## PREA AUDIT: AUDITOR’S SUMMARY REPORT
### ADULT PRISONS & JAILS

<table>
<thead>
<tr>
<th>Name of facility:</th>
<th>SCI Mahanoy</th>
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<tbody>
<tr>
<td>Physical address:</td>
<td>301 Morea Road, Frackville, PA 19732</td>
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<tr>
<td>Date report submitted:</td>
<td>June 19, 2015</td>
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<td>Date of facility visit:</td>
<td>May 19, 2015 &amp; May 20, 2015</td>
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<tr>
<td>Facility mailing address:</td>
<td>(if different from above)</td>
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<tr>
<td><strong>Telephone number:</strong></td>
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<tr>
<td>Name of PREA Compliance Manager:</td>
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<td>Agency Information</td>
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<tr>
<td>Name of agency:</td>
<td>Pennsylvania Department of Corrections</td>
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<tr>
<td>Governing authority or parent agency:</td>
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<tr>
<td>Physical address:</td>
<td>1920 Technology Parkway, Mechanicsburg, PA 17050</td>
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<td>Mailing address:</td>
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<td>(717) 728-2573</td>
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<tr>
<td>Agency Chief Executive Officer</td>
<td></td>
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<tr>
<td>Name:</td>
<td>John E. Wetzel</td>
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<tr>
<td>Title:</td>
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AUDIT FINDINGS

NARRATIVE: The PREA Audit of the State Corrections Institute at Mahanoy was conducted May 19 and 20, 2015. The Designated Auditors were Mrs. Lawanda Long, Ms. Sherri Jenkins and Ms. Rebecca Young, all who are DOJ PREA Certified Auditors. Mrs. Rose Durbin served as a contractor to assist with the audit process.

The auditors wish to extend her deepest appreciation to Superintendent Kerestes and his staff for their professionalism, hospitality and kindness.

The auditors also wishes to compliment Jeanne MacKnight, who serves as the PREA Compliance Manager, for her outstanding work in organizing the electronic files that were provided to the auditors in advance of the on-site portion of the PREA audit. This enabled the audit to move forward very efficiently.

An Entrance Meeting was held at 8:00 a.m. on May 19, 2015, to provide an overview of the PREA audit process and background information of the auditors. The following individuals were present: Superintendent Kerestes, DSFM Beggs, DSCS Vuksta, CCPM MacKnight, Major Damore, Captain Sorber, Ed Mikulski, Carole Mattis, Tracy Jacobson and Kevin Kellner.

Following the Entrance Meeting, the auditors toured the entire facility, to include inmate work areas located outside the secure perimeter. During the tour, the camera coverage was reviewed in the control booth, which showed the camera coverage maintains good visibility throughout the prison. Following the tour, the auditors began the interviews and review of other documents. The auditors used interviews previously conducted by DOJ Certified Auditors for the Director, Contact Manager and PREA Coordinator; in addition to reviewing Pennsylvania Department of Correction website prior to the audit.

While on-site, twenty-three (23) inmates were interviewed, seventeen (17) randomly selected inmates, two (2) transgender inmates, two (2) inmates who reported a PREA allegation, one (1) inmate who is limited English speaking and one (1) who disclosed victimization during screening. Those interviewed were randomly selected, by the auditor, from a list of all the inmates by their housing assignment at the SCI at Mahanoy.

Twenty (20) security personnel from both shifts, who were randomly selected by the auditor, were interviewed. Nineteen (19) interviews were conducted to address the specialized staff or specialized areas which included the Superintendent, PREA Compliance Manager, Contractor, Volunteer, Individual responsible for monitoring retaliation, Investigator, Medical, Mental Health, First Responder, Staff who performs screening for risk of victimization and abuse, Incident Review Team member, Human Resource Personnel, Intake Staff, Intermediate or Higher-Level Facility Staff and Staff who supervise inmates in segregated housing.

