**PREA AUDIT: AUDITOR’S SUMMARY REPORT**

**ADULT PRISONS & JAILS**

**Name of facility:** State Correctional Institution at Retreat  
**Physical address:** 660 State Route 11 Hunlock Creek, PA 18621  
**Date report submitted:** July 8, 2015  
**Auditor Information**  
- **Address:** P.O. Box 552 Richmond, TX 77406  
- **Email:** jeff@preaauditing.com  
- **Telephone number:** 832-833-9126  
**Date of facility visit:** June 18-19, 2015

**Facility Information**  
**Facility mailing address: (if different from above)**  
**Telephone number:** 570-735-8754

**The facility is:**  
- ☐ Military  
- ☐ County  
- ☐ Federal  
- ☐ Private for profit  
- ☑ State  
- ☐ Private not for profit

**Facility Type:**  
- ☐ Jail  
- ☑ Prison

**Name of PREA Compliance Manager:** Bernadette Mason  
**Title:** Classification & Program Manager  
**Email address:** bmason@pa.gov  
**Telephone number:** 570-735-8754 ext. 249

**Agency Information**  
**Name of agency:** Pennsylvania Department of Corrections  
**Governing authority or parent agency: (if applicable)** N/A
AUDIT FINDINGS

NARRATIVE:

A Prison Rape Elimination Act Audit of the State Correctional Institution at Retreat was conducted from June 18, 2015 to June 19, 2015. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012.

An entrance meeting was held the morning of the onsite audit with the following persons: Superintendent- Theresa DelBalso, Deputy Superintendent for Centralized Services- Kathy Brittain, Staff Assistant to the Executive Deputy Secretary- Carole Mattis, and PREA Compliance Manager- Bernadette Mason.

The auditor wishes to extend its appreciation to Superintendent DelBalso and her staff for the professionalism they demonstrated throughout the audit and their willingness to comply with all requests and recommendations made by the auditor.

The auditor would also like to recognize PREA Coordinator Jennifer Feicht and PREA Compliance Manager Bernadette Mason for their hard work and dedication to ensure the facility is compliant with all PREA standards.

After the entrance meeting, the auditor was given a tour of all areas of the facility, including; all general population housing units, administrative segregation, plumbing classroom, electric
technology classroom, automotive technology classroom, educational building, activities building, carpenter shop, welding shop, correctional industries laundry, warehouse, garage, powerhouse, inmate education, kitchen, commissary, clothing exchange, control rooms, visitation, intake, medical, recreation, and the Chapel. During the tour, several informal interviews were conducted with inmates and staff throughout the facility.

A total of 26 staff were interviewed with at least one staff member interviewed from each interview category, with the exception of the interviews related to educational staff who work with youthful inmates, line staff who supervise youthful inmates, and non-medical staff involved in cross-gender searches (these interview types were not applicable to this facility).

Staff interviews were conducted on all three shifts.

A total of 15 inmates were interviewed with at least one inmate interviewed from each interview category, with the exception of the interviews related to youthful inmates, inmates placed in segregated housing for risk of sexual victimization, and transgender/intersex inmates (these interview types were not applicable to this facility).

Telephone interviews were conducted with the Agency Head, Agency Contract Administrator, and the SAFE/SANE staff.

The count on the first day of the audit was 1043. The count on the final day of the audit was 1043.

Throughout the pre-audit and onsite audit, open and positive communication was established between the auditor and facility staff. During this time, the auditor discussed his concerns with PREA Coordinator Jennifer Feicht and PREA Compliance Manager Bernadette Mason. Through a coordinated effort by these key staff members as well as other staff, all issues were addressed and corrected to the satisfaction of the auditor prior to the completion of the Final Report.

When the audit was completed, the auditor conducted an exit briefing on June 19, 2015. The auditor gave an overview of the audit and thanked the staff for all their hard work and commitment to the Prison Rape Elimination Act.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The State Correctional Institution at Retreat officially opened in January 1988. The site of SCI Retreat has a long record of service to the citizens of Pennsylvania. In 1878, an Almshouse (Poorhouse) was established on the grounds by the Central Poor District of Luzerne County “for the care of unfortunate indigents.” In 1900, a Hospital for the Insane was added where “those who have mental troubles are treated.”

Through the first 30 years of this century, it was known as the Retreat Hospital for the Insane and Almshouse. The gradual trend away from caring for the indigents was formally marked by
re-naming the facility the Retreat Mental Hospital in 1930. It continued operating as a county facility until 1943, when it was transferred to state control.

Retreat State Mental Hospital operated until 1981, when it was formally closed. On June 29 of that year, an Executive Order, signed by Governor Richard Thornburgh, transferred the facility to the Bureau of Corrections, effective July 1, 1981. The Bureau was to have temporary responsibility for maintenance and security until the counties could take it over. The plan never materialized however, so the Bureau retained the property and turned Retreat into a State Correctional Institution.

SCI Retreat was accredited by the American Correctional Association in 1988 and has successfully achieved reaccreditation every three years since that time.

Number of Acres inside Perimeter: 19
Number of Acres outside Perimeter: 245
Number of Operational Structures (inside and outside of perimeter): 22
Number of Housing Units: 8 (Housing units consist of both cells and dormitory-style housing)
Special Features: One Secure Special Needs Unit, the only male Dual Diagnosis Therapeutic Community program in the Department.

Inmate Average Age: 35
Number of staff currently assigned to the facility: 396
Number of youthful inmates: 0
Facility security level/inmate custody level: Medium Security/Custody Levels 2, 3, 4, and 5

Academic and Vocational Education:

• Academic education is offered from literacy through high school credentials. Inmates can obtain a Commonwealth Secondary Diploma, if they qualify for the program, or a GED.
• Vocational Education: Barber School, Business Occupations programs.
• Apprenticeship Programs: Carpenter Shop, Electric Shop, Plumbing Shop, Machine Shop, Paint Shop, Refrigeration, Cook, and Baker.
• Inmates completing the program of apprenticeship receive a Journeyman Certificate from the Pennsylvania Department of Labor and Industry.

Inmate Programs:
Family/Relationship Self
• Inside Out Dads
• Reading to your Children
• Inmate Accountability Bank
• Certified Peer Specialist Group
- Veteran's Program
- Religious Programming
- Community Orientation Reintegration (Phase 1)

Sex Offenders
- Sex Offender Moderate-High Intensity
- Sex Offender Low Intensity
- Special Needs Sex Offender Program
- Sex Offender Booster

Re-Entry
- Pre-Vocational Skills Class
- Offender Work Program
- Money Smart Program

Alcohol and Other Drug (AOD)
- Duel Diagnosis Therapeutic Community
- Recovery Unit
- Outpatient Therapy Group
- Duel Diagnosis
- AA/NA/SOS Support Meetings

Offense Related
- Thinking for a Change
- Act 143 Victim Awareness
- Violence Prevention
- Batterer’s Intervention

Mental Health Programs
- MH Education
- MH Management
- MH Peer Group
- MH Community Re-Entry Group
- Dual Diagnosis Group
- MH Support Group for Recent Psychiatric Commitment Returns

Community Development Organization
- Day of Responsibility
Correctional Industries: Correctional Industries operates a laundry at SCI Retreat. In addition to doing laundry for the institution, it also has contracts with a number of outside state agencies, particularly state hospitals, as well as other correctional institutions. Inmates are afforded the opportunity to be involved in Certified Laundry Correspondence Courses through the National Association of Institutional Linen Management. Correctional Industries laundry employs 50 inmates.

Community Work Program: The Community Work Program had a total of 11,993 hours of community work in 2012 fiscal year for an estimated savings to the community of $299,825.

Work conducted includes:
- Litter pick-up on area highways and local routes
- Street cleaning and brush clearing in flood control areas for the communities of Shickshinny, Plymouth, and Newport Township
- Clearing of reed beds for Shickshiny Sewer Authority
- Grass cutting and cleaning of State Route 11 Rest Area

SUMMARY OF AUDIT FINDINGS:

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
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<tbody>
<tr>
<td>Number of standards exceeded</td>
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<tr>
<td>Number of standards met</td>
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<tr>
<td>Number of standards not met</td>
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<tr>
<td>Not Applicable</td>
<td>2</td>
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§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)

DC-ADM008 PREA Procedures Manual Section 2 states the Department will take appropriate actions to ensure a zero tolerance toward all forms of sexual abuse and sexual harassment in order to promote the safety of inmates. The Department will implement federal Prison Rape Elimination Act (PREA) Standards to ensure that all
aspects of operations work toward preventing, detecting and responding to such conduct resulting in a safer environment.

