

# PREA Facility Audit Report: Final

**Name of Facility:** State Correctional Institution Greene

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 02/26/2020

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> Dave Cotten	<b>Date of Signature:</b> 02/26/2020

AUDITOR INFORMATION	
<b>Auditor name:</b>	Cotten, Dave
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<b>Email:</b>	ddcotten55@gmail.com
<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	01/13/2020
<b>End Date of On-Site Audit:</b>	01/15/2020

<b>FACILITY INFORMATION</b>	
<b>Facility name:</b>	State Correctional Institution Greene
<b>Facility physical address:</b>	169 Progress Drive, Waynesburg, Pennsylvania - 15370
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Karen Sokol
<b>Email Address:</b>	ksokol@pa.gov
<b>Telephone Number:</b>	7248525585

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Robert D. Gilmore
<b>Email Address:</b>	rogilmore@pa.gov
<b>Telephone Number:</b>	724 852 2902

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Karen Sokol
<b>Email Address:</b>	ksokol@pa.gov
<b>Telephone Number:</b>	M: 724.852.2902.1551

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	William Nicholson
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<b>Telephone Number:</b>	724 852 2902 x1146

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	1853
<b>Current population of facility:</b>	1765
<b>Average daily population for the past 12 months:</b>	1765
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	
<b>Age range of population:</b>	19-83
<b>Facility security levels/inmate custody levels:</b>	2, 3, 4, 5
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	745
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	118
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	82

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>Email Address:</b>	██████████
<b>Telephone Number:</b>	██████████

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

## AUDIT FINDINGS

### **Narrative:**

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

The on-site PREA Audit of the State Correctional Institute (SCI) Greene, (adult male prison) of the Pennsylvania Department of Corrections (PADOC) was conducted on January 13-15, 2020. The audit was conducted by Dave Cotten, a certified National PREA auditor under contract with the PREA Auditors of America, LLC.

During the pre-audit phase PADOC and SCI Greene provided the auditor with pre-audit documentation using the on-line audit system (OAS). SCI Greene notified the auditor, on December 4, 2019, of the posting of the upcoming audit notice containing the auditor's name and contact information to allow for confidential correspondence with the auditor prior to the on-site audit phase. Per the facility notification and photos of the posting locations, all inmates and staff could access this information for at least six weeks prior to the on-site audit.

Several email or phone conversations transpired between the auditor and the facility PREA Compliance Manager prior to the on-site to discuss logistics, additional documentation and items needed for the on-site visit.

An initial in-brief and welcome meeting was held at 8:00 a.m. on January 13, 2020 with SCI Greene Superintendent Robert Gilmore, PADOC PREA Coordinator David Radziewicz, Facility PREA Compliance Manager (PCM) Karen Sokol and numerous other administrative/management/supervisory staff. Staff introduced themselves and provided professional background as did the auditor. The Superintendent provided the auditor with an overview of the SCI Greene and the offender population it serves.

The auditor was given a complete tour of the facility led by the Superintendent, PREA Coordinator and PCM. Throughout the tour, the auditor observed the notices of this PREA audit in all the buildings, as well as posters that called attention to the PADOC's Zero Tolerance Policy and how to report allegations of sexual abuse and sexual harassment.

Three areas were observed during the facility tour which could allow for cross gender viewing of inmates. A discussion with the Superintendent and PCM resulted in corrective action being taken by the facility to lessen the chance of cross gender viewing of offenders while not adversely affecting security. The facility completed the adjustments/construction and provided the auditor with photos of the completed projects prior to the initial report being submitted. The auditor did observe two areas of completion while still on-site and did observe the active construction of the other. Details of the corrective actions are noted in the specific standards in this report. Another area, while not attached directly to a specific standard, was a cause of concern due to a blind spot being created for no operational need and could be easily corrected. The facility again responded quickly and addressed the blind spot prior to the conclusion of the on-site and was reviewed by the auditor.

Following the tour, the auditor began the interviews and reviews of investigative files, training and personnel files, offender files, and documents.

A total of forty (40) inmates were interviewed using the inmate questionnaires. Of the 40, five were interviewed as LEP/disabled, five were interviewed as LBGTI, four inmates who had reported sexual abuse and three who disclosed victimization at screening. Twenty-four (24) of those interviewed were randomly selected, by the auditor, from a list of all the offenders by their housing assignment at the facility. The auditor received five letters of correspondence from offenders prior to the on-site and two after the on-site.

Twelve (12) staff were interviewed who were randomly selected by the auditor from all three shifts and/or other areas. Twenty-two (22) interviews were conducted with nineteen (19) specialized staff with three staff interviewed who functioned in multiple specialized duties. Specialized interviews included the Superintendent, PREA Coordinator, PREA Compliance Manager, contract administrator, intermediate/higher level supervisors who make unannounced rounds, medical staff, mental health the human resources manager, administrative investigator, staff who conduct screening for risk of abuse or victimization, intake staff, an incident review team member, the staff member who monitors for retaliation, a representative for SANE at the local hospital, volunteers and first responders. The agency head interview was conducted previously by another auditor and provided to this auditor. Also interviewed was one representative from the Pennsylvania Coalition Against Rape and its affiliate in the local community for Sexual Trauma Treatment and Recovery Services (STTARS) who provides victim advocacy and emotional support services for victims of sexual abuse at the facility. In total, thirty-three (33) staff/volunteer/other interviews were conducted as part of the audit.

Staff at the facility responded quickly and appropriately to all requests by the auditor for specific information or documentation. It should be noted the facility had recently had a staff member violently assaulted by an inmate and the facility was on lock down for much of the audit. While the trauma was evident in several staff, most were professional and appropriate in responding to the auditor. Staff are to be commended for this.

The auditor conducted a short de-brief on January 15, 2020. The auditor gave an overview of the audit process and thanked the Superintendent and his staff for their hard work and commitment to the Prison Rape Elimination Act.

During the on-site and post-audit phase, the auditor requested some follow up documents which, again, were provided quickly and appropriately by the facility. One issue of concern required a corrective action as some inmate 30-day re-assessment forms, used to identify inmates at high risk for sexual victimization or abusiveness, were not being completed within the 30-day time frame as required by the standards and the PADOE policy. This was addressed by the facility and actions taken were provided to the auditor during the post audit phase and prior to the initial report being submitted. Corrective actions for this are noted in the specific standard of this report.

## 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.

State Correctional Institute (SCI) Greene is a multi-custody level adult male prison located near Waynesburg PA. Building for SCI Greene began in 1991 and the first inmates arrived in 1994. The facility is situated on 128 acres with 44 acres inside the perimeter. It has a designated facility capacity of 1853 with a current inmate population of adult males age of 18 and up with numerous inmates sentenced to life. There are 33 operational structures including 11 multiple occupancy cell housing units. Housing units at SCI Greene consist of general population housing, restrictive housing, secure residential treatment, diversionary treatment, a capital case unit, residential treatment, security threat group management, and a step-down unit. SCI Greene houses inmates appropriate to their custody levels, 2 through 5, in cell blocks and/or dormitory style units.

SCI Greene provides academic and vocational education to inmates housed at the facility. The academic programs include Adult Basic Education, English as a Second Language, Individual Cell Study, Victim Awareness, Money Smart, Pathways to Success, Pre-Vocational, Read to your Child/ Grandchild program, and Correspondence Courses as requested. Vocational education includes a Carpentry Trades Program, OSHA certification and Heating, Ventilation, Air Conditioning, and Refrigeration.

SCI Greene provides inmate programming and intervention on the topics of family and relationships, reentry, offense related, mental health, alcohol and drug, Thinking for a Change, Therapeutic Community, Batterers Intervention, dual diagnosis, and sex offender programs.

The facility supports and provides labor for a correctional industries program to produce clothing and other fabric items for the State Institutions.

SCI Greene is also one of several Pennsylvania prisons that has partnered with Canine Partners for Life, a Chester County based organization dedicated to training service dogs. Inmates at SCI Greene care for, train and socialize puppies until they are ready to move on to their next phase of service training.

The Community Work Program provides community work for the local community to include State highways, city and county maintenance and numerous non-profit organizations.

Due to the high security required at this level five facility, numerous security and housing staff are employed. The facility also has numerous programs requiring special skills or education in staff positions such as mental health counselors, drug and alcohol counselors, education, vocational, medical, etc....

## 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>	3
<b>Number of standards met:</b>	42
<b>Number of standards not met:</b>	0

The 2020 PREA audit conducted at SCI Greene concluded with the facility being substantially compliant with the PREA standards.

Overall Compliance as Reflected in the Final Compliance Report:

Number of standards exceeded: Three (3)--(115.11, 115.17 & 115.88)

Number of standards met: Forty-two (42)

Number of standards not met: 0

Number of standards not applicable:

Total Standards: 45

Two standards required corrective actions to meet the standard:

115.15 (d)--Corrective actions required: Three areas were observed during the facility tour which could allow for cross gender viewing of inmates. (1) The intake area holding cell toilet was visible from the hallway through a clear window allowing for anyone passing by to see and inmate on toilet or in a state of nakedness while preparing to use the toilet or upon completion. (2) The medical shower was also visible to anyone passing through the hallway, through a door window. (3) The Correctional Industries fabric area bathroom required staff to enter the bathroom and look directly into the toilet stall for security as the partitions did not allow for viewing to ensure no more than one person was in the stall. Two areas were corrected prior to the completion of the on-site visit. Number (3) was completed shortly after the on-site and photos were provided to the auditor.