In all, the auditors conducted sixty-two (62) interviews.
The auditors found the staff to be knowledgeable about PREA, the prison’s Zero Tolerance Policy, inmates’ rights regarding PREA first response and evidence collection. The auditors reviewed PREA training curriculum and employees’ training documentation prior to the on-site audit phase in addition to reviewing training files on-site. Supporting documentation confirmed that employees received the required training.

When the on-site audit was completed, the auditors conducted an Exit Meeting. While the auditors could not give the facility a final finding, as there were some issues needing further clarification, the auditors did give an overview of the audit and thanked Superintendent Kerestes and his staff for their hard work and commitment to the Prison Rape Elimination Act.

DESCRIPTION OF FACILITY CHARACTERISTICS:

SCI Mahanoy opened in July 1993 as a medium-security level male institution. SCI Mahanoy sits on 222 total acres with 67 acres being inside the secure perimeter and consists of 35 buildings. In addition, there are 10 separate general housing units and one Restricted Housing Unit. The Restricted Housing Unit capacity is 120. SCI Mahanoy’s inmate population was 2524 on the first day of the audit. SCI Mahanoy has a total of 350 cameras.

SCI Mahanoy provides a range of educational and vocational training opportunities for the inmate population. Academic Programs include: Adult Basic Education, General Equivalency Diploma (GED) Preparation, Adult Literacy, English as a Second Language, Pro Literacy of America Tutoring Reading to Your Children, Act 14 and Money Smart. The following Vocational Education Programs are available: Auto Technology, Business Education, Electronics, Warehouse Operations and Specialized Carpentry. Each of the above vocational programs offers certifications that are industry recognized and can assist inmates with employment upon societal reentry. In addition, SCI Mahanoy offers a 12 Chair Barber School. Approved Apprenticeship Programs include: Refrigeration, Mechanics and Shoe Repair. The Library provides collections of materials, which meet the recreational, educational, and legal reference needs of the inmates. Inmates also have access to Inter-Library Loans.

SCI Mahanoy’s Inmate Program Services is designed to foster rehabilitation of the inmate population. It provides an opportunity for inmates to participate in a variety of programs and services appropriate to their needs, including substance abuse treatment, institutional employment, psychological services, religious worship and wellness recreational activities.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 2
Number of standards met: 39
Number of standards not met: 0
Non-applicable: 2
§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

SCI Mahanoy has a written policy (DC-ADM 008) mandating zero tolerance towards all forms of sexual abuse and sexual harassment. The Prison Rape Elimination Act (PREA) Policy outlines the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Agency policies and procedures have been continually revised over the last year as the Pennsylvania Department of Corrections has developed and implemented PREA guidance and procedures.

Ms. Jennifer Feicht is the PREA Coordinator and is knowledgeable in managing Pennsylvania Department of Corrections’ implementation. During the interview with the PREA Coordinator, she confirmed that she has sufficient time to perform her PREA job duties and that staff have been very responsive to the changes implemented. Policy also designates the Corrections Classification and Program Manager (CCPM) as the PREA Compliance Managers at each of Pennsylvania Department of Corrections facilities.

Ms. Macknight is the PREA Compliance Manager for this facility and is very knowledgeable of the PREA requirements in accordance with the PREA Standards. Ms. MacKnight has been instrumental in staff and inmate PREA training, as well as the overall implementation of the PREA Standards. Both staff and inmates were aware that Ms. Macknight was the PREA Compliance Manager.

§115.12 - Contracting with other entities for the confinement of inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
☐ Not Applicable

Pennsylvania Department of Corrections has renewed eight (8) contracted facility contracts. Per policy, all new contracts or contract renewals responsible for the housing of Pennsylvania Department of Corrections inmates are obligated to adopt and comply with the PREA Standards and the Department’s policies related to PREA compliance. Additionally, the contracted entity will undergo regular, mandated audits on three-year basis.