Definitions of prohibited behaviors regarding sexual assault and sexual harassment were located in the Glossary of Terms.

Sanctions for those found to have participated in prohibited behaviors was located in policy 801 Inmate Discipline, as well as 01.06.02 Sexual Harassment for employees.

There is one statewide PREA Coordinator responsible for PREA compliance across the Department. The statewide PREA Coordinator's sole responsibility is to develop, implement and oversee Department efforts to comply with the federal PREA Standards in all of the Department's facilities. The statewide PREA Coordinator will have the authority to make necessary decisions to ensure compliance and report directly to the Executive Deputy Secretary.

The Corrections Classification and Program Manager (CCPM) has been designated as the PREA Compliance Manager (PCM) at each facility and has been given sufficient time and authority to coordinate that facility's compliance with Department policy and federal PREA Standards. The PREA Compliance Manager reports to the Deputy of Centralized Services.

Interviews with the PREA Coordinator indicates she is allotted ample time to oversee the agency's efforts to ensure PREA compliance in all of its facilities. There are 27 PREA Compliance Managers that report to the PREA Coordinator. The PREA Coordinator communicates with the PREA Compliance Managers on a regular basis via telephone and email, and conducts regular site visits at the facilities.

Interviews with the PREA Compliance Manager indicates she is allotted ample time to oversee the facility's PREA compliance.

During the onsite audit, the auditor was advised the agency sent the PREA Coordinator as well as another staff member to the Department of Justice Auditor Training. The auditor was advised this is an example of the agency's commitment to the Prison Rape Elimination Act.

§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)
DC-ADM008 PREA Procedures Manual Section 2 states the Department shall include in any new contract or contract renewal for the housing of an inmate (on or after the effective date of this procedure) with a private entity or other entity, including other government agencies, the entity's obligation to adopt and comply with the PREA Standards and the Department’s policies related to PREA compliance.

The contracted entity will undergo regular, mandated audits on a three-year basis, as required by the National PREA Standards.

The Department shall provide for contract monitoring to ensure that the contract service provider is complying with the PREA Standards with any new contract or contract renewal.

There has been only one contract for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies on or after August 20, 2012. On August 5, 2013, the Department entered into or renewed an agreement with Lackawanna County for the purpose of providing programming and full custody residential services to technical parole violators under the jurisdiction of the Commonwealth. This agreement included specific language requiring Lackawanna County to agree to adopt and comply with all PREA regulations. This agreement also includes the Department’s right to inspect the facility at any reasonable time. The agency has existing contracts with approximately 18 other facilities. Through interviews with the PREA Coordinator, it was discovered when these contracts come up for renewal, they will include language specific to PREA requirements.

Interviews with the Agency Contract Administrator indicates facilities the agency contracts with for the confinement of its inmates would be audited annually. In addition, monthly site visits would be conducted on the facility and investigations would be monitored to ensure compliance with the standards.

§115.13 – Supervision and Monitoring

☐ 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)

6.3.1, Facility Security Procedures Manual Section 15 outlines the agency’s staffing plan and the staffing plan audit process.
The PREA Compliance Manager’s duties include conducting and documenting unannounced rounds to identify and deter sexual abuse and sexual harassment in accordance with Department Policy 6.3.1, “Facility Security,” Section 19. The PREA Compliance Manager also works with the administration of the facility and the statewide PREA Coordinator, on an annual basis to assess, determine and document whether adjustments are needed to: the staffing plan, deployment of the video monitoring systems and other monitoring technologies and the resources the facility has available to commit to ensure adherence to the staffing plan. In situations where the staffing plan is not complied with, the PREA Compliance Manager shall document the justification for the deviations from the plan and forward written documentation to the statewide PREA Coordinator for review. The facility shall use the Security Staffing Survey in accordance with Department policy 6.3.1.

The Department shall ensure that each facility develops, documents and makes its best efforts to comply on a regular basis, but no less than once a year, with a staffing plan as found in Department policy 6.3.1, Section 15 that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse.

In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:

1) Generally accepted detention and correctional practices;

2) Any judicial findings of inadequacy;

3) Any findings of inadequacy from Federal investigative agencies;

4) Any findings of inadequacy from internal or external oversight bodies;

5) All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated);

6) The composition of the inmate population;

7) The number and placement of supervisory staff;

8) Facility programs occurring on a particular shift;

9) Any applicable State or local laws, regulations, or standards;

10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and

11) Any other relevant factors.
During the 2015 audit cycle, there have been no deviations from the staffing plan.

In circumstances of non-compliance with the staffing plan, the Facility Manager/designee shall document, in writing, and justify all deviations from the plan. This documentation will be forwarded to the Executive Deputy Secretary, Regional Deputy Secretary and Central Office Security Major.

Whenever necessary, but no less frequently than once a year, each facility shall assess, determine and document whether adjustments are needed to:

1) The facility’s deployment of video monitoring systems and other monitoring technologies; and

2) The resources the facility has available to commit to ensure adherence to the staffing plan.

The annual reviews will be conducted in consultation with the PREA Compliance Manager at that facility and the statewide PREA Coordinator.

Staff of the opposite gender shall announce their presence when entering an inmate housing unit in accordance with the following:

1) When the status quo of the gender supervision on a housing unit changes from exclusively same gender, to mixed- or cross-gender supervision, the opposite gender staff are required to verbally announce their arrival on the unit. The announcement is required for both custody and non-custody staff, and may include, for example, a clinician or case worker who spends time on the unit, or senior staff making supervisory rounds.

2) When an opposite gender staff member is entering a housing unit and it is unknown to him/her whether any other opposite gender staff are present, the entering staff member will announce their presence; and

3) This announcement may be made by the officer working at the control desk, via the intercom system; and

4) The announcement may also be made via a specific tone system that is utilized only for the purpose of announcing a member of the opposite gender entering the housing unit. Inmates will be educated on the tone system utilization.

During the pre-audit, the auditor was provided with documentation from the PREA Compliance Manager stating in accordance with PREA standard 115.13, as well as the DC-ADM008, intermediate and higher level staff will be conducting unannounced rounds specifically focusing on the housing units. Staff are not to alert other staff that these rounds are being conducted. The job classifications of staff conducting these rounds will
be: Superintendent, DSFM, DSCS, Major of the Guard, CCPM, Captains, and others as assigned.

During the pre-audit, the auditor was provided with documentation showing that numerous intermediate and upper-level supervisors have made unannounced rounds throughout the facility. Documentation shows the unannounced rounds have occurred on all three shifts.

Staff interviews indicate the facility has developed a staffing plan based on the requirements under PREA. The PREA Coordinator is consulted regarding assessments and/or adjustments to the staffing plan. Interviews further indicate unannounced rounds are being conducted by intermediate and higher-level facility staff on a regular basis. These rounds are occurring daily on all three shifts. Unannounced rounds are documented in the housing unit log book. In addition, each supervisor is required to generate a summary report and document any areas of concern in the PREA Administrative Tour Documentation Form. Supervisors stress to staff they are prohibited from alerting other staff of the unannounced rounds being conducted. Failure to comply with this directive may result in disciplinary action.

During the onsite tour, the auditor noticed several potential blind spots in the Powerhouse. The auditor discussed these areas of concern in detail with the PREA Compliance Manager and Superintendent. On June 25, 2015, the auditor was provided with a memorandum from the Superintendent to the staff, which stated that line-of-sight supervision is expected whenever inmates are working or eating lunch in the powerhouse. Accountability of each inmate and knowing their exact location is imperative. This is especially applicable when inmates are working on the tiers, behind the boilers, or close to the loud noise from the boilers. While it is feasible that an inmate may be out of view while performing his duties, this should be for an extremely limited amount of time and under controlled circumstances.

§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)
XX Not Applicable

DC-ADM 008 PREA Procedures Manual Section 2 states a youthful inmate (under the age of 18) shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters.
In areas outside of housing units, the facility shall either:

1) Maintain sight and sound separation between youthful inmates and adult inmates; or

2) Provide direct security staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

Upon initial reception to the Department, youthful inmates will enter into an expedited classification process as outlined in Department policy 11.2.1, “Reception and Classification.”

1) Male youthful inmates will be transferred to SCI Pine Grove within 24 hours of reception by the Department.

2) Female youthful inmates, under the age of 18, will immediately be placed into the Youthful Inmate Unit at SCI Muncy.

Due to the extremely low number of female youthful inmates that the Department houses at any given time, there are specific provisions that must be followed.