115.15--Action taken: (1) Toilet is not needed therefore was removed. (2) A movable barrier with a shower curtain was placed in the shower area to cover the shower as needed. (3) Partitions were modified to allow staff visibility of head and shoulders at the top of the partition and from the knees down at the bottom.

115.41 (f)--Corrective Action: 115.41 (f) States: "Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening." PDOC policy 008, section 09 requires "All inmates shall be assessed utilizing the PRAT, 20 to 30 days after receipt into a SCI." The facility was tasked with developing a system for supervisory level staff being capable of tracking assessments and re-assessments to ensure timely completion as required by the standard and PDOC policy. System needs to include actions needed to ensure compliance by all staff

who conduct 30-day reassessments. The auditor requested initial assessments and 30-day reassessments on randomly selected inmates arriving at the facility 30 days, or less, prior to the on-site to verify current compliance.

115.41--Action taken: The facility provided a plan of action to address as follows: From an administrative meeting, the Major of Unit Management will send a daily list of re-assessments nearing due date to correction counselors and unit managers. Unit managers will ensure the re-assessments are completed prior to the overdue date. A support person was added to the staff who may access the assessment reports to generate a list of upcoming re-assessments for the Major of Unit Management and to the unit managers. Several examples of the generated list attached to e-mails to unit managers and unit counselors. The facility provided the auditor with requested initial and 30-day reassessments which showed compliance with the 30-day time frame.

## **Standards**

### **Auditor Overall Determination Definitions**

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

### **Auditor Discussion Instructions**

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

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<p data-bbox="252 170 927 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1477 528">The Pennsylvania DOC policy DC-ADM 008, Prison Rape Elimination Act (PREA) outlines the zero-tolerance program and the agency's approach to the prevention, detection and response to such conduct. Policy addresses definitions of prohibited behaviors, strategies and responses to sexual abuse and harassment, sanctions applied to those who violate policies, etc... Policy 801 addresses discipline and is in place.</p> <p data-bbox="252 584 1473 701">The PADOC employs an agency wide PREA Coordinator who reports to the Director of the Bureau of Standards, Audits, Assessments, and Compliance as directed by policy and verified by a position description for the Coordinator.</p> <p data-bbox="252 757 1485 1171">In an interview with the PREA Coordinator, he states he does have sufficient time and authority to oversee the PADOC's PREA program with the assistance of an assistant PREA Coordinator the facility compliance managers. This position is the coordinator's primary job. The coordinator indicated he interacts with the 35 PREA Compliance Managers (PCM) at state prisons or community corrections facilities and 25 lock up facilities by regular annual meetings, email and phone conversations, some of which are conference calls or with the use of tele-communications such as Skype. He trains or ensures appropriate training for all newly assigned PCMs. The coordinator also states he addresses compliance issues by effecting policy changes, addressing training or communications issues, uses bulletins to PCMs or facility heads, talks with the PREA Resource Center and other coordinators, etc...</p> <p data-bbox="252 1227 1430 1344">SCI Greene does employ a PREA Compliance Manager, as required by policy, who is also identified on the facility organizational chart as reporting to one of the facility's Deputy Superintendents who reports directly to the Superintendent.</p> <p data-bbox="252 1400 1430 1471">When interviewed, the PCM stated she does have sufficient time to coordinate the facility's efforts to comply with the PREA Standards.</p> <p data-bbox="252 1527 1414 1644">Policy, organizational charts and position descriptions were reviewed. Based on policy, other documents provided, observations during the on-site tour, and the interviews conducted, the agency and facility exceeds the requirements of this standard.</p>

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, Prison Rape Elimination Act (PREA) addresses contracting in section 02. All contracts, which were renewed in February 2019, require PREA compliance. There are no contracts that do not require PREA compliance. All current contracts do require the PADOE to monitor for compliance. PREA reports are available for review and several were provided for the auditor review.</p> <p>In interviewing the contract administrator, he states contracts are monitored by assigned staff who submit compliance reports to his office. This includes ensuring PREA audits are completed for each contract facility. None of the current contract facilities have failed a PREA audit. All allegations at contract facilities are reviewed by agency staff. Each contract facility must submit a monthly report and all criminal investigations are completed by State investigators.</p>

115.13	<b>Supervision and monitoring</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>The Pennsylvania DOC policy DC-ADM 008, Prison Rape Elimination Act (PREA), section 3 addresses requirements for each facility to develop, document and comply with a staffing plan. Policy addresses each element of the standard being considered. Section 1 of this policy requires the PCM, intermediate level supervisors and management level employees to conduct and document unannounced rounds and requires staff members to not inform anyone the visits are occurring or face disciplinary action.</p> <p>Policy 6.3.1, Facility Procedures Manual, section 15 addresses the correctional officer staffing system and subsequent audits of required staffing. This policy requires the PREA Coordinator to serve as liaison between executive staff and the facility PCM and review all staffing audits and address any required adjustments with central office. The facility head is required to ensure the PCM is involved in annual staffing audits and ensure the PCM completes the PREA Supervision and Monitoring Worksheet is attached to the policy. The worksheet is completed prior to the annual staffing audit. This policy also requires executive, facility management and supervisory staff conduct daily, weekly, monthly, quarterly or annual tours of the facility. Frequency of tours is based on the position and availability to the facility. Attached to the policy is a form to be completed by the staff conduction the tour.</p> <p>With the pre-audit documentation was a 2019 worksheet completed on 7/29/19 with signatures of the Superintendent of Facilities Management, Superintendent of the facility, PREA Coordinator and Regional Deputy Secretary.</p> <p>Also provided was SCI Greene's Annual PREA Staffing Plan Review Meeting minutes completed on 12/13/19. Among noted attendees were the facility Superintendent, Security Major and PCM among a total of eleven attendees.</p> <p>Staffing plan is predicated on an average daily population of 1765.</p> <p>Numerous completed PREA Administrative Tour Documentation Forms were reviewed. Forms reflect tours are completed regularly and randomly on all shifts and weekends. Samples of logbooks also reflect rounds being completed. A memo from the PCM to all staff reiterates the policy and the requirement that staff may on inform anyone of the round being conducted.</p> <p>The Superintendent states they do have a staffing plan which is kept electronically and in the facility manager's and PCM's offices. The PCM is involved in all staffing analysis for the facility to further ensure staffing levels consider the protection of inmates from sexual abuse. The facility has numerous cameras which are included in the staffing plan and subsequent reviews. He states all elements of the standards are considered in the staffing plan. This was confirmed the PMC. Supervisors are required to report any potential deviations of the staffing plan. Staffing is then provided by other shift staff to ensure deviations do not occur. Superintendent further states supervisors are required to report any potential violations of the staffing plan. Staffing is then provided by other shift staff to ensure deviations do not occur.</p> <p>The PREA Coordinator states annual reviews are conducted with a worksheet being completed and forwarded to the coordinator's office prior to the staffing audit. Executive staff</p>	

also review the worksheet and audit.

Intermediate and higher-level staff interviewed stated they do unannounced rounds and do document the rounds in logbooks and on the PREA tour form.

They stated policy requires staff to not alert other staff of their round but is difficult to verify.

115.14	Youthful inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Agency policy addresses elements for facilities that can house youthful offenders. SCI Greene does not and is prohibited by policy from housing youthful offenders. Per policy only SCI Pine Grove may house male youthful offenders.

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, Prison Rape Elimination Act (PREA), section, section 08 addresses stating staff are not to conduct cross gender strip searches except in emergent circumstances. This section also states staff shall be trained in cross gender pat searches and in searches of transgender or intersex inmates. This policy also addresses cross gender announcements of cross gender staff entering the living units. Section 19 of this policy states inmates will not be searched or physically examined for the sole purpose of determining their genital status.</p> <p>06.03.01, section 15 further outlines this to include the need to ensure opposite gender staff are not assigned to posts that requires strip searches or the viewing of strip searches. Section 30 of this policy defines the strip search procedure and that only a medical doctor may conduct a body cavity search. This section also states at no time will a search or physical examination be conducted for the sole purpose of determining and inmate’s genital status. Section 47 defines dry cell procedures to ensure cross gender viewing does not occur. Post orders also require staff to announce females entering the living units.</p> <p>A memo defines gender-specific posts at the facility was provided in the pre-audit documentation.</p> <p>The facility reports no incidents of cross gender strip searches within the last 12 months. Should this occur, policy requires a “Cross Gender Search Validation Form” be completed.</p> <p>No female inmates are housed at SCI Greene.</p> <p>Corrective actions required: Three areas were observed during the facility tour which could allow for cross gender viewing of inmates. (1) The intake area holding cell toilet was visible from the hallway through a clear window allowing for anyone passing by to see and inmate on toilet or in a state on nakedness while preparing to use the toilet or upon completion. (2) The medical shower was also visible to anyone passing through the hallway, through a door window. (3) The Correctional Industries fabric area bathroom required staff to enter the bathroom and look directly into the toilet stall for security as the partitions did not allow for viewing to ensure no more than one person was in the stall. Two areas were corrected prior to the completion of the on-site visit. Number (3) was completed shortly after the on-site and photos were provided to the auditor.</p> <p>Action taken: (1) Toilet is not needed therefore was removed. (2) A movable barrier with a shower curtain was placed in the shower area to cover the shower as needed. (3) Partitions were modified to allow staff visibility of head and shoulders at the top of the partition and from the knees down at the bottom.</p> <p>The facility reports using a tone system to announce opposite gender staff entering a unit. Post orders address staff responsibilities on announcing opposite gender staff. The auditor witnessed the use of the tone system and all inmates interviewed knew the tone system was notifying the inmates of a female entering the unit.</p>

Training curriculum for transgender or intersex inmate searches was reviewed as was attendance rosters for staff attending the training. The facility reports all staff who conduct searches has received this training.