§115.13 – Supervision and Monitoring

☐ Exceeds Standard (substantially exceeds requirement of standard)
SCI Mahanoy has developed a staffing plan and makes its best efforts to comply with the plan. The staffing plan is reviewed at least annually and whenever deemed necessary by the PREA Compliance Manager at the facility and the Statewide PREA Coordinator. The Facility Manager would document, in writing, and justify all deviations from the plan. This documentation would be forwarded to the Executive Deputy Secretary, Regional Deputy Secretary and Central Office Security Major. However, SCI Mahanoy has not had any deviations from their staffing plan in the last 12 months. The Facility Management Team continuously meets to discuss cameras.

Unannounced rounds are documented in logs, and are done randomly on all shifts. The agency has a policy that prohibits the staff from alerting other staff members that supervisory staff rounds are occurring.

§115.14 – Youthful Inmates

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

The Pennsylvania Department of Corrections policy, DC-ADM 008, covers the standard of separating youthful inmates and designates SCI Pine Grove for youthful males and SCI Muncy for youthful females. SCI Mahanoy is not designated as one of the facilities responsible for housing youthful inmates.

§115.15 – Limits to Cross-Gender Viewing and Searches

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

SCI Mahanoy does not conduct cross gender strip searches, except in exigent circumstances, in accordance with Departmental Policy 6.3.1, Section 30. Body cavity searches are only done by medically trained professionals per the Department’s Prison Rape Elimination Act (PREA) Policy.

Policy and procedures are implemented to enable inmates to shower, perform bodily functions, and change clothes without non-medical staff observing their genitalia or buttocks. Interviews with inmates and staff confirmed that inmates are able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing.
their breast, buttocks or genitalia. Policy also covers training on how to conduct cross-gender pat-down searches of transgender and intersex inmates, in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs.

Staff and inmate interviews confirmed that opposite gender staff members announce their presence when entering the housing unit/pod by ringing the buzzer. Supporting documentation confirms that all inmates are educated on the meaning/purpose of the buzzer. During inmate interviews, it was confirmed the buzzer indicated that a female was entering the housing unit/pod area. The auditors observed the announcement/buzzer being utilized consistently throughout the tour.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

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

SCI Mahanoy takes the necessary steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Their Prison Rape Elimination Act (PREA) Policy states that all inmate educational material will be in formats accessible to all inmates in accordance with Title II of the Americans with Disabilities Act U.S.C. PREA material/handouts are in both English and Spanish. SCI Mahanoy provided supporting documentation that an interpreter was used during this audit cycle, via the Propio Language Service.

Both inmates and staff stated that inmates are not used as interpreters, especially if it is an issue with sexual abuse and sexual harassment.

§115.17 – Hiring and Promotion Decisions

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

4.1.1 Human Resources and Labor Relations (Sections 38, 39, 40, 41) Policy covers the requirements of the standard. The agency has a continuous system of background checks for employees that provide a notice whenever employees are involved with law enforcement. Some of the systems that are checked, in lieu of doing a background check every five years, are the National Crime Information Center (NCIC)/Commonwealth Law Enforcement Assistance Network (CLEAN) and Pennsylvania Justice Network (JNET). The agency also provided documentation that background checks are required of all contractors and volunteers who have contact with inmates. In the past 12 months, there were 23 employees
and 8 contractors who may have contact with inmates who have had criminal background record checks conducted by the facility.

The employment application also asks applicants to disclose information relating to sexual abuse and sexual offenses. The DOC application requires employees to take an oath sworn before a Notary Public confirming that his or her application, including any attachments, do not contain any misrepresentations, falsifications, omissions, or concealment of material fact.

§115.18 – Upgrades to Facilities and Technology

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
☐ Not Applicable

DC-ADM 008 covers this standard. SCI Mahanoy has not acquired any new facilities or made any substantial expansions or modifications of existing facilities since August 20, 2012. The facility has added 3 PTZ and 4 fixed cameras since December 2012, to increase the visibility in areas identified by the Camera Committee, which meets at least annually.