1) Youthful inmates will have a separate housing unit, with sight and sound separation from adult inmates, where they are able to have a separate shower area, separate day room and separate sleeping quarters from adult inmates.

2) Any time that the youthful inmate leaves the separate housing unit, they must be accompanied and supervised directly by a staff member.

3) The staff member is to ensure that there is no inappropriate contact, physical, or verbal, between the youthful inmate(s) and an adult inmate.

The Department shall make every effort to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, the Department shall not deny youthful inmates daily large muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall have access to other programs and work opportunities to the greatest extent possible.

During the pre-audit, the auditor was provide with documentation from the PREA Compliance Manager stating SCI Retreat does not house youthful offenders.

§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)

6.3.1 Facility Security Procedures Manual Section 30- Searches states that when conducting the unclothed search of an inmate, absent exigent circumstances, a female staff member shall search a female inmate, and a male staff member shall search a male inmate.

In the past 12 months, there have not been any cross-gender strip or cross-gender visual body cavity searches of inmates.

SCI Retreat does not house female inmates; therefore, PREA standards pertaining to searches of female inmates is not applicable.

DC-ADM 008 PREA Procedures Manual Section 2 states all cross-gender strip searches shall be documented on the Cross-Gender Strip Search Validation Form. Beginning August 20, 2015, all cross-gender pat searches of female inmates shall be documented on the Cross Gender Pat Search Validation Form.

DC-ADM 008 PREA Procedures Manual Section 2 states inmates shall be able 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. This limitation not only applies to in-person viewing, but also to all forms of remote viewing.

DC-ADM 008 PREA Procedures Manual Section 2 states staff of the opposite gender shall announce their presence when entering an inmate housing unit in accordance with the following:

1) When the status quo of the gender supervision on a housing unit changes from exclusively same gender, to mixed- or cross-gender supervision, the opposite gender staff is required to verbally announce their arrival on the unit. The announcement is required for both custody and non-custody staff, and may include, for example, a clinician or case worker who spends time on the unit, or senior staff making supervisory rounds.

2) When an opposite gender staff member is entering a housing unit and it is unknown to him/her whether any other opposite gender staff are present, the entering staff member will announce their presence; and

3) This announcement may be made by the officer working the control desk via the intercom system; and
4) This announcement may also be made via a specific tone system that is utilized only for the purpose of announcing a member of the opposite gender entering the housing unit. Inmates will be educated on the tone system utilization.

DC-ADM 0008 PREA Procedures Manual Section 9- Working with Transgender/Intersex Inmates states the facility shall not search or physically examine a transgender/intersex inmate for the sole purpose of determining the inmate’s status. If the inmate’s genital status is unknown, it may be determined by 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.

During the pre-audit, the auditor was provided with documentation from the PREA Compliance Manager stating SCI Retreat has not conducted any cross-gender strip searches or visual body cavity searches. SCI Retreat is an all-male facility and cross-gender pat searches of male inmates are permissible.

During the pre-audit, the auditor was provided with a PowerPoint presentation of their training for offender searches.

During the onsite audit, the auditor discovered the agency just recently finalized their policy on cross-gender searches and searches of transgender/intersex inmates. The auditor requested the facility send out a training memorandum to its staff, discussing this new policy. The facility complied with this request and issued a training memorandum on July 6, 2015. Formal training on these topics will be included in the staff annual in-service training.

During the onsite tour, the auditor noticed a bathroom stall door that was missing from one of the bathroom stalls, inside one of the housing units. The auditor brought this to the attention of the PREA Compliance Manager, and the auditor was advised this was previously discovered by staff and that a work order had recently been submitted to repair the door. The auditor was provided with a copy of the work order.

Interviews with random staff indicates staff are well aware of the prohibition of conducting strip searches on transgender inmates for the sole purpose of determining their genital status. Interviews with both staff and inmates indicate when female staff enter the male housing units, an announcement is made of their presence and male inmates are rarely naked in full view of the female staff (when this occurs it appears to be accidental and extremely rare).

§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)

DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Manual Section 1-General Procedures, DC ADM 006 Reasonable Accommodations for Inmates with Disabilities Manual Section 2- Accommodations, and DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Manual Section 3- Specific Disabilities outlines the agencies approach to providing services to inmates with disabilities.

DC-ADM 0008 PREA Procedures Manual Section 2 states:

1) Pursuant to Department policy DC-ADM 006, “Reasonable Accommodations for Inmates with Disabilities,” the Department shall ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

2) Written materials will either be delivered in alternative formats that accommodate the inmate’s disability or the information will be delivered through alternative methods, such as reading it to the inmate or communicating through an interpreter, which ensures the understanding of the PREA related material.

3) The Department shall take reasonable steps to ensure meaningful access to all aspects of the Department’s efforts to prevent, detect and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide qualified interpreters. The PREA Compliance Manager will ensure that only staff members or qualified contractors who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, provide translation for inmates. If a multi-lingual staff member is not available, then the “AT&T Language Line” or equivalent service must be utilized.

4) The Department shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate’s safety, the performance of first response duties under PREA Standard, or the investigation of the inmate’s allegations. Justification for any use of an inmate assistant shall be documented accordingly.

In the past 12 months, there have not been any instances where inmate interpreters, readers, or other types of inmate assistants have been used.

During the pre-audit, the auditor was provided with a copy of a purchase order with Language Services Associates. This contract shows an end date of June 30, 2014. This
was brought to the attention to the PREA Coordinator. Upon further review, it was discovered the agency had a current contract with Propio Language Services. This contract shows to be valid from September 1, 2014 to June 30, 2016.

The interview with the Agency Head indicates the agency has access to the TTY phone for the hearing impaired, a language line service for non-English speaking inmates, and provides handouts and inmate handbooks in both English and Spanish. In addition, the agency is actively pursuing a transcription company to transcribe text into braille for the vision impaired. While onsite, the auditor conducted an interview with a Spanish speaking inmate, utilizing the language line. Using this service, the auditor was able to communicate effectively with the Spanish speaking inmate.

§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 Manual Section 41- Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies states The Department shall not hire or promote anyone who-

1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, or other correctional institution.

2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or

3) Has been civilly or administratively adjudicated to have engaged in the activity described above.

The Department will consider any incidents of sexual harassment in determining whether to hire or promote anyone.

The PREA Current/Prior Employer Letter is used to solicit specific information from prior employers regarding the applicant’s previous misconduct.

In the past 12 months, there were 31 out of 31 staff who may have contact with inmates who have had criminal background record checks conducted by the facility.
In the past 12 months, there were 14 out of 14 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.

04.01.01 Human Resources and Labor Relations Manual Section 40- Conducting Employee Background Investigations states Human Resources Offices will be responsible for ensuring the PREA Annual Employee Compliance Verification Form is completed in conjunction with each employee's annual Employee Performance Review.

The DOC application requires employees to take an oath sworn before a Notary Public that this application and any attachments contain no misrepresentations, falsifications, omissions, or concealment of material fact.

Interviews with the Human Resources staff indicate criminal background checks are conducted on all newly hired employees. Through interviews with Administrative Staff, it was discovered the Agency utilizes “JNET,” which notifies them immediately, anytime a staff member is arrested. This system is real-time; therefore, documented background checks for employees every 5 years is not necessary.

§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)

DC-ADM 0008 PREA Procedures Manual Section 2 states:

1) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the Department shall consider the effect of the design, acquisition, expansion or modification upon the Department’s ability to protect inmates from sexual abuse.

2) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the Department shall consider how such technology may enhance the Department’s ability to protect inmates from sexual abuse.

The facility has not acquired any new facilities or made any substantial expansions or modifications of existing facilities since August 20, 2012.
Interviews indicate camera technology is not used to replace staff; however, it is used as a tool to supplement them and maximize visual contact throughout the facility with the goal of eliminating blind spots.

During the onsite tour, the auditor recommended relocating a mirror in the laundry room in order to eliminate a blind spot in the corner of the room, behind the washing machines. This area was utilized for inmates to hang up their coats. On July 2, 2015, the auditor was provided with a work order to relocate the mirror to this area.

§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)

The facility is responsible for conducting both administrative investigations and criminal investigations. Criminal investigations may also be conducted by the Pennsylvania State Police.

DC-ADM 008 PREA Procedures Manual Section 5- Investigating Allegations of Sexual Harassment and/or Sexual Abuse states to the extent the Department is responsible for investigating allegations of sexual abuse, the Department shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions, in accordance with the Response to Allegation of Sexual Abuse Checklists (Shift Commander Cover Sheet [Attachment 4-A], Initial Response – Victim [Attachment 4-B], Initial Response – Abuser [Attachment 4-C], the Instructions for PREA Evidence Retention [Attachment 4-E] and as well as Department policy 6.3.1, “Facility Security,” Section 15. The uniform evidence protocol was adapted from or otherwise based on the most recent edition of the DOJ’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.