Interviews with random inmates indicate female staff are announced, either verbally or with the tone system, when entering housing units most of the time. Some inmates indicate it does not always happen. Inmates all stated they never felt they had to be naked in front of female staff.

All transgender inmates interviewed stated they did not feel they had been strip searched for the purpose of determining their genital status.

Random staff interviewed stated female staff are always announced, (with tone system) with few exceptions and staff felt inmates are never viewed by female staff using the shower or toilet or when changing clothes, except for routine cell checks. All random staff interviewed were aware they could not search a transgender or intersex inmate for the sole purpose of determining that person's genital status. Most staff knew this was in policy. Most random staff interviewed stated they had received cross gender/transgender/intersex search training. When queried, staff were able to describe appropriate pat search techniques.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, Prison Rape Elimination Act (PREA), section, section 04 addresses in policy to include materials will be delivered in alternative formats that accommodate an inmate’s disability or shall be delivered through alternative methods , such as staff reading it to the inmate or communicating through an interpreter. Policy also addresses providing LEP inmates with qualified staff or contract interpreters or, if not available, use a contract translation service. This policy also requires inmate interpreters or other inmate assistants not be used except in emergent, time sensitive situations which could compromise the inmate victim’s safety.</p> <p>Policy 006 addresses reasonable accommodations for inmates with disabilities to include communication with low vision or blind, hard of hearing or deaf or inmates who have intellectual, psychiatric or speech disabilities.</p> <p>Inmate PREA orientation training and inmate handbook Spanish versions available and Spanish PREA posters were observed during the facility tour.</p> <p>The facility has available, a list of approved foreign language employees for translation. Also available is an instructions card for the use of the language line which provides over the phone translator services for multiple languages.</p> <p>An available management directive defines the acquisition and use of sign language interpreters.</p> <p>The agency head states policy outlines the use of translators or services necessary to ensure inmates receive the necessary information.</p> <p>Most random staff knew not to use inmate interpreters. Some indicated they could be used in emergent situations.</p> <p>Of the inmates interviewed who are disabled, two stated they did receive the information in a format they could understand, and one said he never got the information. Two identified LEP Spanish speaking inmates were also interviewed. One stated he did receive the information in a format he could understand, the other stated he did not. Both inmates were able to respond to the questions on the random inmate questionnaire without the use of a translator.</p>

115.17	<b>Hiring and promotion decisions</b>
	<p data-bbox="252 170 927 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1477 483">The Pennsylvania DOC policy 01.01.04, Central Clearances Procedures Manual, section 04 addresses by stating the PADOE prohibits the hiring or promoting of anyone as outlined in the standard. Policy also requires background checks of potential employees, contractors and volunteers.</p> <p data-bbox="252 499 1485 831">Policy 04.01.01, Human Resources and Labor Relations Procedure Manual, section 41 confirms this above policy using similar language. This policy also requires background checks of all candidates for employment. Policy includes a prior employer questionnaire addressing PREA related questions and a position vacancy interest form requiring the potential employee to answer the relevant questions and sign the document. Section 38 attachment 38-A, application contains an oath with signature which states “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.”</p> <p data-bbox="252 882 1469 958">A roster of approved contractors indicating when their next background check is required was provided to the auditor.</p> <p data-bbox="252 1010 1477 1301">Examples of completed forms were provided to and reviewed by the auditor. Auditor requested additional completed forms for randomly selected staff, which were provided. Documents include; PDCO background request forms, application forms which includes prior sexual abuse questions as outlined in standard and criminal history background, authorization for information waiver forms and consent to information release for PREA compliance signed by applicants. The PDOE uses JNET on a daily basis. JNET notifies agencies of any staff having any negative law enforcement contact.</p> <p data-bbox="252 1352 1426 1559">Through policy and interviews the auditor determined background and history check for applicants for employment are processed through the HR department while the checks for contractors and volunteers are processed through the specific facility (or central office) Security Office. Both processes use NCIC and JNET. Current contractors and volunteers background checks are then completed at least every two years.</p> <p data-bbox="252 1610 1422 1686">Per HR staff, employees sign a release of information at hiring which allows the agency to provide relative information upon request from another institutional employer.</p>

115.18	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 6 addresses the standard with verbiage directly from the standard and requires the PREA Coordinator or PCM's input be documented in meeting minutes involving facility or electronic monitoring system expansions or modifications.</p> <p>The Agency Head stated the camera committee reviews and determines appropriateness of upgrades or expansions.</p> <p>The Facility Head stated additional staffing and electronic monitoring was added to the high security, capital case unit as the out of cell time was increased. The PCM attends any and all meetings regarding the placement of camera to ensure PREA compliance and further the protection of inmates from sexual abuse.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 1477 573">The Pennsylvania DOC policy DC-ADM 008, PREA, section 18 addresses the standard identifying the Security Office at each facility may investigate administrative cases and all criminal cases are referred to the Bureau of Investigations and Intelligence (BII) or the Pennsylvania State Police (PSP). Facility investigators and BII are required, by policy, to follow a uniform evidence protocol as required by standard. This section also addresses forensic examination processes and evidence collection.</p> <p data-bbox="248 584 1477 745">Section 14 of this policy addresses response to reports of sexual abuse requiring; all incidents be reported to PSP, forensic examinations will be provided in community based medical facilities and policy includes checklists. This section also addresses forensic examination processes and evidence collection.</p> <p data-bbox="248 757 1461 960">Section 15 addresses inmate access to outside confidential rape crisis services by requiring the PCM of each facility to coordinate with a Pennsylvania Coalition Against Rape (PCAR) approved local rape crisis center to develop a letter of agreement for victim advocacy and emotional support services. This section also requires the advocate to accompany a victim, if requested, through the forensic medical exam.</p> <p data-bbox="248 1010 1430 1086">The National Protocol for Sexual Assault Medical Forensic Examinations, second edition is available in file.</p> <p data-bbox="248 1137 1477 1261">SCI Greene provided a Memorandum of Understanding (MOU) between the PADO and PSP states the PSP will endeavor the comply with PREA standard 115.21 and a letter, from the PADO Secretary to the PSP Commissioner, requesting statewide compliance provided.</p> <p data-bbox="248 1312 1430 1435">Also provided was a signed Letter of Agreement (LOA) with the Sexual Trauma Treatment and Recovery Services (STTARS) program to provide victim advocates as requested and provide emotional support services.</p> <p data-bbox="248 1485 1406 1561">Per documentation provided, the 18 P. S. 11.707, victims cannot be charged for forensic examinations.</p> <p data-bbox="248 1572 1457 1648">Examples were provided, and reviewed by the auditor, of completed sexual abuse checklists showing forensic exams conducted and no charges were applied to the victim.</p> <p data-bbox="248 1697 1121 1733">The facility reports they do not house inmates under the age of 18.</p> <p data-bbox="248 1783 1477 2076">Interviews with random staff indicate most knew the staff responsibilities to initial response to an incident is to; isolate and separate the reported victim and reported abuser, report to supervisors, secure the scene, inform the persons involved to not wash, use the toilet, change clothes, eat or drink, report to medical, etc.. Some staff went into further detail concerning SANE, bagging evidence, no photographs, etc.. Most staff were aware PSP or BII investigate criminal sexual abuse cases with most saying they report to supervisory staff who contact the investigators.</p> <p data-bbox="248 2125 1449 2161">The emergency room coordinator for Washington County Medical Center stated their facility</p>

has an LOA with SCI Greene to perform forensic medical exams as requested and approved. The coordinator stated they have numerous nurses trained in forensic examinations and could always provide services. The coordinator also stated inmate victims would also receive emergent and on-going medical care.

An interview with the PCM indicates the facility provides victim advocates through the Sexual Trauma Treatment and Recovery Services (STTARS) program associated with the Southwest Pennsylvania Human Services (SPHS). This is a statewide agreement with the Pennsylvania Coalition Against Rape and no other local advocates are used including staff. LOA requires STTARS provide properly trained and qualified advocates.

Of the four inmates interviewed who had reported sexual abuse, two cases did not involve forensic examinations, one inmate stated they were given the opportunity to meet with an advocate and another stated they were not.