§115.21 – Evidence Protocol and Forensic Medical Examinations

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

DC-ADM 008, Prison Rape Elimination Act (PREA) Policy outlines evidence protocols and requirements for forensic medical exams. The facility is responsible for conducting only administrative investigations. Criminal investigations are conducted by the Pennsylvania State Police. Pennsylvania Department of Corrections has entered into a Memorandum of Understanding with the Pennsylvania State Police (PSP).

SCI Mahanoy documented its efforts to provided SAFE or SANE services via Schuylkill Regional Medical Center; however, the hospital does not have SAFE or SANE staff employed. The hospital is willing to provide a qualified medical practitioner to perform the sexual assault exam when needed.

Pennsylvania Department of Corrections has a Letter of Agreement with the Sexual Assault Resource and Counseling Center of Schuylkill for appropriate services to victims of sexual assault through prevention information, crisis services and education.

SCI Mahanoy has had one incident where a victim has requested a victim advocate, qualified staff member, or qualified community-based organization staff member to accompany and
support the victim through a forensic medical examination, investigatory interviews or to provide emotional support, crisis intervention, information and referrals.

Interviews with a random sample of staff, indicated that staff are well aware of how to preserve evidence and to whom they need to forward reports of sexual abuse. The Sexual Assault Resource and Counseling Center of Schuylkill was contacted and confirmed that they would provide victim advocate services to victim inmates assigned to SCI Mahanoy.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

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

An administrative or criminal investigation is completed on all allegations of sexual abuse and sexual harassment in accordance with DC-ACD 008, Prison Rape Elimination Act (PREA) Policy and MOU with Pennsylvania State Police.

Allegations involving potentially criminal behavior will be turned over to the Pennsylvania State Police for investigation. During the past 12 months, there have been twenty-nine (29) allegations of sexual abuse and/or sexual harassment that were received. All of these resulted in an administrative investigation, with fourteen (14) of these cases being referred to the Pennsylvania State Police. The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. This policy is located on the Agency website.

§115.31 – Employee Training

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

DC-ADM 008 covers the standard. The Auditor reviewed training documentation, which included the employee’s signature confirming that the individual received PREA training and understood the materials covered. A review was conducted of the training that was provided to employees and all areas required by the standard were addressed.

Interviews with staff demonstrated that they understand the Department’s Zero Tolerance Policy, policy and procedures for the prevention, reporting and response to sexual assault or sexual harassment incidents, and the dynamics of sexual abuse and harassment in a confinement setting.

Annually, staff will either receive a policy update (odd numbered years), or refresher for initial basic training (even numbered years). At the conclusion of the training, all staff, contractors, and volunteers are required to sign the PREA Training and Understanding Verification Form.
Random staff interviews indicate staff had received the required PREA training. Five hundred and twenty-nine employees who may have contact with inmates have received PREA training within the last 12 months.

§115.32 – Volunteer and Contractor Training

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

All sixty-five (65) contractors and/or volunteers 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.

Interviews of one (1) contractor and one (1) volunteer demonstrated their knowledge of PREA, their responsibilities and the facility's Zero Tolerance Policy. The auditor reviewed PREA Training Acknowledgement Forms for both contractors and a volunteer during the PREA audit process.

§115.33 – Inmate Education

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

During intake, inmates are provided information through PREA handouts, explaining the agency’s Zero Tolerance Policy regarding sexual abuse and sexual harassment and how to report such incidents. Handouts are available in both English and Spanish. During orientation, inmates receive additional PREA Training, which consists of a PREA Educational Video. The inmates sign an Acknowledgement Form indicating they have received the training. Posters and inmate brochures are posted in the housing areas in formats accessible to all inmates.

During the interviews, inmates acknowledged the information being provided upon arrival during orientation. All inmates knew the facility's Zero Tolerance Policy and how to obtain assistance if they are sexually abused or sexually harassed. All inmates assigned to SCI Mahanoy were educated on how to report, detect and prevent sexual abuse/sexual harassment in accordance with the PREA Standards.