The protocol established for evidentiary purposes shall be developmentally appropriate for youth, where applicable, in accordance with PREA Standard 115.21.

Forensic Medical Examinations are offered at Wilkes-Barre General Hospital and are conducted by SANEs.

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states treatment services shall be 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.

During the pre-audit, the auditor was provided with an MOU between the agency and Wilkes-Barre General Hospital. The agreement contains language stating the hospital agrees to conduct forensic examinations on victims of sexual abuse, and those examinations will be conducted by SANEs/SAFEs. The MOU was not signed by the hospital representative. The auditor asked the facility PREA Compliance Manager about this and discovered the facility has made several attempts to get the MOU signed; however, the hospital never got back with them. The auditor conducted a phone interview with the SAFE/SANE representative for the hospital and was advised any inmate brought to the hospital, and in need of a forensic exam, would receive such exam. The auditor was advised by the SAFE/SANE representative the hospital has 18 SAFE/sSANEs on staff, and there is always one available to conduct forensic examinations. In the event there was not a SAFE/SANE available, a trained registered nurse would be available to collect evidence on male victims of sexual abuse. The SAFE/SANE representative acknowledged the hospital received the MOU from the facility, and the MOU was currently being reviewed by the hospital's contract department. The auditor was not given a timeframe on when the MOU would be signed.

Within the last 12 months, there has been three forensic medical examinations conducted. These examinations were conducted by a SANE at the hospital.

During the pre-audit, the auditor was provided with a documented MOU for victim advocate services; Victims Resource Center. The auditor contacted Victims Resource Center and was advised by their representative they have staff available to respond and provide victim advocate services in the event an inmate was sexually abused.

During the pre-audit, the auditor was provided with an MOU between the Secretary of Corrections and the Pennsylvania State Police (PSP), dated September 24, 2013. The auditor was provided with documentation from PSP to the agency stating PSP will follow the subject standard of 115.21.

Interviews with a random sample of staff indicate the majority of staff are well aware of how to preserve evidence and to whom they need to forward reports of sexual abuse.

§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)

DC-ADM 008 PREA Procedures Manual Section 5- Investigation Allegations of Sexual Harassment and/or Sexual Abuse states an administrative and/or criminal investigation shall be completed on every allegation of sexual abuse and sexual harassment, in accordance with best practice for the investigation of sexual harassment/sexual abuse.

During the past 12 months, there have been 23 allegations of sexual abuse and/or sexual harassment that were received. Of these, 3 allegations were referred for criminal investigation. Currently, there are 3 investigations pending.

Criminal Investigations are conducted by 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.

Interviews indicate all Criminal Investigations are conducted by the Pennsylvania State Police (PSP). Administrative Interviews are conducted by trained facility staff and/or the Office of Special Investigation and Intelligence (OSII).

§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 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states the PREA Compliance Manager, in conjunction with the Training Coordinator at each facility, shall ensure that all staff members are: informed that sexual contact with an inmate is prohibited and that an inmate has a right to report if sexual contact occurs, through the basic PREA training. This training will include, at a minimum, the following information:

1) The zero tolerance policy against sexual abuse and sexual harassment within the Department;

2) How staff are to fulfill their responsibilities under the Department’s sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures as defined in this policy;
3) Inmates’ right to be free from sexual abuse and sexual harassment;

4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;

5) The dynamics of sexual abuse and sexual harassment in confinement;

6) The common reactions of sexual abuse and sexual harassment victims;

7) How to detect and respond to signs of threatened and actual sexual abuse;

8) How to avoid inappropriate relationships with inmates;

9) How to communicate effectively and professionally with inmates, including LGBTI or gender nonconforming inmates; and

10) How to comply with relevant laws of Pennsylvania related to mandatory reporting of sexual abuse to outside authorities.

A review of the 2015 PREA Course Lesson Plan indicates all topics above are covered during training.

Training is tailored to the gender of the inmates at the facility.

During the pre-audit, the auditor was advised in the past 12 months, there have been 410 staff employed by the facility, who may have contact with inmates who were trained on the PREA requirements enumerated above. During the onsite interview, the PREA Compliance Manager provided the auditor with documentation showing that all 576 staff employed by the facility have been trained on the PREA requirements enumerated above. This equates to 100% of all staff, who may have contact with inmates.

Between trainings the agency provides employees who may have contact with inmates with information about current policies regarding sexual abuse and harassment. Refresher training will be provided as needed, and annually.

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.

§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)

DC-ADM 008 PREA Procedures Manual Section 2 - Sexual Abuse/Sexual Harassment Prevention and Training states contractors and volunteers (to include interns, contract service providers, public visitors, or individuals who have business with or use the resources of the Department, such as religious volunteers, training program personnel, vendors, specialty maintenance, etc.) will receive training on their responsibilities under the Department’s sexual abuse and sexual harassment prevention, detection and response policies and procedures. They will be trained during orientation sessions and annual training reflective of the level of contact that they have with inmates.

In the past 12 months, there have been 24 volunteers/contractors who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response.

All volunteers and contractors who have contact with inmates have been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

During the pre-audit, the auditor was provided with a sample of documentation confirming that volunteers/contractors understand the training they have received.

Interviews with Volunteers/Contractors indicate Volunteers and Contractors are provided with PREA education including the agency’s zero tolerance policy as well as to whom they would forward any sexual abuse reports.

§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)

DC-ADM 008 PREA Procedures Manual Section 2 - Sexual Abuse/Sexual Harassment Prevention and Training states each facility shall provide inmate education explaining the zero tolerance policy regarding sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse, sexual harassment or retaliation, and what to do if he/she is the victim of such. This information shall be provided in formats accessible to all inmates, including those who are limited English proficient, deaf,
visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.

During the intake process, all inmates, including Parole Violators (PVs), shall receive information explaining the zero tolerance policy regarding sexual abuse and sexual harassment, and how to report incidents or suspicions of sexual abuse, sexual harassment or retaliation, and what to do if he/she is the victim of sexual abuse, sexual harassment or retaliation. Medical will provide a copy of the Sexual Abuse Awareness Informational Brochure to the inmate immediately upon intake and document.

Within the first 30 days of reception, additional information will be provided to all inmates, including Parole Violators, either during orientation at the Diagnostic and Classification Center (DCC) and reception sites or upon return to Department custody. All inmates will be shown a video regarding their rights to be free from sexual abuse, sexual harassment, and retaliation. They will also be provided information regarding Department policies and procedures for responding to such incidents. Inmate education may be provided to inmates individually or in groups. A staff member must be present at all times to facilitate discussion, in conjunction with the Facilitator’s Guide (Attachment 2-J) and to answer questions.

The PREA video, “PREA: What You Need to Know” is available for use. Each facility shall have access to this video in Spanish and English, with subtitles.

  1) An Intake Counselor shall remain in the room during the playing of the video to observe inmates, looking for reactions.

  2) Additionally, the Intake Counselor shall ask questions, as outlined in the Facilitator’s Guide, at the end of the video to determine comprehension on the materials.

  3) As equally important, the Intake Counselor shall offer to meet privately with any of the inmates if they request, to discuss issues related to the video.

An inmate who did not receive the education at the DCC shall receive this training within one year of the effective date of the PREA standards. This education may be provided as a group presentation or individually during the inmate’s annual/semi-annual case review, as needed.

Any inmate that is transferred must receive education upon transfer, only to the extent that the policies and procedures of the inmate’s new facility differ from those of the previous facility.

  1) The PREA video is to be played a minimum of two times each month over the inmate television channel.
2) During the inmate’s annual review, the Counselor will discuss issues related to sexual abuse in prison and offer the inmate an opportunity to discuss related concerns. The counselor will provide a Sexual Abuse Awareness Informational Brochure at the time of his/her annual review.

3) Sexual abuse, sexual harassment and retaliation training shall be documented by the inmate signing the PREA Inmate Education Verification Form (Attachment 2-K). This form will be filed in the DC-14. Provision of PREA Inmate Education shall be documented in an Inmate Cumulative Adjustment Record (ICAR) entry.

During the past 12 months, 475 inmates were admitted and received such information at intake. 475 of these inmates received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. All inmates who were still incarcerated 30 days after intake, received comprehensive education.