<b>115.22</b>	<b>Policies to ensure referrals of allegations for 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 1477 528">The Pennsylvania DOC policy DC-ADM 008, PREA, section 18 addresses the standard stating every report shall be investigated promptly, thoroughly and objectively. This section goes on to describe the process of administrative investigations and referrals for criminal investigations. Policy states PSP will investigate all criminal cases. This section also includes checklists for investigations.</p> <p data-bbox="252 539 1477 618">Section 14 of this policy includes checklists that document referrals to PSP with the date, time and PSP trooper contacted.</p> <p data-bbox="252 667 1023 701">Examples of completed documents provided and reviewed.</p> <p data-bbox="252 752 1430 831">A screenshot of a page from the PREA Tracking System, investigations shows the tracking mechanism in place to ensure all allegations are investigated timely and completed.</p> <p data-bbox="252 882 1385 916">An MOU is in place between PADOCC and PSP for investigations of sexual abuse cases.</p> <p data-bbox="252 967 1477 1135">The facility reports 153 allegations for sexual abuse or harassment were made with all being reviewed administratively and seven being investigated criminally as well. 60 of the allegations were still under investigation at the time of the pre-audit questionnaire being completed by the facility.</p> <p data-bbox="252 1184 1430 1263">The entire PADOCC PREA investigation policy, to include which agency is responsible which allegations, is posted on the website.</p> <p data-bbox="252 1312 1461 1480">The Agency Head designee states PADOCC ensures facilities complete investigations on all allegations of sexual abuse or harassment either at the facility, administratively, or through PSP for criminal cases. Administrative investigations are either conducted by BII or by trained facility staff under oversight of the BII.</p> <p data-bbox="252 1485 1190 1518">The facility heads and PCM are the point of contact for all investigations.</p> <p data-bbox="252 1570 1477 1648">Administrative investigators interviewed stated any indication of criminal behavior is referred to PSP who determines the next steps in the investigation.</p>

<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 11 addresses training for employees stating training must include all elements of element (a) of the standard. Training is conducted at basic training and bi-annually at the facilities. On odd numbered years the training is an update to the PREA procedures manual to ensure staff knowledge of policy and procedure. On even numbered years the training is a refresher to the basic training called PREA Essentials. In both cases, staff are required to sign a “PREA Training and Understanding Verification Form.”</p> <p>Lesson plans for PREA training were reviewed by the auditor. The lesson plans did cover all elements as noted in paragraph (a) of this standard. An additional training titled “Professional Boundaries” is also presented to all employees.</p> <p>Training records for randomly selected employees were reviewed by the auditor and reflected appropriate training was completed. A roster was provided showing all current staff and the date of last PREA training for both even and odd numbered years. Signed “PREA Training and Understanding Verification Forms” were reviewed.</p> <p>Of the random staff interviewed, most showed good knowledge of the elements of the required training. One staff could not remember receiving training on effective and professional communications with the LBGTI inmates. When queried on specifics, staff were generally well informed</p>

115.32	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 11 addresses training for contractors and volunteers. Training is based on the level of inmate conduct as outlined in the policy for high level of contact, requiring the same training as staff; or sporadic level of contact requiring training on zero tolerance, how to report and to whom, etc.... In all cases, contractors and volunteers are required to sign a “PREA Training and Understanding Verification Form.”</p> <p>Informational documentation (handouts and brochures) for PREA training was reviewed by the auditor.</p> <p>Training records for randomly selected volunteers/contractors were reviewed by the auditor and reflected appropriate training was completed. Signed “PREA Training and Understanding Verification Forms” were reviewed.</p> <p>Of the volunteers interviewed, they showed good knowledge of the elements of the required training.</p>

115.33	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1481 741">The Pennsylvania DOC policy DC-ADM 008, PREA, section 11 addresses inmate education outlining appropriate education upon intake and again, more in-depth, at orientation within 30 days. Per policy, education includes the video “PREA: What You Need to Know” and a handout with related information. Inmates sign acknowledging receiving the education. Staff presence at the orientation includes asking and answering questions to ensure understanding. This video is required to be shown over the inmate television a least twice per year to the entire population. Handout is provided at each inmate’s annual review which includes discussion between the inmate and the assigned counselor about PREA and related issues. Policy requires information be provided in formats accessible to all inmates including; LEP, deaf or hard of hearing, visually impaired, limited reading skills or otherwise disabled.</p> <p data-bbox="252 797 1481 875">The inmate PREA information handout and handbook were both reviewed by the auditor. Both contained the appropriate PREA information.</p> <p data-bbox="252 931 1481 1256">During the onsite, the auditor did observe posters throughout the facility relating to zero tolerance and how to report in Spanish. The facility provided a Braille version of the handout in pre-audit documentation and reports the video in subtitled in English and Spanish for LEP and hard of hearing. Per policy and as reported by the facility, the facilitator of intake orientation and education for inmates may read the materials and may meet one-on-one with inmates to ensure understanding of the information. Numerous completed education verification forms were provided in pre-audit documentation and others for random inmates selected by the auditor.</p> <p data-bbox="252 1312 1481 1480">Intake staff interviewed stated all inmates coming though intake for assignment receive the same information which includes the policy on zero tolerance, how to report sexual abuse, harassment or retaliation. Within days of arrival all inmates must attend orientation which includes the inmates' rights and the PREA policy requirements.</p> <p data-bbox="252 1536 1481 1816">Of the random inmates interviewed most who had arrived at the facility within the last few years had received the information at intake and through orientation with many stating the information was received on the 1st day or two, or within the first week. Many inmates stated they received follow-up at their annual reviews. Some inmates state they received the information from the posters on the wall and the handouts/handbook. The majority of inmates interviewed knew they had the right to not be sexually abused, harassed or retaliated against for reporting sexual abuse or harassment.</p>

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 11 requires training for any staff designated to conduct sexual abuse investigations.</p> <p>Pre-audit documentation included an investigator training agenda and cover sheets for each section of the training.</p> <p>Also provided was a roster of staff who have completed the training and date of completion. Examples of several staff training transcripts reflecting completion of the training.</p> <p>The administrative investigator interviewed stated he had received the training related to investigation of sexual abuse in confinement settings along with the training all staff attend. He stated the training was provided by PADOCC based on NIC's on-line training curriculum. Training covered topics like interviewing techniques, Miranda and Garrity warnings, evidence types and the collection of evidence, level of evidence needed to substantiate a case and level required for prosecution.</p> <p>The auditor requested and received the training transcript for the investigator interviewed.</p>

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 11 requires any staff providing medical/mental health services shall receive specialized training on working with victims of sexual abuse or harassment.</p> <p>Pre-Audit documentation provided included the participant guide for PREA medical and mental health training as well as the lesson plan itself, which covers all elements required for this standard.</p> <p>The facility pre-audit documentation indicates 52 staff have received this training. Attendance rosters for the specialized training along with PREA training acknowledgment forms were also provided.</p> <p>Medical and mental health staff interviewed stated they had received specialized training regarding their responsibilities regarding sexual abuse and harassment. When queried on specifics, staff responded well indicating a good understanding of the training.</p>

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 9 requires screening occurs as outlined in the standard. Screening is to occur during intake of upon receipt into another facility. Policy goes on to require the PREA Risk Assessment Tool (PRAT) be completed within 72 hours of reception.</p> <p>The facility uses an objective screening instrument for screening inmates for level of risk for victimization or abusiveness. The PADOE has published a staff user guide for the PRAT.</p> <p>The opening statement on the PRAT states the inmate will not be penalized for not answering the questions.</p> <p>The auditor requested and received assessments and 30-day reassessments of randomly selected inmates. Many of the re-assessments were completed but were not completed within the 30-day time frame as required by policy and standard. In reviewing the specific documents this appears to be staff failure to comply and not a systematic failure.</p> <p>Staff responsible for risk screening state all inmates are screened upon intake and the screening always occurs within 72 hours. Staff responsible for risk screening also state the process includes addressing all elements of the instrument through a one-on-one private conversation with each inmate. Staff had good knowledge of the elements of the standard and the PRAT. Staff re-assessments are completed 20 to 30 days after arrival and the initial assessment completion or, at any time, when requested or warranted by an incident or new information is received that could affect the screening. Staff responsible for risk screening also state an inmate is never disciplined for declining to answer any of the questions on the PRAT. Access to PRAT information is limited to only PREA staff and is outlined in policy.</p> <p>The PREA Coordinator and PCM stated only the PREA Coordinator and PCM have access to the specific information. Security or "at risk" codes are available to those staff who need that information for housing placement, treatment needs, program placement, etc...</p> <p>Most random inmates interviewed stated they were asked the screening questions shortly after arrival with some saying the same day, some the next day and some within the first week. Some inmates did not remember when. Most random inmates did not remember a 30-day reassessment but almost all indicated an assessment is completed at each annual review.</p> <p>Corrective Action: 115.41 (f) States: "Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening." PADOE policy 008, section 09 requires "All inmates shall be assessed utilizing the PRAT, 20 to 30 days after receipt into a SCI." The facility was tasked with developing a system for supervisory level staff being capable of tracking assessments and re-assessments to ensure timely completion as required by the standard and PADOE policy. System needs to include actions needed to ensure compliance by all staff who conduct 30-day reassessments. The auditor requested initial assessments and 30 day reassessments on</p>

randomly selected inmates arriving at the facility 30 days, or less, prior to the on-site to verify current compliance.

Action taken: The facility provide a plan of action for each deficiency found during the audit process to include: From an administrative meeting, the Major of Unit Management will send a daily list of re-assessments nearing due date to correction counselors and unit managers. Unit managers will ensure the re-assessments are completed prior to the overdue date. A support person was added to the staff who may access the assessment reports to generate a list of upcoming re-assessments for the Major of Unit Management and to the unit managers. Several examples of the generated list attached to e-mails to unit managers and unit counselors. The facility provided he auditor requested initial and 30-day reassessments which showed compliance with the 30 time frame.

With the corrective actions taken, the facility meets the elements of this standard.