§115.34 – Specialized Training: Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

Supporting documentation confirms that all four (4) facility investigators have received from twelve (12) to twenty (20) hours of Specialized PREA Training for Investigations. During interviews with facility investigators, the investigator acknowledged receiving the training specific to PREA requirements. The investigator was also very knowledgeable of the procedures in conducting a sexual assault interviews.

§115.35 – Specialized training: Medical and mental health care

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

The auditors were provided with supporting training documentation that confirms all Medical and Mental Health staff have completed Specialized PREA Training for Medical and Mental Health. Interviews with the medical and mental health staff indicate they were given additional PREA training relating to Medical and Mental Health responsibilities, in addition to receiving numerous training handouts and informational emails.

§115.41 – Screening for Risk of Victimization and Abusiveness

☑ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

DC-ADM 008 meets the requirement of the standard. The auditor was provided with a copy of the PRAT. A review of the instrument shows all the required questions are being asked and the tool is an objective screening instrument. All inmates are assessed during intake screening for their risks of being sexually abused by other inmates or sexually abusive towards other inmates. The screening is completed within 24 hours of arrival by designated staff. During interviews conducted with staff responsible for completing the screening, it was apparent staff were very knowledgeable of the process and the importance of the screening tool (PRAT). Supporting documentation confirmed that follow-ups usually occur within 7 days and Mental Health tracks this information on an excel spreadsheet along with their in-house system. The random inmates interviewed remember being asked the questions on the screening tool. Additionally, during the interviews conducted with staff, it was confirmed that dissemination of the information from the screening tool is considered sensitive information and is maintained in a confidential manner.

§115.42 – Use of Screening Information

☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

DC-ADM 008 Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. The facility uses the screening information to determine housing, bed, work, education, and program assignment with the goal of keeping inmates at high risk of being sexually victimized separate from those at high risk of being sexually abusive. Housing and program assignments are done on a case-by-case basis.

Transgender inmates are housed in general population and are afforded the opportunity to shower separately. Transgender inmates’ views in respect to his safety are given serious consideration in determining placement and program assignments. A transgender inmate’s placement and programming assignments are reassessed every 6 months.

Interviews conducted with two (2) transgender inmates indicated transgender offenders are housed with the general population. Additionally, showers are single showers, with shower doors on each shower area to ensure privacy. The transgender inmate’s interviews also advised staff are respectful and professional anytime they search him.

§115.43 – Protective Custody

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

Section 4 of the Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy states the Shift Commander is to “determine the least traumatizing placement for the alleged victim, which may be the same or different general population unit.” Staff interviews confirmed that inmates at high risk for sexual victimization should not be placed in the Restricted Housing Unit unless the inmate cannot be protected by any other means. Reviews of status for protective custody are completed every seven days for the first two months and every 30 days thereafter.

SCI Mahanoy has not placed any alleged inmate victims of sexual abuse or sexual harassment in involuntary segregated housing.

§115.51 – Inmate Reporting

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

The Pennsylvania Department of Corrections provides multiple internal ways for inmates to report sexual abuse, sexual harassment and retaliation (i.e. telling any staff member, submitting an inmate request or writing to the PREA Coordinator). Inmate interviews confirmed that
inmates are aware of their options. Inmates can also report to an outside entity by submitting a written report to the Pennsylvania State Police Bureau of Criminal Investigation.

### §115.52 – Exhaustion of Administrative Remedies

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)
- ☑ Not Applicable

The Pennsylvania Department of Corrections does not have an administrative procedure that addresses an inmate’s grievance regarding sexual abuse. In accordance with section (a) of this standard, the Pennsylvania Department of Corrections is exempt from this standard.

### §115.53 – Inmate Access to Outside Confidential Support Services

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

On February 18, 2014, SCI Mahanoy entered into a Letter of Agreement with Sexual Assault and Resource Counseling Center of Schuylkill County (SARCC) for outside confidential support services. Phone numbers and mailing addresses are provided, in English and Spanish, in the SARCC brochure the inmates receive during intake.