Additional information about the agency’s PREA policies is continuously and readily available or visible through posters, inmate handbooks, and other written formats. During the pre-audit, the auditor was provided with a copy of the inmate handbook, PREA inmate educational posters, and PREA staff educational posters.

During an interview with a member of the intake staff, it was discovered all incoming inmates are provided with PREA education through the inmate handbook, PREA supplement information, and posters, immediately upon intake. All inmates also receive comprehensive PREA education via an instructional video. The majority of the inmate population who have been housed at the facility longer than a year, acknowledged receiving this education within the last 6 months. New intakes (intakes within the last 6 months), acknowledged receiving this education immediately upon intake.

§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)

DC-ADM 008 PREA Procedures Manual Section 2 - Sexual Abuse/Sexual Harassment Prevention and Training states Investigations - In addition to the Basic PREA Training provided to all staff, any staff designated to conduct sexual abuse investigations shall receive additional training in accordance with PREA Standard 115.31 and Specialized training: Investigations.
1) This specialized training will include, but is not limited to: interviewing sexual abuse victims, proper use of Miranda warnings, the Garrity rule, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.

2) This training will be facilitated by specially trained “PREA Specialized Security Training Teams.” An updated list of these “PREA Specialized Security Training Teams” will be kept on file by the statewide PREA Coordinator/designee.

3) Training will be offered to outside law enforcement through mutual agreements facilitated by the Department.

4) Once all Security Office staff members and members of the Office of Special Investigations and Intelligence (OSII) have received this specialized training, it will take place on an annual basis unless it is deemed necessary to be held more frequently by the statewide PREA Coordinator or Facility Manager.

5) Staff will be required to sign off that they have received the information and understand the included items on the PREA Training and Understanding Verification Form. This information will be kept in the staff member’s official personnel file.

6) The Training Coordinator at each facility shall ensure that all current security office staff receives this training within six months of the effective date of this policy.

7) The Department, any state entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.

During the pre-audit, the auditor was provided with documentation showing two facility investigators have received 12 hours of Specialized PREA Training for Investigations.

During interviews with facility investigators, the investigators acknowledged receiving the training specific to PREA requirements. Investigators were knowledgeable that any case that appeared to be criminal would be referred for criminal prosecution. Investigators also acknowledged using a preponderance of evidence as the standard of evidence used to substantiate allegations of sexual abuse and sexual harassment.

§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)

DC-ADM 008 PREA Procedures Manual Section 2 - Sexual Abuse/Sexual Harassment Prevention and Training states Medical/Mental Health Practitioners - In addition to the Basic PREA Training, any staff providing medical/mental health services, whether on a full or part-time status, shall receive additional training on working with victims of sexual abuse and sexual harassment. For the purposes of this training requirement, Medical staff will include all licensed medical staff, as well as non-licensed contact medical staff such as dental assistants, CHCAs and contracted provider staff.

1) This specialized training will include, but is not limited to: how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

2) This training will be coordinated by the statewide PREA Coordinator/designee.

3) The PREA Compliance Manager, in coordination with the Training Coordinator at each facility, shall ensure that all current medical/mental health staff receives this training within six months of the effective date of this policy.

4) All new medical/mental health staff shall receive this training within the first three months of employment with the Department.

5) Staff will be required to sign off that they have received the information and understand the included items on the PREA Training and Understanding Verification Form. This information will be kept in the staff member’s official personnel file in accordance with Section 1 of this procedures manual.

During the pre-audit, the auditor was provided with a PowerPoint Presentation and a PREA Training and Understanding Verification form, documenting the understanding of the material.

During the pre-audit, the auditor was advised 28 out of 29 medical and mental health care practitioners who work regularly within the facility have received the training required by agency policy. This equates to 99% of all medical and mental health staff who work regularly within the facility. The auditor was advised the remaining medical and/or mental health staff was out on medical leave and would be receiving the training in the near future.

Agency medical staff at this facility do not conduct forensic medical examinations. Such examinations are conducted at the local hospital.
Interviews with the medical and mental health staff indicate they were given approximately three hours of PREA training 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 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states all inmates shall be assessed during the intake screening process, upon receipt into another facility, whenever an inmate is involved in an incident of sexual abuse and at their annual review, for risk of being sexually abused by other inmates or sexually abusive toward other inmates. Within the first 72 hours of reception to the Department and receipt into another facility, the PREA Risk Assessment Tool (PRAT) will be conducted by qualified health care or unit management staff.

The auditor was provided with documentation showing the facility has completed 754 PRATs on 645 inmates. This includes 30 day reassessments. The auditor was advised initial screenings have been conducted on 645 of the current population of approximately 1,043 inmates. This equates to approximately 62% of the current population. The auditor was advised the agency-wide screening instrument was recently made available to the facilities in March 2015. The auditor was advised as soon as the screening instrument was made available, her staff began screening all new intakes with the instrument within 72 hours of intake. In addition to these screenings, the existing inmate population is being screened on both annual and bi-annual reviews. With this approach, the facility managed to screen approximately 645 inmates within approximately three months. The remaining inmates are anticipated to be screened within the next three months.

While onsite, the auditor reviewed a random sample of PRATs and discovered some reporting/tracking issues with the PRAT software. These issues were discussed with the PREA Compliance Manager and PREA Coordinator, and they both immediately began looking into the issues. The PREA Compliance Manager conducted an audit of all new intakes that were processed since the PRAT began being used. The auditor was provided with a copy of this review and discovered initial screenings occurred within 72 hours of intake. The auditor also discovered all new intakes as of April 2015, received a reassessment. The majority of these reassessments occurred within 30 days of intake; however, a few reassessments occurred a week or two beyond the 30-day mark. These assessments were attributed to an issue with the programming software. The PREA
Compliance Manager acknowledged the agency has identified this software issue and is actively working to correct it.

During the pre-audit, 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 point based screening instrument.

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training a reassessment will be conducted between day 20 and 30 of the inmate’s arrival in the system or receipt into another facility utilizing the PRAT. The Counselor will reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility staff since the intake screening. An inmate’s risk level will be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate’s risk of victimization or abusiveness utilizing the PRAT. Inmates shall not be disciplined for refusing to answer, or for not disclosing, complete information in response to the questions regarding prior victimization, disabilities, their perception of vulnerability or their sexual orientation.

Interviews with the PREA Coordinator and PREA Compliance Manager indicates any inmate scoring affirmatively as a potential victim and/or potential predator would initiate a “housing concern” in the computer. Staff would have access to see the “housing concern” in the computer; however, they would not have any access to the actual results of the screenings.

§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 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states the information received through the administration of the PRAT questions shall be used to inform housing, bed placement, work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. The sensitive information collected through these tools shall be kept as confidential as possible so as not to be used to the inmate’s detriment by staff or other inmates. The Department shall make individualized determinations about how to ensure the safety of each inmate.
DC-ADM 008 PREA Procedures Manual Section 9- Working with Transgender/Intersex Inmates states when deciding whether to assign a transgender/intersex inmate to a facility for male/female inmates, and in making other housing and programming assignments, the Department shall consider, on a case by case basis, whether a placement would ensure the inmate’s health and safety and whether the placement would present management or security problems. A transgender/intersex inmate’s own views, with respect to his/her own safety shall be given serious consideration. All pertinent information regarding the transgender/intersex individual should be discussed on a need-to-know basis and shared only with the appropriate staff to provide necessary services.

Interviews with staff indicate the screening instrument is being used to keep any inmate that scores to be a potential victim from inmates that score to be a potential predator. Transgender inmates would be housed in general population and would be afforded the opportunity to shower separately. A transgender inmate’s views in respect to his safety is given serious consideration in determining placement and program assignments. A transgender inmate’s placement and programming assignments are reassessed every six months.

Showers consist of single showers with shower curtains to ensure privacy.

§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)

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states Inmates at a high risk for sexual victimization or inmates that have alleged abuse shall not be placed involuntarily in Administrative Custody (AC) as a means of protection unless an assessment of all available alternatives has been made by Psychology and Security staff in conjunction with the PREA Compliance Manager, and a determination has been made that there is no other available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the inmate in involuntary AC for less than 24 hours while completing the assessment.

Within the last 12 months, there have not been any inmates who were at risk of sexual victimization placed in involuntary segregated housing.
In accordance with Department policy DC-ADM 802, Administrative Custody Procedures, at least every 30 days, the Program Review Committee (PRC) shall ensure each inmate is reviewed to determine whether there is a continuing need for separation from the general population. This review shall be documented on the DC-141, Part 3, Employee Report of Incident (Other).