115.42	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 9 requires PRAT scores be tracked with “high risk” inmates being identified as high risk under “Security Codes” in the Unit Management System. Policy requires no scores be entered. Inmates at risk are identified in the system as “Potential Sexual Assault Victim” and/or “Institutional Sexual Predator”. Section 19 of this policy addresses the facility placement of transgender and intersex inmates. Inmates who self-identify as transgender or intersex are referred to the mental health for beginning the process as outlined in policy 13.2.1, “Access to Health Care Procedures Manual.” If determined to meet the criteria, a PREA Accommodation Committee (PAC) makes individual determinations concerning privacy, housing and programming assignments to ensure safety. The policy contains checklists for initial assessment and re-assessments of each transgender or intersex inmates.</p> <p>Policy 11.2.1, section 5 requires unit management staff to review inmate records, including PRAT generated risk scores, to determine bed/housing placement. Per this policy, this could include “Z” code designation of a high-risk inmate for single cell placement.</p> <p>The PADOE PRAT training states the PRAT score must be considered when making decisions regarding housing, bed, work, education and program assignments with the goal of keeping those inmates/re-entrants at high risk of victimization from those at high risk of abusiveness. The training goes on to describe how inmates are considered for placement in each area.</p> <p>The PCM states once a PRAT is completed that shows a potential high-risk victim or abuse, that score generates a code to the unit management system that is reviewed by persons making housing, bed, program and work assignments. That code restricts potential victims and abusers from being placed in the same cell or near each other. Staff are also aware the inmate is high risk for victim or abuse, but not the specifics of why or the PRAT score. The PCM further states the agency PREA Accommodations Committee determines the placement status of a transgender or intersex inmate. Once identified or placed at this facility, the PCM meet with that person and discusses housing placement and assignments, including their own views of their own safety at Greene. All transgender and intersex inmates are then assessed at least twice per year.</p> <p>Staff responsible for risk screening state the PRAT information is used to ensure high risk abusers are kept separate from potential victims, primarily in housing assignments. Staff also stated all transgender and intersex inmates are assessed at least twice per year. They are questioned at each PRAT meeting about the views of their safety. That would be at initial PRAT, 30-day PRAT and twice per year PRAT.</p> <p>Of the transgender or intersex inmates interviewed: one stated she specifically asked about her own safety, specifically for housing and program placement and did not feel she was placed in a housing unit specifically for transgender/intersex inmates and one stated she was asked about her own safety and did think she had been placed in a specific unit due to her status, but not in a unit specifically designated for transgender/intersex inmates.</p>

All LGBTI inmates, except one, stated they did not feel they had been placed in a specific facility, unit or wing based on their sexuality status. One stated she had been placed in a specific unit due to her status, but not in a unit specifically designated for transgender/intersex inmates.

The auditor reviewed a list of potential abusers and potential victims. Also reviewed was several PREA Accommodation Committee checklists and review committee checklists for transgender inmates.

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 5 states inmates at high risk of victimization or who have been sexually abused shall not be placed in involuntary Administrative Custody unless an assessment of all available alternatives has been made by psychology an security staff in conjunction with the facility manager and it is determined there is no other means of protection. Policy includes a checklist which requires placement of a sexual abuse victim in restricted housing only if they cannot be protected by other means or at the victim’s request. Policy 008 also addresses that should an inmate be placed in administrative custody, due risk of victimization, they would have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities or the facility shall document which programs are restricted, why and for how long. Assignment shall be only until alternate means of protection is available and shall not exceed 30 days.</p> <p>Policy 802 section 1 confirms placement in administrative custody is restricted as written in policy 008, above, verbatim. This policy also requires any inmate in involuntary segregation due to risk of sexual victimization must be reviewed at least every 30 days to determine the continuing need for separation from general population.</p> <p>The Facility Superintendent states they have had no cases at Greene in the last 12 months and policy is in place to address if necessary.</p> <p>Per the facility pre-audit documentation and the interview with the facility head, no inmates have been segregated in the last 12 months due to high risk of victimization.</p>

115.51	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 12 defines methods of inmate reporting which includes reporting to staff, contractor or volunteer verbally or in writing, submitting a letter or report to PSP, 3rd party to family or friends, in writing in the facility lock boxes, etc... Section 11 of this policy includes a handout, given to inmates at intake which includes all noted reporting methods. Also, in this policy is the “Zero Tolerance” poster with the same information. This policy also requires staff to accept and document any report received. Policy further provides for a method for staff to privately report sexual abuse or harassment of inmates through the PSP address.</p> <p>Auditor reviewed the inmate handbook given to all inmates at intake which also included all noted method of reporting.</p> <p>The pre-audit documentation included several facility responses to reports, by inmates, of sexual abuse or harassment or retaliation. Also included were numerous allegations submitted in writing on the inmate grievance form. While the agency/facility specifically does not allow for the use of the grievance system for sexual abuse or harassment reporting, upon denying the grievance on procedural grounds, the form is forwarded to the Facility Security office to initiate an investigation. The inmate is informed of this upon receipt of his grievance denial. Also provided in the pre-audit documentation was examples of written staff incident reports reporting they had received verbal or written allegations.</p> <p>Random staff interviewed generally knew several ways for inmates to report sexual abuse, harassment or retaliation. The commonly mentioned methods are; report to staff either verbally or in writing, medical or mental health, clergy or the PSP address. All staff stated they immediately report verbally and document the allegation in a written report. Of note is several staff referred to the PREA hotline, which is no longer used within the facility. Staff interviewed stated they could report privately through their supervisors or PREA Manager or the Director. Some indicated the website. Few indicated the PSP address as an option.</p> <p>Random inmates interviewed generally knew several ways to report to include: Chaplain, 3rd party, staff or the PSP address. Some random inmates stated knew they could report in person, in writing or through a 3rd party. Some stated they were not aware of one, two or all three of these requirements. Several inmates stated they did not know how to report or would not report. Other inmates stated they did not feel comfortable reporting to staff, specifically if another staff was involved. Some inmates referenced the PREA hotline as well. Most inmates knew they could report anonymously if they wanted.</p> <p>The PCM states reports from PSP are forwarded to the PADOc's Bureau of Investigation and Intelligence (BII) who initiate a case and forward the information to facility staff. Based on the nature of the allegation, PSP or BII may respond directly to the facility.</p> <p>During the tour, the auditor did see the noted Zero Tolerance poster throughout the facility and inmates did show the auditor their handbooks.</p>

115.52	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	PADOC does not use the inmate grievance system for the reporting of sexual abuse, therefore exempt.

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 15 addresses inmate access to outside confidential rape crisis services. Per policy the PADOE collaborates with the Pennsylvania Coalition Against Rape (PCAR) and PCAR affiliated statewide centers. This section also requires the facility to initiate attempts to enter into an agreement with a local rape crisis center. Section 11 of this policy contains the inmate handout, given to all inmates at intake, which contains the address for PCAR.</p> <p>Policy 11.05.01 states the PADOE does not accept or house inmates that are detained solely for civil immigration purposes.</p> <p>Included in the pre-audit documentation was a “Zero Tolerance” poster which also contains the address for PCAR.</p> <p>Also provided was a form called “Assurance to Victims” which informs inmate victims of PCAR’s services for victim advocate and emotional support and provides the address. The Assurances form also informs inmate victims that the facility shall inform the inmate the extent to which communications with crisis intervention services will be monitored.</p> <p>Another form, to be completed if an inmate alleges sexual abuse, that requires the inmate be informed of the services available and calls for the inmate’s signature acknowledging receiving the information and if they accept or deny services.</p> <p>A brochure from the Sexual Trauma Treatment and Recovery Services (STTARS) program (PCAR associate) was provided and is available to inmates with phone numbers (one toll free) and addresses.</p> <p>STTARS provides inmates requesting services with a client agreement form which outlines the extent to which communications will be monitored and what must be reported under mandatory reporting laws.</p> <p>A Letter of Agreement with STTARS was provided in the pre-audit documentation. Agreement provides for victim advocacy and confidential supportive services.</p> <p>Per the pre-audit questionnaire, the facility provides un-monitored telephone use for inmate conversations with STTARS or PCAR.</p>

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 12 addresses by stating 3rd party reporting can be accomplished through friends, family and general public by contacting the Pennsylvania State Police(PSP) BCI PREA Coordinator. (address provided) This section includes the Zero Tolerance poster which has 3rd party reporting information for inmates. Section 11 of this policy includes the inmate orientation education on PREA and informs inmates they can have family or other 3rd parties contact PSP and informs the inmates where to find the address on the posters or in the handout or handbook.</p> <p>Pre-audit documentation provided a snapshot of the website which informs outside sources the information needed to report sexual abuse or harassment.</p> <p>Also provided was an example of a report submitted detailing a 3rd party report made by a family member.</p> <p>Auditor reviewed the PADOCC website for the public posting of 3rd party reporting methods. Included were the number and address for the Bureau of Investigations and Intelligence and the address for PSP PREA reporting address. The website also posts the entire PREA Policy 008 and the inmate handbook both of which includes all 3rd party information.</p>