### §115.54 – Third-Party Reporting

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

The Pennsylvania Department of Corrections’ website provides information in the Frequently Asked Questions section on how an individual can make a third party report. Third parties are able to report sexual abuse and sexual harassment to any facility staff member or online at www.tipsubmit.com.

SCI Mahanoy has not received any third party reports. Interviews with staff and inmates confirm that staff and inmates are aware that third party reporting options are available.
**§115.61 – Staff and Agency Reporting Duties**

- [ ] Exceeds Standard (substantially exceeds requirement of standard)
- [x] Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- [ ] Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy requires all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment and for staff not to reveal any information related to a sexual abuse report to anyone other than the extent necessary. Every staff interviewed understood and spoke specifically about this procedure. Inmate interviews supported the fact that inmates are also aware of the reporting and confidentiality requirements of sexual abuse and sexual harassment.

**§115.62 – Agency Protection Duties**

- [ ] Exceeds Standard (substantially exceeds requirement of standard)
- [x] Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- [ ] Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy requires staff to take immediate action to protect any inmate they learn is subject to substantial risk of imminent sexual abuse. All staff interviewed were aware of this procedure. There were no instances when an inmate was subject to a substantial risk of imminent sexual abuse at SCI Mahanoy.

**§115.63 – Reporting to Other Confinement Facilities**

- [ ] Exceeds Standard (substantially exceeds requirement of standard)
- [x] Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- [ ] Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. SCI Mahanoy has not had any reports of sexual abuse made concerning other facilities.

**§115.64 – Staff First Responder Duties**

- [ ] Exceeds Standard (substantially exceeds requirement of standard)
- [x] Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. Interviews with SCI Mahanoy staff confirmed that staff are aware of the steps required upon learning that an inmate was sexually abused.

§115.65 – Coordinated Response

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. PREA Policy coordinates the response of all pertinent individuals to ensure proper steps are followed. Interviews with staff confirmed they were knowledgeable about the PREA Plan and the coordinated duties and collaborative responsibilities. SCI Mahanoy has adopted the Coordinated Response Plan outlined in the Department’s PREA policy.

§115.66 – Preservation of ability to protect inmates from contact with abusers

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
☐ Not Applicable

The Pennsylvania Department of Corrections operates within the confines of eight (8) collective bargaining agreements. On January 12, 2015, Secretary Wetzel issued a revised memo detailing revised procedures to incorporate new direction as a result of language issued in the November 2014 H-1 interest arbitration award (a copy of the award was provided to the auditor). This award amended previous language which required 24 hours advance written notification of inmate charges against an employee at least 24 hours prior to the commencement of proceedings. The amended language in section 5 of the award provides that the Commonwealth shall have no requirement to furnish 24 hours advance written notification of inmate charges in accordance with this Section when an allegation falls within the purview of the Prison Rape Elimination Act (PREA). These updated procedures are also being incorporated into policy 4.1.1 Human Resources and Labor Relations Section 7 Standardization of Pre-Disciplinary Conferences.

§115.67 – Agency protection against retaliation

☐ Exceeds Standard (substantially exceeds requirement of standard)
Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) policy meets the requirements of the standard. PREA Compliance Manager MacKnight is responsible for monitoring retaliation and should an incident of sexual abuse occur, will conduct status checks with inmates who have been victimized or reported victimization, every 30 days, and up to 90 days or longer, if required, to ensure that the inmate has not been subjected to retaliation. Documentation was provided to show PCM MacKnight reviews infractions, programming and evaluations, housing and staff work reassignments for all inmates and/or staff who have reported sexual abuse or sexual harassment or who have cooperated with sexual abuse or sexual harassment investigations.

§115.68 – Post-Allegation Protective Custody

☐ Exceeds Standard (substantially exceeds requirement of standard)
☑ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. No inmates at SCI Mahanoy were placed in protective custody following an allegation of sexual abuse or sexual harassment during this audit period.