Through staff interviews it was determined inmates at high risk of sexual victimization are not placed in segregated housing. The auditor was advised these inmates would be placed in other housing units, if at all possible. In the event an inmate at high risk of sexual victimization was placed in segregated housing, the inmate would have access to privileges and programs when at all possible. If these privileges and programs had to be restricted, the facility would document the activities restricted and the reason for the restriction. During the onsite audit, there were no inmates documented as being placed in segregated housing (for risk of sexual victimization/who allege to have suffered sexual abuse).

§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)

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states any inmate who is the victim of any of the following should report the abuse to a staff member as soon as possible:

1) Sexual abuse;

2) Sexual harassment;

3) Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment;

4) Staff neglect or violation of responsibilities that may have contributed to such incidents.

Inmates may report abuse or harassment to the Bureau of Criminal Investigations (BCI), which is Division of the Pennsylvania State Police and not part of the agency.
A report may be made to any staff member in the facility including, but not limited to, Medical staff, Psychology staff, Corrections Officers and Counselors. Staff shall accept and document reports made verbally, in writing, anonymously, and from third parties and promptly forward to the facility’s designated investigators. Staff are required to document verbal reports no later than by the end of their shift.

A Sexual Abuse Reporting Address has been established for staff as outlined on the PREA Reporting Poster (Attachment 3-A) or on the Department website to anonymously report sexual abuse, sexual harassment or retaliation to the Pennsylvania State Police.

1) The address for making a written report is: BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110.

2) A writer may choose to include his/her name and contact information, but it is not necessary in order to make the report. Reports may also be submitted online at www.tipsubmit.com.

A staff member, contract service provider, or volunteer, may also make a private report to the facility’s PREA Compliance Manager or the statewide PREA Coordinator.

Through staff and inmate interviews it was determined inmates and staff may make a private report to any supervisor or the PREA Compliance Manager. Inmates are also provided with the mailing address to the Pennsylvania State Police Bureau of Criminal Investigation and are permitted to make a report directly to this agency. The auditor was advised by random staff that all reports; including verbal, written, anonymous, and third-party reports would be investigated. Verbal reports would be documented by the staff immediately upon receipt of such information.

§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)

XX Not Applicable

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states inmates shall not utilize the inmate grievance system to report sexual abuse by a staff member or inmate-on-inmate sexual contact, as defined in the Glossary. However, if an inmate files a grievance related to sexual abuse, the Grievance Officer shall reject the grievance and forward to the facility Security Office for tracking and
investigation. The inmate will be notified of this action. All sexual abuse allegations received as a grievance would immediately be forwarded to appropriate investigators.

§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)

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse the Department works in collaboration with the Pennsylvania Coalition against Rape (PCAR) and its member centers. The facility PREA Compliance Manager, in conjunction with the statewide PREA Coordinator, has worked to establish mutual agreements with local rape crisis centers where all Department facilities are located. Copies of these agreements shall be maintained by the Department.

The PREA Compliance Manager shall ensure that inmates are offered and provided with access to outside victim advocates for emotional supportive services related to sexual abuse which has occurred in a confinement setting. During non-working hours, the Shift Commander will be responsible to ensure the aforementioned support services. Supportive services may be provided via a variety of methods including in person, during a non-monitored phone call and/or in writing. The preferred service delivery method is in person in a confidential setting.

The PREA Compliance Manager shall 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.

An inmate will be offered the opportunity to talk with a victim advocate and receive continued care when they have been a victim of facility sexual abuse, no matter if they reported the facility sexual abuse immediately or made a delayed disclosure.

During the pre-audit, the auditor was provided with a documented MOU for victim advocate services; Victims Resource Center. The auditor was also advised the facility has attempted to enter into an MOU with Wilkes-Barre General Hospital; however, this MOU has not been returned.

Through random inmate interviews as well as interviews with inmates who reported a sexual abuse, it was determined that many of the inmates were familiar with the victim services that are available for victims of sexual abuse. Inmates acknowledged having access to mailing addresses through posters, posted in the housing units.
§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)

DC-ADM 008 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states the Sexual Abuse Reporting Address is an option for the general public to report an allegation of sexual contact. This address is listed on the Department website and is used to anonymously report sexual abuse, sexual harassment, or retaliation to the PSP. The address for making a written report is: BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110. A writer may choose to include their name and contact information, but it is not necessary in order to make the report. Reports may also be submitted online at www.tipsubmit.com.

§115.61 – Staff and Agency Reporting Duties

☐ 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 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states any staff member, contract service provider, volunteer or intern, shall immediately report to the Shift Commander if he/she has knowledge, suspicion, or information regarding any of the following:

1) Sexual abuse of an inmate;

2) Sexual harassment of an inmate that occurred in a facility;

3) Retaliation against inmates or staff who reported such an incident; and/or

4) Staff neglect or violation of responsibilities that may have contributed to an incident or retaliation

The incidents listed above may have occurred in any facility, whether or not it is affiliated with the Department.
A DC-121, Part 2, Report of Extraordinary Occurrence Report shall be filed in every case, apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in Department policy, to make treatment, investigation, and other security and management decisions, where sexual abuse with an inmate is reported in accordance with Department policy 6.3.1, “Facility Security.”

Through interviews with a random sample of staff as well as interviews with medical and mental health staff, it was determined that all staff have a duty to report any knowledge, suspicion, or information related to sexual abuse or sexual harassment. Staff are also required to report any retaliation towards any inmate or staff for reporting and any staff neglect that may have contributed to an incident or retaliation.

§115.62 – Agency Protection Duties

☐ 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 PREA Procedures Manual Section 2 - Sexual Abuse/Sexual Harassment Prevention and Training ensures that when Department staff learn that an inmate is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action will be taken to protect that inmate.

In the past 12 months, there have not been any instances where the agency determined an inmate was subject to substantial risk of imminent sexual abuse.

Through interviews with staff, it was determined staff take immediate action to separate the alleged victim and abuser whenever it is determined an inmate may be at risk for imminent sexual abuse. The investigation would begin immediately, and a note would be placed in the computer to prevent contact between the alleged victim and abuser.

§115.63 – Reporting to Other Confinement Facilities

☐ 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 PREA Procedures Manual Section 3- Reporting Sexual Abuse and Sexual Harassment states:

An inmate may file a report of sexual abuse, sexual harassment or retaliation sustained while confined at another facility.

It is the Facility Manager/designee’s responsibility to notify the head of the facility in which the reported abuse, harassment or retaliation occurred. Notification must be provided as soon as possible, but no later than within 72 hours after receipt of information and documented on the Notification of Sexual Abuse/Harassment Allegation to Another Facility (Attachment 3-B). This document shall be maintained by the PREA Compliance Manager in an annual file for audit verification purposes in accordance with Section 1 of this procedures manual.

A copy of the notification must also be sent to the facility PREA Compliance Manager and the statewide PREA Coordinator/designee for tracking purposes.

If the facility being notified is another facility within the Department, the PREA Compliance Managers for involved facilities shall coordinate the information flow as to ensure:

1) All information is shared to ensure a thorough and expedient investigation is completed; and

2) The inmate receives information regarding the investigation in a confidential and timely manner as to comply with Section 8 of this procedures manual.

Upon receipt of an allegation from another facility that an inmate was sexually abused, harassed or retaliated against while confined at that location, the Facility Manager/designee at the receiving facility shall document the receipt of the allegation on the Notification of Sexual Abuse/Harassment Allegation to Another Facility.

The Facility Manager/designee shall immediately notify the Security Office to initiate a PREA investigation as outlined in Section 5 of this procedures manual.

The Facility Manager/designee shall send notification and supporting documentation to the facility PREA Compliance Manager and the statewide PREA Coordinator/designee within five working days of the receipt of the allegation.

During the past 12 months, the facility received five allegations that an inmate was abused while confined at another facility. SCI Retreat notified the other facility of such notifications within 72 hours.
During the past 12 months, the facility has not received any allegations of sexual abuse from other facilities.

Through staff interviews, it was determined when SCI Retreat receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred within their facility, the allegation would immediately be assigned to an investigator and would be investigated. SCI Retreat would also refer any allegations they receive for sexual abuse that occurred at other facilities, to the head of the outside facility. SCI Retreat would collect statements from any inmate involved who was housed at their facility and forward these statements to the outside facility to be a part of their investigation. The designated points of contact in both instances would be the PREA Coordinator and Security Office.