115.61	<p><b>Staff and agency reporting duties</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 12 addresses with verbiage directly from the standard stating staff must report any knowledge, suspicion or information regarding sexual abuse, harassment retaliation for reporting sexual abuse or harassment or any staff neglect or violation of responsibilities by staff. Policy also requires staff to not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Policy also addresses the requirements of medical and mental health staff and duty to report. Policy states if an alleged victim is under 18 years of age the allegation will be referred to State or local services as required by law under the Pennsylvania Department of Human Services.</p> <p>Pre-audit documentation included several examples of incident reports of sexual abuse or harassment.</p> <p>Random staff interviewed stated they were fully understood they must report any knowledge, suspicion or information regarding sexual abuse, harassment retaliation for reporting sexual abuse or harassment or any staff neglect or violation of responsibilities by staff. Staff also stated they could not reveal any information about the report or incident except as directed by supervisors or investigators.</p> <p>Medical and mental health staff interviewed stated they do disclose the limitation of confidentiality and their duty to report and were aware they must report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment. One mental health staff had become aware of an incident and reported it.</p> <p>Both the PREA Coordinator and Superintendent stated no inmates under the age of 18 are housed at SCI Greene.</p> <p>The Superintendent states all allegations are reported to facility security investigator and BII.</p>
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115.62	<b>Agency protection duties</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 1477 450">The Pennsylvania DOC policy DC-ADM 008, PREA, section 1 states the PCM is responsible to ensure that when department staff learn an inmate is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action shall be taken to protect that inmate.</p> <p data-bbox="252 499 1477 663">The Superintendent states if an inmate is determined to be at imminent risk of sexual abuse, the inmate will be separated for safety, investigation initialed, inmates moved within the unit if necessary, inmates moved out the unit or facility if necessary. Administrative custody would be last resort but could be used temporarily.</p> <p data-bbox="252 712 1374 790">Random staff indicate inmate would be separated and isolated for protection, report to supervisor or shift commander, report to PREA Lt., and move if necessary.</p>

115.63	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 12, paragraph F addresses Inter-Facility Reports. The Facility Manager of the facility receiving the report is responsible for notifying the facility head of the facility where the alleged incident occurred. Notification shall be forwarded to the PCM and the facility head of the affected facility and must be within 72 hours of receipt. Policy requires the facility housing the alleged victim shall begin 1st responder duties. The facility manager where the alleged incident occurred must ensure an investigation is initiated. This policy includes a “Notification of Sexual Abuse Allegation to Another Facility” checklist.</p> <p>The facility pre-audit questionnaire (PAQ) states the facility had 17 allegations requiring the facility to report to other facilities and 4 allegations received from other facilities of incidents at Greene within the last 12 months.</p> <p>Also noted in the PAQ, the facility reports staff receiving the report forwards it to the shift commander who forwards it to the PCM who initiates the checklist and forwards to the Superintendent who completes the checklist and contacts the Superintendent of the facility where the alleged incident occurred.</p> <p>Several examples of the notification checklist were provided in the pre-audit documents along with Greene’s response to the alleged allegations including examples of investigation, medical exams, medical and mental health referrals, referrals to STTARS for outside victim advocacy and emotional support, etc. Notifications reviewed were completed within the 72-hour time frame.</p> <p>The Agency Head designee states the facility superintendent or director is the point of contact for all such allegations.</p> <p>The Superintendent states they have handled both--notification of allegations of sexual abuse of an inmate to other facilities and have received notifications of allegations from other facilities. Once report is received from an inmate here, the PCM notifies the superintendent and manager. An e-mail is forwarded to the facility head at the facility where the incident was alleged to have occurred. If we receive an allegation, an investigation is initiated immediately and the alleged victim is referred to medical, mental health and emotional support per policy and checklist.</p>

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 14, Responding to Reports of Sexual Abuse, outlines security staff response to include all elements in the standard. NOTE: All security staff are considered first responders. Policy includes a checklist for the initial response for an alleged victim; a shift commander checklist; a checklist for initial response for non-contact incidents; and a checklist for initial response for an alleged abuser.</p> <p>Pre-audit documentation included a coordinated response plan that includes first responder duties, a medical response carry card and examples of response to allegations which includes completed checklists and e-mail directing actions to be taken as a result of allegations.</p> <p>The facility reports, in the PAQ, of the 56 responses within the last 12 months, security staff were the first responders as all security staff are first responders and all first responders are security staff.</p> <p>1st responder staff interviewed had good knowledge of duties required in response to an allegation of sexual abuse.</p> <p>Random staff interviewed had good working knowledge of steps to be taken in immediate response to an incident or allegation of sexual abuse. During the interviews, several staff produced a carry card which outlines first responder duties.</p> <p>Of the inmates interviewed who reported sexual abuse; all four stated they reported the incidents and staff responded immediately and separated the reporter from the other person, one of those inmates felt the staff were a little slow in responding and stated it took an hour to separate them.</p>

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 14, Responding to Reports of Sexual Abuse, outlines requirements for each facility to develop a coordinated response plan.</p> <p>The SCI Greene Coordinated Response Plan is in place and approved by the Superintendent. The plan includes first responder duties, shift commander responsibilities to include notifying appropriate investigators, medical responsibilities and mental health responsibilities.</p> <p>The Superintendent states the facility does have a coordinated response plan as well as sexual abuse response checklist.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy 04.01.01, section 5, suspension without pay for exempt employees states suspension is permitted for sexual abuse allegations pending investigation after an informal meeting.</p> <p>A memo from the Director of Human Resources and provided with the pre-audit documentation states “The Department operates within the confines of collective bargaining agreements with eight different unions. 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. The agreements are silent regarding suspensions pending investigation. When the contract is silent on issues, policy then governs.”</p> <p>The auditor reviewed examples of agreements with organizations and found no language that would limit the agency’ ability to remove alleged staff sexual abusers from contact with inmates pending investigation or determination that discipline is warranted.</p>

115.67	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 13, Protection Against Retaliation, addresses each element of the standard and includes a checklist to ensure appropriate compliance and documentation of monitoring. Section 18 of this policy requires when evidence suggests retaliation is discovered the potential retaliation will be investigated and forwarded to BII.</p> <p>Pre-audit questionnaire includes a list of correctional counselors designated as retaliation monitors.</p> <p>The Agency Head designee states the PADOE has zero tolerance for retaliation for reporting sexual abuse or harassment. All are monitored for at least 90 days.</p> <p>The Superintendent states reporters of sexual abuse or harassment may need to be moved or the persons perpetrating the retaliation may be disciplined or moved. All monitors are counselors and they may recommend emotional support or other actions as needed. Monitoring is for at least 90 days.</p> <p>Staff who monitor for retaliation state they initiate contact with the person who reports within 96 hours of the report. They monitor for inappropriate movement, misconduct reports, program changes, etc... Meetings with the reporter may indicate the need for mental health or emotional support services. Monitors checklist calls for periodic meetings with the reporter every 15, 30, 60 and 90 days at a minimum. If warranted, there is no maximum time limit. Findings are reported to PCM.</p> <p>Of the inmates interviewed who reported sexual abuse; three stated they did not feel protected from possible retaliation for reporting, one stated he did feel protected from possible retaliation for reporting.</p> <p>Pre-audit documents include several completed retaliation checklists which were reviewed by the auditor.</p>

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 5, paragraph B prohibits inmates, who have allegedly been sexually abused, in involuntary administrative custody unless no other option is available. Policy 802 re-affirms policy 008 and addresses the requirements, as outlined in the standard, necessary should an alleged victim need to be placed in administrative custody involuntarily.</p> <p>The Superintendent states policy is in place, but the facility has not held an alleged victim of sexual abuse in involuntary segregation in the last 12 months. We have been able to relocate reported victims without the use of involuntary segregation. Should this happen, the inmate would be relocated as soon as possible and would not exceed 30 days.</p>

115.71	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 18, Investigating Allegations of Sexual Abuse and Sexual Harassment addresses all aspects of criminal and administrative investigations. The policy requires all allegations be promptly, thoroughly and objectively investigated regardless of the origin of the allegation. Policy states all investigations will be conducted in accordance with PREA Standard 115.71. Allegations of potential criminal behavior shall be referred to the Bureau of Investigations and Intelligence (BII) of Pennsylvania State Police (PSP). Per policy, all allegations are entered into the statewide PREA tracking system. Both section 18 and section 20 address document sexual abuse retention for as long as the alleged victim or abuser is incarcerated or employed, plus five years.</p> <p>The auditor did review several investigative files provided with the pre-audit documentation. The auditor also requested additional auditor-selected investigative files. File reviewed indicate the facility is meeting the elements addressed in this standard.</p> <p>An administrative investigator was interviewed and stated:</p> <ul style="list-style-type: none"> <li>• Investigations are started immediately upon notification of an allegation. All allegations are taken seriously and treated the same.</li> <li>• All are investigated regardless of the allegation's origin.</li> <li>• He has received investigator specific training as well as the training all staff take regarding PREA.</li> <li>• The first steps in an allegation include; interviewing the reported victim and witnesses, collecting evidence from the person and scene(s), medical exam and SANE if warranted, video, history, etc...</li> <li>• Only criminal investigators would conduct compelled interviews if warranted.</li> <li>• No polygraph examinations are required of an alleged victim and all persons involved are considered at the same level of credibility until the evidence/investigation proves otherwise.</li> <li>• Facility investigations do include a determination if staff actions or failure to act may have contributed to an abuse incident. All reports are documented and very inclusive to include descriptions of evidence and reasons behind decisions.</li> <li>• Criminal investigators decide if they will refer a case to the district attorney for criminal prosecution.</li> <li>• Nothing about an investigation would be changed should the alleged abuser or victim leave the facility or terminate employment.</li> <li>• Facility investigators and BII support and provide liaison for PSP during criminal investigations. PSP keeps BII updated.</li> </ul> <p>The PREA Coordinator states there is a system in place to keep facilities informed on active cases as much as possible. Facility staff and BII assist PSP on investigation by providing all evidence or information available or requested.</p> <p>The facility Superintendent states BII keeps facility staff up to date on investigations. We provide support and assistance to BII and/or PSP.</p>