§115.71 – Criminal and Administrative Agency Investigations

☑ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. The Security Office at the facility and/or the Office of Special Intelligence and Investigations (OSII) conduct administrative investigations into sexual abuse and sexual harassment allegations. Criminal investigations are conducted by the Pennsylvania State Police. During the interview with the investigator, it was confirmed that the Pennsylvania State Police would keep the PREA Compliance Manager and investigator informed of the progress of the investigation being conducted. A review of the investigative files revealed that all allegations of sexual abuse or sexual harassment are investigated promptly, thoroughly and objectively.
§115.72 – Evidentiary Standard for Administrative Investigations

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. During the interview with the investigator, it was confirmed that no standard higher than a preponderance of evidence is required in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§115.73 – Reporting to Inmate

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. Inmates are notified in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. A signature is obtained from the inmate to document the offender's acknowledgment of receipt of the letter. Copies of letters provided to the inmates were reviewed by the auditor.

§115.76 – Disciplinary sanctions for staff

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. PREA Compliance Manager MacKnight reported that no staff members at SCI Mahanoy have been subjected to discipline for a violation of sexual abuse or sexual harassment policies.

§115.77 – Corrective action for contractors and volunteers

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. PREA Compliance Manager MacKnight is the designated individual responsible for notifying law enforcement and any relevant licensing body in accordance with policy.

There have been no allegations of sexual abuse by contractors or volunteers during this audit period.

§115.78 – Disciplinary sanctions for inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets the requirements of the standard. PREA Compliance Manager MacKnight reported that no inmates have been disciplined for violations of the Department’s sexual abuse or sexual harassment policies during the audit period.

§115.81 – Medical and mental health screenings; history of sexual abuse

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

SCI Mahanoy meets the requirements of the standard as confirmed by a review of the Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy and staff and inmate interviews. A review of documentation revealed inmates who have experienced sexual victimization or perpetrated sexual abuse are offered a follow-up meeting with a mental health practitioner within fourteen (14) days of the intake screening. Information concerning sexual victimization or abusiveness that occurred in an institutional setting is limited to staff who have a need to know. Copies of Informed Consent forms were also reviewed during the audit.

§115.82 – Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
A review of the Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy and interviews with staff and inmates confirm inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services from medical and mental health staff. All services are provided to inmate victims of sexual abuse at no cost.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

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

A review of Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy and medical/mental health files, and interviews with staff and inmates confirms on-going medical and mental health care for sexual abuse victims and abusers is provided.

§115.86 – Sexual abuse incident reviews

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

The Pennsylvania Department of Corrections’ Prison Rape Elimination Act (PREA) Policy meets all required elements of the standard and requires sexual abuse incident reviews be conducted at the conclusion of all substantiated and unsubstantiated allegations of sexual abuse within 15 working days of receipt of the notification from OSII that the investigation was deemed satisfactory. Review Team members includes, at a minimum, the Deputy Superintendent for Centralized Services, the Deputy Superintendent for Facilities Management, Licensed Psychology Manager/designee, Corrections Health Care Administrator/designee, Security Office representative, Unit Manager, Corrections Counselor, and PREA Compliance Manager. Other individuals are utilized, as applicable.

§115.87 – Data Collection

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)
The agency collects accurate uniform data for every allegation of sexual abuse at facilities under its control using a standardized instrument. The system allows the agency to submit the annual DOJ Survey of Sexual Violence timely; and for use by the agency to monitor, trend and take corrective action. The 2013 Report is available on the Department’s website.

§115.88 – Data Review for Corrective Action

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

The agency reviews the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies and to identify problem areas. The 2013 report, published on the Department’s website, did not include information on any corrective action taken. The Department is currently working on the 2014 report, which will include corrective action taken at SCI Mahanoy, as well as the Department as a whole, to ensure an overall safe environment.

§§115.89 – Data Storage, Publication, and Destruction

☐ Exceeds Standard (substantially exceeds requirement of standard)
☒ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Data is properly stored, maintained and secured. Access to data is securely controlled.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Lawanda M. Long
Auditor Signature
Lawanda M. Long,
Certified PREA Auditor

June 19, 2015