§115.64 – Staff First Responder Duties

☐ 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 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states:

Upon learning of an allegation that an inmate was sexually abused, the first staff member to respond shall:

1) Security Staff
   a. notify the facility's main control center;

   b. immediately separate the alleged victim and alleged abuser;

   c. secure any reported crime scene until appropriate steps can be taken to collect evidence; and

   d. if the abuse occurred within the last 96 hours that still allows for the collection of physical evidence, request the alleged victim and ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

2) Non-Security Staff
a. Immediately notify the facility's main control center/security staff; and

b. if the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence.

During the past 12 months, there have been 9 allegations that an inmate was sexually abused. Of these allegations, 7 times, the first security staff member to respond to the report separated the alleged victim and abuser. Through interviews it was determined there were only 3 instances when collecting evidence would have been appropriate based on the allegation. Of these allegations, there were 3 instances where the first security staff member to respond to the report:

1) Preserved and protected any crime scene until appropriate steps could be taken to collect any evidence;

2) Requested 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; and

3) Ensured 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.

During the past 12 months, there have been 7 allegations that an inmate was sexually abused where a non-security staff member was the first responder. Of those allegations responded to by a non-security staff member, all 7 instances where the non-security staff member to respond to the report:

1) Requested that the alleged victim not take any actions that could destroy physical evidence; and

2) Notified security staff.

Through interviews with inmates and staff, it was determined staff have responded promptly to outcries of sexual abuse. Staff know to separate the victim from the abuser as well as how to preserve evidence. Staff are aware to keep information related to sexual abuse investigations confidential.

§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)

DC-ADM 008 PREA Procedures Manual Section 4 - Responding to Reports of Sexual Abuse states the facility shall develop a written facility plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. This policy outlines the facility’s coordinated response plan.

Through interviews with staff, it was determined the facility follows a statewide DOC coordinated response plan for allegations of sexual abuse that involves a checklist of responsibilities.

§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)

The Department operates within the confines of collective bargaining agreements with eight (8) 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. In addition, the collective bargaining agreements are silent regarding suspensions pending investigation. When the contract is silent on issues, policy then governs.

A memo from the Secretary of Corrections dated January 12, 2015, states the Department does not need to demonstrate that the employee committed the suspected offenses; but rather, that the “nature of the allegations” are such that there is just case to remove the employee from the institution pending the outcome of the investigation.

During the Agency Head interview, the Agency Head confirmed the Department operates with collective bargaining agreements; however, these agreements do not restrict the Agency from removing staff abuser from contact with inmates under these terms.

§115.67 – Agency protection against retaliation
☐ 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 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states the agency will ensure retaliation monitoring of the following inmates:

1) Those that have reported institutional sexual abuse or sexual harassment allegations;

2) Those that have suffered sexual abuse; and/or

3) Those that have expressed a fear of retaliation due to cooperation with an investigation of an incident related to this procedures manual.

Specifically, the PREA Compliance Manager will ensure that such inmates are provided with the opportunity to meet with a corrections counselor, in accordance with Attachment 2-B, DOC Retaliation Monitoring form, who will then report to the PREA Compliance Manager. If the PREA Compliance Manager determines that the initial monitoring indicates a continuing need, the periodic status checks will be extended beyond 90 days.

Notify the Deputy of Centralized Services (DSCS) when staff require monitoring due to report of sexual abuse, or because of an expressed fear of retaliation due to cooperation with an investigation of inmate sexual abuse or sexual harassment, per PREA Standard (§115.67 [a][c][e]) and in accordance with Section 3, Subsection F. of the procedures manual.

During the past 12 months, there have been no incidents of retaliation reported.

Through various staff and inmate interviews, it was discovered multiple measures are taken to ensure against retaliation. In order to protect against retaliation, the PREA Compliance Manager makes all victims aware of the policy against retaliation and advises them if they experience any retaliation to let her know immediately. In addition, the PREA Compliance Manager meets with counselors and psychology staff in order to see if the inmate victim has indicated and/or reported any such retaliation to them. All allegations of sexual abuse are monitored for approximately six months. If necessary due to the circumstances, retaliation may be monitored indefinitely.

§115.68 – Post-Allegation Protective Custody
DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states inmates at a high risk for sexual victimization or inmates that have alleged abuse shall not be placed involuntarily in Administrative Custody (AC) as a means of protection unless an assessment of all available alternatives has been made by Psychology and Security staff in conjunction with the PREA Compliance Manager, and a determination has been made that there is no other available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the inmate in involuntary AC for less than 24 hours while completing the assessment.

DC-ADM 802 Administrative Custody Procedures states the facility may assign inmates to involuntary AC only until an alternative means of separation from likely abusers can be arranged and such assignment shall not ordinarily exceed 30 days.

During the past 12 months, there have been no instances where an inmate was placed in involuntary segregated housing awaiting completion of an assessment.

Through interviews with staff, it was discovered inmates who allege to have suffered sexual abuse or are at risk of sexual victimization are rarely (if ever) placed in involuntary segregated housing. Alternative housing in another general population housing unit or protective custody would be found. If an inmate were to be placed in involuntary segregated housing for these reasons, they would still have access to programs, privileges, education, and work opportunities to the extent possible. If any activities are restricted, the staff would document the opportunities limited, the duration of the limitation, and the reason for the limitation. This information would be logged in the ICAR notes.

§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)
DC-ADM 008 PREA Procedures Manual Section 5- Investigating Allegations of Sexual Harassment and/or Sexual Abuse outlines both criminal and administrative agency investigations.

Substantiated allegations of conduct that appear to be criminal are referred for prosecution.

Since August 20, 2012, there have not been any substantiated allegations of conduct that appear to be criminal that were referred for prosecution.

The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual assault or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Through interviews with inmates who allege to have suffered from sexual abuse, it was determined investigative staff do not require victims to take a polygraph examination as a condition for proceeding with the investigation.

Through staff interviews, it was determined the security office and PREA Compliance Manager would be informed on the progress of any investigations conducted by the Pennsylvania State Police. They would receive this information by regular correspondence via phone and/or email. Investigators have received specialized training for conducting sexual abuse investigations in confinement settings. Training topics included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative or prosecution referral. Investigations into allegations of sexual abuse or sexual harassment occur immediately upon receipt of such information. If the sexual abuse occurred within 96 hours, the alleged victim would be transported to the local hospital for a SAFE/SANE exam. Criminal investigations would be forwarded to the Pennsylvania State Police for investigation. Investigations continue, even if the staff member terminates employment or the inmate transfers to another facility. Both administrative and criminal investigations would be documented in investigation reports.

§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)
Investigating Allegations of Sexual Harassment and/or Sexual Abuse states in administrative investigations, the Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual harassment/sexual abuse are substantiated.

Interviews with investigative staff indicate a preponderance of evidence is used when determined whether to substantiate allegations of sexual abuse or sexual harassment.

§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)

DC-ADM 008 PREA Procedures Manual Section 8- Notification of Inmates states following the investigation into an inmate’s allegation that he/she suffered sexual abuse or sexual harassment in a facility within the Department, the Prison Rape Elimination Act (PREA) Compliance Manager at the facility where the inmate is housed shall inform the inmate, in writing on the PREA Investigation – Inmate Notification Form (Attachment 8-A) as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.

A review of notifications indicate inmates are being responded to, in writing, as to the outcome of the investigation.

If another agency conducts the investigation, the PREA Compliance Manager shall request the relevant information from the investigative agency in order to inform the inmate.

Following an inmate’s allegation that a staff member has committed sexual abuse or sexual harassment against an inmate, the PREA Compliance Manager shall subsequently inform the inmate when any of the following occurs:

1) The staff member is no longer posted within the inmate’s unit;

2) The staff member is no longer employed at the facility;

3) The Department learns that the staff member has been criminally charged related to sexual abuse within the facility; or
4) The Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

During the past 12 months, there were six criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility. Of these investigations, all six inmates were notified, verbally or in writing, of the results of the investigation. All six notifications were documented.

During the past 12 months, there were not any investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency; however, three are currently pending.

Through interviews with various staff and inmates, it was determined investigators notify the inmate, in writing, as to whether the allegation was substantiated, unsubstantiated, or unfounded.

§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)

DC-ADM 008 PREA Procedures Manual Section 7-Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation states any employee who violates Department sexual abuse or sexual harassment policies by engaging in, failing to report, or knowingly condoning sexual abuse or sexual harassment of an inmate shall be subject to appropriate disciplinary or administrative action up to and including termination.

When an allegation is made involving a staff member, contract service provider or volunteer this person will be removed from contact with the alleged victim until the conclusion of this investigation.