Per interviews, none of the inmates who reported sexual abuse were required to submit to the truth telling device as part of the investigation.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 18, Investigating Allegations of Sexual Abuse and Sexual Harassment addresses by stating the PADOc shall impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or harassment are substantiated.</p> <p>The administrative investigator interviewed stated the level of evidence to determine substantiated or not is preponderance.</p>

115.73	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 18, Investigating Allegations of Sexual Abuse and Sexual Harassment addresses by stating the PCM at the facility shall inform in writing, the alleged victim as to whether and allegation has been determined to be substantiated, unsubstantiated or unfounded. Policy further requires inmates be informed whenever the alleged staff member abuser is no longer posted in the inmate's unit, no longer employed at the facility, has been indicted on a charge related to the abuse or has been convicted on a charge related to the incident or; whenever the alleged inmate abuser is indicted on a charge related to the abuse or has been convicted of a charge related to the abuse.</p> <p>The facility provided investigative packets which contain a notification to the inmate of the outcome of the investigation. Form requires signature by the inmate. The facility reports 33 inmates were informed of the outcome of 37 allegations made. Four inmates had been released from the facility. Of the 7 allegations referred to an outside agency, one inmate was notified. The others are still pending notification to the facility from PSP. This notification also informs inmates whenever the staff member alleged abuser is no longer posted in the inmate's unit, no longer employed at the facility, has been indicted on a charge related to the abuse or has been convicted on a charge related to the incident or; whenever the alleged inmate abuser is indicted on a charge related to the abuse or has been convicted of a charge related to the abuse.</p> <p>The Superintendent and investigative staff state they do notify inmates of the outcome of an allegation and it is in writing.</p> <p>The inmates who had reported sexual abuse were aware the facility is required to notify them of the outcome of their allegation. None of them had substantiated cases.</p>

115.76	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 17, Discipline Related to Sexual abuse and Sexual Harassment and Retaliation, addresses staff discipline. Policy requires all staff shall be subject to appropriate disciplinary or administrative action, up to and including termination for violating PADOE PREA policy. Policy also requires staff who have been terminated, or would have been terminated if not for resignation, shall be reported to professional licensing bureaus and law enforcement. Policy refers to PADOE policy 4.1.1, Human Resources and Labor Relations which defines the designated fact-finder being assigned by the facility manager. Fact-finder must be a staff member who was not involved in the alleged incident. This policy also states termination shall be the presumptive sanction for staff who have engaged in sexual abuse. Disciplinary sanctions shall be commensurate with the nature and circumstances of the acts committed, the staff disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories. A bulletin update to 4.1.1 reiterates that licensing bodies and law enforcement will be notified for dismissal cases due to sexual abuse or harassment of inmates.</p> <p>The facility states one incident of staff termination occurred in the last 12 months and provided this as an example of the termination of a staff member as a result of a sexual harassment investigation. PSP declined to seek prosecution. The position was a clerk and no licensing bodies were notified.</p>

115.77	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 17, Discipline Related to Sexual abuse and Sexual Harassment and Retaliation, addresses contractor/volunteer discipline. Policy requires all contractors and volunteers are subject to disciplinary or administrative action for substantiated violations of PADOE PREA policy. A contractor or volunteer will be removed from alleged victim contact and communication pending investigation completion. Any contractor or volunteer who is found to have engaged in sexual abuse shall have access to all department facilities revoked and shall be reported to licensing bureaus and law enforcement. Any contractor or volunteer who violates PADOE PREA policy, other than sexual abuse, requires the facility to take appropriate remedial measures and shall consider whether to prohibit further contact with inmates.</p> <p>The facility reports no allegations have been made that required notification to licensing bodies or law enforcement.</p> <p>The Superintendent states contractors or volunteers who are alleged to have violated PADOE PREA policy are removed from contact with inmates immediately pending investigation. If substantiated, they will be denied access to any PADOE or any PADOE monitored facilities. If incident appears criminal, the case is referred to law enforcement. All substantiated cases will be referred to the abuser's licensing body, if there is one.</p>

115.78	<b>Disciplinary sanctions for inmates</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 1477 1088">The Pennsylvania DOC policy DC-ADM 008, PREA, section 17, Discipline Related to Sexual abuse and Sexual Harassment and Retaliation, addresses inmate discipline for violating sexual abuse or harassment policy. An administrative hearing is required. Policy states sanctions shall be commensurate with the nature and circumstances of sexual abuse or harassment or retaliation committed, the inmate's disciplinary history and sanctions imposed for comparable offenses by other inmates. All cases shall be recorded and tracked. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to the behavior when determining sanctions, if any. This policy also states the facility manager or director shall refer an inmate, who is convicted criminally, to Sex Offender Treatment Program for evaluation for that program and, if appropriate for the program, if the inmates will be required to participate as part of the sanctions or as a condition to other programs or benefits. Policy also states an inmate may be disciplined for sexual contact with staff only upon finding the staff member did not consent to such contact. If a report is made in good faith that report shall not constitute false reporting even if the investigation does not substantiate the allegation. The inmate may be disciplined if the allegation is determined to be unfounded. Policy further prohibits all sexual activity between inmates and discipline inmates for such actions. The department shall not deem such activity to constitute sexual abuse if it is determined that the activity is not coerced.</p> <p data-bbox="252 1144 1461 1346">Policy 13.8.1, Access to Mental Health Care Procedures Manual, section 11, Sex Offender Treatment requires an inmate formally charged or convicted of criminal sexual abuse will be referred for assessment for SOTP. This policy also requires prisons to conduct mental health evaluations of all known inmate-on-inmate abusers within 60 days of learning of such abuse and offer treatment as appropriate.</p> <p data-bbox="252 1402 1477 1469">The facility reports no substantiated cases of inmate on inmate sexual abuse within the last 12 months.</p> <p data-bbox="252 1525 1461 1771">The Superintendent states all cases are referred for administrative hearings. If substantiated, sanctions are applied based on PADOE guidelines. Sanctions could include up to punitive segregation depending on the level of violation. Much of the time, the abuser will be transferred from the facility. Any case indicating criminal behavior will be referred to law enforcement. Mental illness and/or mental disabilities are considered in the sanctioning process.</p> <p data-bbox="252 1827 1445 2029">Mental health staff stated the facility does offer therapy, counseling or other intervention services to address and correct the underlying reasons or motivations for sexual abuse and would offer or require known abusers these services. Depending on the circumstances, inmates may be required to participate as part of their treatment plan or risk access to other programs or benefits.</p>

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 10 requires both medical and mental health staff to ask inmates about previous sexual victimization or abusiveness at intake and offer the inmate follow up meeting with medical or mental health within 14 days if screening indicates previous victimization or abusiveness. Offer and response will be documented. Policy further requires any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be limited to medical and mental health and other staff only as necessary to inform treatment plan, security and management decisions, including housing, bed placement, work, education and program assignments. Medical and mental health staff shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.</p> <p>The facility provided several examples of intake screenings showing previous sexual abuse victimization or abusiveness and subsequent forms DC-97, referrals to mental health, noting the referral was based on intake screening. Several examples of mental health secondary documentation were provided. Forms DC-560-Mental Health contact note and DC 97-referral to mental health, inmate cumulative adjustment records, etc... The facility also provided a Mental Health Confidentiality Disclosure Statement which an inmate is required to sign. Several completed examples of this form were provided and reviewed by the auditor.</p> <p>Staff responsible for intake screening stated if an inmate indicates he has experienced prior sexual victimization or abusiveness anytime, he is offered a follow up meeting with medical or mental health staff at that time. We would complete a referral at that time and submit the referral.</p> <p>Medical and mental health staff interviewed stated the do obtain informed consent from inmates before reporting about prior sexual victimization that did not occur in and institutional setting.</p> <p>Of the inmates interviewed who reported previous sexual victimization or abusiveness; one stated he was offered a follow-up with medical or mental health but declined the follow up one stated he was offered, requested and met with mental health that day and one stated he was offered and requested but had not yet received the meeting.</p>

115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 14 requires timely, unimpeded access to emergency medical services and crisis intervention services to inmate victims of sexual abuse. Service are determined by medical and mental health practitioners according to their professional judgement. If no medical staff are on duty at the time, security staff shall take preliminary steps to protect the alleged victim and shall notify appropriate medical and mental health staff.</p> <p>An attachment to the above policy is provided to an alleged victim of sexual abuse advising the inmate they are offered emergent medical and mental health services and the services are free of charges to the inmate. The inmate signs the document and elect to receive or deny a medical exam, mental health evaluation, rape crisis services if appropriate. Also provide is a checklist for nursing staff for sexual assault evaluation and documentation. A handout providing the information including the contact information for the local rape crisis center is provided to the alleged victim. Copies of completed forms, along with medical and mental health secondary documentation form/logs showing evaluation and treatment for STD, mental health confidentiality statement, mental health encounter, from previous allegations were provided and reviewed by the auditor.</p> <p>Medical and mental health staff state emergent and unimpeded access to medical and crisis intervention services are provided immediately upon notice of allegation. Services are determined according to our professional judgment. Staff stated inmate victims are given information and timely treatment for STDs.</p> <p>All first responders interviewed stated their first actions are to separate the alleged victim from the abuser and keep the inmate with staff and escort the alleged victim to medical. They indicate the checklist used addresses this as well as ensuring mental health staff are notified.</p> <p>Of the four inmates who reported sexual abuse only one case involved penis penetration and he stated he was provided STD information and treatment.</p>

