 555 745">3. Auditor observations</p> <p data-bbox="252 757 466 790">a. Onsite review</p> <p data-bbox="252 887 561 920">Findings (By Provision):</p> <p data-bbox="252 969 427 1003">115.401 (a) 1</p> <p data-bbox="252 1014 1465 1178">The auditor confirmed through the Pennsylvania Department of Corrections Public Website that during the three year period starting August 20, 2013, and during each three year period thereafter, the agency ensured each facility operated by the agency, or by a private organization of behalf of the agency, is audited at least once.</p> <p data-bbox="252 1227 1485 1391">The Pennsylvania Department of Corrections Public Website provided the auditor with the agency PREA audit schedule from 2014 to 2019. It also provided the sites and the dates they received their Final Report for their PREA audit. The website also identifies future dates for the PA DOC to be audited through 2020.</p> <p data-bbox="252 1485 427 1518">115.401 (b) 1</p> <p data-bbox="252 1529 1485 1648">During each one year period starting on August 20, 2013, the agency shall ensure that at least one third of each facility type operated by the agency, or by a private organization on behalf of the agency is audited.</p> <p data-bbox="252 1697 1485 1906">An interview with the PREA Coordinator indicated that the Pennsylvania Department of Corrections has 25 State Correction Institutions and 11 Community Confinement facilities operated by the state. The auditor reviewed the PA DOC public website and noted it provided past PREA audit schedules and future dates for additional audits. The agency has met the one third requirement for cycle 2.</p> <p data-bbox="252 2000 427 2033">115.401 (h) 1</p> <p data-bbox="252 2045 1485 2163">During the onsite, the audit team had unfettered access to all areas of the facility. We reviewed the outside recreation area, the fenced perimeter, every office and space on the first floor, second floor, stairwells, and the storage rooms. We accessed every door with an area</p>

behind it to include janitor closets. We had access to the operations of the facility and participated in the Intake process.

115.401 (i) 1

The audit team had access to all documentation, hard copy or electronic. The CCC-Progress staff were extremely helpful and provided reports, files, and records at facility and agency level as requested. The team was permitted to take photographs onsite to support audit findings.

115.401 (m) 1

During the onsite the audit team asked for and received a list of reentrants currently assigned to CCC-Progress. Reentrants to be interviewed were identified by the audit team and the facility staff ensured the reentrants were available. The team successfully completed 20 private interviews with the reentrants in a secure office. The PREA Compliance Manager reported that the average population is 85 for the facility. The population count for CCC-Progress during the onsite was 95.

115.401 (n) 1

The Facility Director posted the PREA Audit Notices on January 14, 2019 and scanned the audit team photographs of the posting. Seven photos were taken of the PREA Audit Notice posted in the common areas of the facility. This occurred six weeks prior to the Audit Team arrival for the onsite review. The notices were observed by the audit team during the onsite.

During the Random Reentrant interviews, the reentrants confirmed the PREA Audit Notices have been posted for a while. The PREA Audit Notices informed the reentrants that confidential information or information to the auditor would be treated in the same manner as if they were communicating with legal counsel. The audit team did not receive any correspondences from CCC-Progress.

Corrective Action: None

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <p>1. Documents</p> <p>a. Pennsylvania Department of Corrections Public Website Audit Cycle 2</p> <p>b. Pennsylvania Department of Corrections Public Website PREA Audit Schedule Year 2 &amp; 3 of Audit Cycle 2 and Year 1 of Cycle 3</p> <p>2. Interviews with the following:</p> <p>a. PREA Coordinator</p> <p>Findings (By Provision):</p> <p>115.403 (a)</p> <p>The Pennsylvania Department of Corrections public website has a link dedicated to PREA information. The website provides agency PREA Policy and Procedures, How to Report a PREA allegation, PREA Audit schedules, and previous final PREA Audit Reports for the state facilitates. The previous PREA Audit for CCC-Progress in posted on the public web site and was final June 14, 2016.</p> <p>An interview with the PREA Coordinator confirmed that within 90 days of receipt by the PREA auditor, the final PREA Audit Report is posed on the website.</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)	<b>Supervision and monitoring</b>	
	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)	<b>Limits to cross-gender viewing and searches</b>	
	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)	<b>Limits to cross-gender viewing and searches</b>	
	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)	<b>Limits to cross-gender viewing and searches</b>	
	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.)	na

<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.)	na

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

115.241 (a)	<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)	<b>Resident reporting</b>	
	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)	<b>Resident reporting</b>	
	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)	<b>Resident reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes

115.252 (a)	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na

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

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

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

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

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



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

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

<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?	no

<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.)	na

<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.)	na

<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