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 14 requires all facility provide medical and mental health services consistent with the community level of care. All inmate victims shall be offered timely information and access to STD treatments. Per policy all inmates allegedly victimized will have ongoing medical and mental health treatment available to include follow-up services and referrals for continued care following transfer or release. Services are available for all inmates victimized in any prison, jail, lockup or juvenile facility. Upon learning an inmate has perpetrated sexual abuse of been a victim, psychology staff shall monitor the inmate monthly for a minimum of 90 days or longer if indicated need. Section 9 and 10 of this policy states all known sexual predators receive a mental health evaluation and offered treatment when appropriate, within 60 days of learning of the history. Policy 13.8.1 reiterates and confirms this.</p> <p>An example of an inmate being offered and receiving STD treatment was provided and reviewed by the auditor.</p> <p>Medical and mental health staff state treatment plans are made by the hospital or our medical staff and discussed with the inmate victim. Services may be offered though referral when the inmate leaves the facility. Medical Staff state the services provided at the facility are consistent with the community level of care and maybe somewhat better as response to issues can be immediate.</p> <p>Inmates who reported sexual abuse: Three stated medical and mental health did discuss follow up services and treatment plans. One stated they did not discuss.</p>

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 16 requires each facility to conduct Sexual Assault Incident Reviews (SAIR) at the conclusion of each case. Unfounded cases do not require reviews. Reviews should occur within 15 days of case being completed and notification received. Policy includes a checklist specific for incident reviews. Policy requires the SAIR committee be comprised of, at a minimum, the Deputy Superintendent for Centralized Services, Deputy Superintendent for Facilities Management, psychology manager, health care administrator, security office representative and the major of unit management of major of the guard.</p> <p>The facility reports 29 incident reviews were completed in the last 12 months. Numerous examples were provided and reviewed by the auditor. Some reviews included a PREA Sexual Abuse Incident Review Plan of Action which identifies deficiencies and the actions needed to correct the deficiencies.</p> <p>The Superintendent states they do have an incident review team and policy outlines who is required to participate to include upper level managers, line supervisors, investigators and medical/mental health staff. The team follows a checklist with all elements included then makes conclusions and recommendations.</p> <p>The PCM states they do conduct incident reviews once a case is deemed available for review by BII. The team reviews all aspects as outlined on the checklist and makes recommendations through the PCM, the facility manager to the Superintendent. Once reviewed and approved by the Superintendent, actions are taken as indicated in the recommendations. All incident reviews are forwarded to the PREA Coordinator.</p> <p>The incident review team member interviewed stated they follow the checklist which addresses all elements of the standard. The team or specific members will review the site of the incident to review cameras, mirrors, blind spots, windows, etc... Staffing for the area and the overall staffing for the time period are reviewed to determine shortages, re-assignment at critical times, etc...</p>

115.87	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 20 requires every report, complain, or allegations of sexual abuse and/or sexual harassment be entered into the PREA Tracking System, a web-based application designed to track all incidences of sexual abuse and harassment for DOJ reporting purposes. The PREA Compliance Division (PCD) shall review data and aggregate annually to assess and improve the effectiveness of PREA prevention, detection, response and training. This report will include a comparison of current year's data with prior years. The PADOE Secretary will approve the annual report and the report will be posted on the PADOE website. Section 02 of this policy requires contract facilities and community corrections facilities to report through the PREA Tracking System as well.</p> <p>A snapshot of the tracking system was provided and reviewed by the auditor. The PADOE annual reports for 2013 through 2018 were provided in pre-audit documentation. A review of the website confirms the annual reports are posted. Also provided was the DOJ's Survey of Sexual Victimization forms for 2015, 2016 and 2017 for PADOE.</p>

115.88	<b>Data review for corrective action</b>
	<p data-bbox="252 168 925 201"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 246 523 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1468 784">The Pennsylvania DOC policy DC-ADM 008, PREA, section 20 requires every report, complain, or allegations of sexual abuse and/or sexual harassment be entered into the PREA Tracking System, a web-based application designed to track all incidences of sexual abuse and harassment for DOJ reporting purposes. The PREA Compliance Division (PCD) shall review data and aggregate annually to assess and improve the effectiveness of PREA prevention, detection, response and training. This report will include a comparison of current year's data with prior years. The PADOE Secretary will approve the annual report and the report will be posted on the PADOE website. Information will be redacted so no individual is identifiable or would present a clear and specific danger to a facility. Section 02 of this policy requires contract facilities and community corrections facilities to report through the PREA Tracking System as well.</p> <p data-bbox="252 840 1476 1254">A snapshot of the tracking system was provided and reviewed by the auditor. The PADOE annual reports for 2013 through 2018 were provided in pre-audit documentation. Annual reports do include a comparison of current year's data and corrective actions with those from prior year and reflects an assessment of the agency's progress in addressing sexual abuse. A review of the website confirms the annual reports are posted. Also provided was the DOJ's Survey of Sexual Victimization forms for 2015, 2016 and 2017 for PADOE. PADOE annual reports are very inclusive of incident based data, comparisons, assessments of effectiveness, actions taken to address deficiencies or improvements needed in policy, training, etc... With the use of the PREA tracking system, they have an excellent system to reflect exceeding this standard.</p> <p data-bbox="252 1310 1476 1467">The Agency Head designee states the PADOE does complete an annual report. Each facility submits a report and a plan of action for corrective actions needed. We may need to address training, staffing, policy, reporting protocols, etc... The Secretary does review and approve the annual reports.</p> <p data-bbox="252 1523 1476 1892">The PREA Coordinator states uses the PREA training system which is web based but only accessible by identified staff. My office reviews the tracking system to include incident reports, and investigations with incident reviews. Facilities post a monthly report and an annual report with a plan of action. All incident reviews are posted to this office as well as the plan of action for identified deficiencies. This office follows up on action plans with the facility PCMs. The Secretary approves and signs the PADOE PREA annual report and it is posted to the website by June 30th of each year. We ensure all data required by SSVs are included in reporting. Personal identifiers or any information that could present a danger to a person of a facility would be removed from annual reports.</p> <p data-bbox="252 1948 1484 2105">The PCM states the facility posts all allegations of sexual abuse or harassment to the PREA tracking system. Incident reports, investigations, shift commander reports, incident reviews are posted as well. We provide PADOE with monthly and annual reports with plans of action for any noted deficiencies.</p>

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC policy DC-ADM 008, PREA, section 20 requires the department to securely retain all PREA data for a period of no less than ten years after the date of initial collections unless law requires otherwise.</p> <p>The auditor reviewed the public website which contains the annual reports for 2013-2018.</p> <p>The PREA Coordinator states all specific information is on the PREA tracking system, a web based system with very limited access.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The Pennsylvania DOC is in the 3rd cycle of PREA audits. During the PREA audit cycle 2, the previous cycle, the PADOc shows 36 correctional institutes and/or community confinement facilities completing audits. The website lists 38 total facilities within the PADOc system. Two facilities were closed in 2017, therefore all facilities were audited in cycle 2. A review of last fiscal year's audits indicate the agency ensured at least one-third of each facility was audited.</p> <p>The auditor was granted access to all area of the facility. The tour provided was extensive and complete to the auditor's knowledge. The auditor was provided with any/all documents requested, much of it electronically. All inmate interviews were conducted in private. The identified LEP inmates spoke enough English and no translator or translator service was required.</p> <p>The facility notified the auditor of the posting the audit notice in inmate accessible areas at least six weeks prior to the on-site audit. The auditor observed the notices in numerous places including all housing units. Several inmates stated the posting had been up for several weeks. The notice contained the confidentiality statement and correct auditor contact information. Five letters were received by the auditor from inmates prior to the on-site. Two additional letters were received after the on-site audit, both mailed during the on-site or shortly after.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The auditor reviewed several PADOc facility audit reports and found all those reviewed were posted within 90 days of the final report being posted to the facility.</p>

## Appendix: Provision Findings

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

115.11 (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 facilities?	yes

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

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

<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for	yes

	video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

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

<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

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

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

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

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

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

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

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

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

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

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

	through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
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115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

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

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

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

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

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

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

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

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

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

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

115.21 (a)	<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

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

115.21 (c)	<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

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

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

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

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

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

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

115.22 (c)	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

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

115.35 (c)	<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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (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 §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes

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

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

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

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

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

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

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

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

<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

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

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

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

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

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

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

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

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

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes

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

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

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

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na

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

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

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

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

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

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na

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

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

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

115.53 (a)	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

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

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

115.54 (a)	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

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

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

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

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

<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

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

<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

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

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

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

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

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

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

<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

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

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

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

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

<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

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

<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

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

<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

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

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

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

<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

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

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

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

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

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

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

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

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

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

<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

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

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

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

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

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

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

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

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

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

115.82 (b)	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

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

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

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

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

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

<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na

<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na

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

<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

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

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

115.86 (d)	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

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

115.87 (a)	<b>Data collection</b>	
	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

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

<b>115.87 (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>115.87 (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>115.87 (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 inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes

<b>115.87 (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>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 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 § 115.87 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 § 115.87 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>115.88 (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>115.88 (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>115.88 (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>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

<b>115.89 (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>115.89 (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>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 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.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na

<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 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. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. 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, there has never been a Final Audit Report issued.)	yes