In the event that a staff member is terminated, or resigns in lieu of discharge, for violation of the this procedures manual, the Bureau of Human Resources (BHR) will notify the Office of Special Investigations and Intelligence (OSII) to determine if a potential criminal violation exists. If the violation meets criminal standards, OSII will refer the matter to the District Attorney’s Office that has jurisdiction over the affected facility.
During the past 12 months, there have not been any staff from the facility who have violated agency sexual abuse or sexual harassment policies.

Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.

During the past 12 months, there have not been any staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies.

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, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

During the past 12 months, there have not been any staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.

§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)

DC-ADM 008 PREA Procedures Manual Section 7-Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation states:

1) When an allegation is made involving a contractor or volunteer, this person will be removed from contact with the alleged victim until the conclusion of this investigation;

2) If a contractor or volunteer violates this procedures manual, other than by engaging in sexual abuse, the facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with inmates;
3) Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates, and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

During the past 12 months, there have not been any contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates.

Through interviews with the Superintendent, it was determined that any contractor or volunteer suspected of sexual abuse would be prohibited from contact with inmates when appropriate. Remedial disciplinary measures would be considered for minor policy violations, depending on the circumstances.

§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)

DC-ADM 008 PREA Procedures Manual Section 7-Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation states:

1) Inmates shall be subject to disciplinary sanctions pursuant to the formal disciplinary process, following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

2) Sanctions shall be 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.

3) The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed.

4) When an inmate is found guilty of a Class 1 Misconduct related to sexual abuse, the Unit Manager shall refer the inmate to the Sex Offender Treatment Program for evaluation to determine whether or not the inmate is appropriate for the program and if the inmate will be required to complete the program as part of the sanctions or as a condition to access programming or other benefits.
5) The facility may discipline an inmate for sexual contact with staff only if it is substantiated that the staff member did not consent to such contact.

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

7) A reporting inmate may only be subjected to discipline if the report is determined to be unfounded with proven malicious intent at the conclusion of a full investigation.

8) The Department prohibits all sexual activity between inmates and may discipline inmates for such activity. The Department will not deem such activity to constitute sexual abuse if the Department through the investigative process determines that the activity is not coerced or forced.

During the past 12 months, there have not been any administrative nor criminal findings of inmate-on-inmate sexual abuse that has occurred at the facility.

Through interviews with the Superintendent, it was discovered that inmates found to have engaged in sexual abuse or sexual harassment may face a misconduct hearing and/or criminal charges depending upon the circumstances. Misconduct sanctions include disciplinary custody.

Through interviews with the Mental Health staff, it was discovered inmate perpetrators of sexual abuse are provided with therapy consisting of cognitive techniques, relaxation techniques, trauma-informed care, and a sleep and appetite assessment. The inmate would be checked to see if they are having nightmares and/or flashbacks as well as for suicidality. In addition, mental health staff would check to see if the inmate was taking any prescribed medications and possibly refer this inmate to psychiatry. Completion of this therapy program plays a big role in determining the inmate’s eligibility in other programs and/or activities.

Through interviews with staff, it was determined inmates who have violated the agency’s sexual abuse and sexual harassment procedures would go through a disciplinary hearing. If the allegations were criminal in nature, the Pennsylvania State Police may pursue criminal charges.

§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)

DC-ADM 008 PREA Procedures Manual Section 2- Sexual Abuse/Sexual Harassment Prevention and Training states if the screening pursuant to PREA Standard 115.41 indicates that a prison or jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical and mental health practitioner within 14 days of the intake screening.

If the screening pursuant to PREA Standard 115.41 indicates that a prison or jail inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. In addition, when information becomes available relating to perpetration of inmate-on-inmate sexual abuse history, a mental health evaluation will be conducted on these abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Medical and mental health practitioners shall 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. The DC-484 (13.08.01 Delivery of Mental Health Services, Attachment 2-A) will be used for this purpose. If the inmate refuses to sign, it shall be noted on the DC-484 and signed by the witness and maintained in the medical record.

During the past 12 months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

During the past 12 months, 99% of inmates who have previously perpetrated sexual abuse were offered a follow-up meeting with a mental health practitioner.

During the onsite audit, the auditor reviewed a sample of records of both inmates who disclosed prior victimization as well as inmates who have previously perpetrated sexual abuse. 100% of all samples reviewed had documentation of a mental health evaluation within 14 days.

The information related to sexual victimization or abusiveness that occurred in an institutional setting is shared other staff strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.
During the pre-audit, the auditor was provided with samples of medical/mental health logs and secondary materials.

Through various interviews with staff and inmates, it was reiterated that inmates who disclose victimization and inmates who have previously perpetrated sexual abuse are offered a follow-up meeting with medical and mental health staff. Medical staff obtained informed consent prior to reporting about prior sex victimization that did not occur in an institutional setting.

**§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)

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgement.

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states the inmate victims of sexual abuse shall be 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.

Treatment services shall be 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.

Through various staff and inmate interviews, it was discovered inmate victims of sexual abuse receive timely and unimpeded access to emergency treatment and crisis intervention services. If the abuse occurred within 96 hours, the inmate would immediately be taken down to medical to receive stabilization treatment and would then be transferred to the hospital. Inmates receive treatment based on the medical and/or mental health staff’s professional opinion. Victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis.
§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)

DC-ADM 008 PREA Procedures Manual Section 4- Responding to Reports of Sexual Abuse states the facility shall 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.

When information becomes available relating to perpetration of inmate-on-inmate sexual abuse history, a mental health evaluation will be conducted on these abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections, as medically appropriate.

Facility is an all-male facility; therefore, PREA Standard 115.83 (d)-1 and 115.83 (e) - 1 are not applicable.

Through various staff and inmate interviews, it was determined medical treatment for sexual abuse victims would include a medical evaluation from one of the Registered Nurses working at the facility. If warranted, the inmate would be taken to the hospital for treatment. Mental Health staff would respond and provide treatment within the next business day.

§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)

DC-ADM 008 PREA Procedures Manual Section 6- Sexual Abuse Incident Review states each facility shall conduct a Sexual Abuse Incident Review at the conclusion of every
sexual abuse investigation where the allegation was substantiated or unsubstantiated. No review will be conducted if the allegation has been determined to be unfounded. The review shall occur within 15 working days of the receipt of the notification from Office of Special Investigations and Intelligence (OSII) that the investigation was deemed satisfactory. These reviews must take place for ALL sexual abuse investigations, substantiated or unsubstantiated, whether they are conducted by the facility Security Office or by OSII. The Prison Rape Elimination Act (PREA) Compliance Manager will chair the Sexual Abuse Incident Review Committee. The PREA Compliance Manager, in collaboration with the Facility Manager, will determine the exact composition of the team based on the nature of the incident. At a minimum, the Sexual Abuse Incident Review Team will consist of the following:

1) Deputy Superintendent for Centralized Services (DSCS);
2) Deputy Superintendent for Facilities Management (DSFM);
3) Licensed Psychology Manager (LPM)/designee;
4) Corrections Health Care Administrator (CHCA)/designee;
5) Security Office representative;
6) Unit Manager;
7) Corrections Counselor;
8) Major of Unit Management or Major of the Guard;
9) Deputy Superintendent for Internal Security (DSIS) (if applicable);
10) OSII Investigator (as applicable); and
11) Statewide PREA Coordinator/designee (when necessary).

The facility acknowledges staff ordinarily conduct a criminal or administrative sexual abuse incident review within 30 days of the conclusion of the sexual abuse investigation. During the past 12 months, there have been 2 criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents.

While onsite, the auditor reviewed a sample of both Criminal and Administrative Investigations of Sexual Abuse.

During the pre-audit, the auditor was provided with documentation of an incident review. The facility prepares a report of its findings from sexual incident reviews, and any recommendations for improvement, and submits such report to the facility head and
PREA Compliance Manager. Recommendations are made as part of the incident review. The facility implements the recommendations for improvement or documents its reasons for not doing so.

Through interviews with staff, it was confirmed the facility conducts incident reviews at the conclusion of sexual abuse investigation, excluding only “unfounded” incidents. The incident reviews include upper-level management officials, and allows for input from line supervisors, investigators, and medical or mental health practitioners. The review team looks to see if there are changes that need to be made to policy or procedure. The review team; considers any possible motivations for the abuse, considers whether physical barriers may have enabled the abuse, accesses the adequacy of staffing levels during different shifts in that area, accesses whether monitoring technology should be deployed or augmented to supplement supervision by staff. At the conclusion of the facility incident review, the PREA Compliance Manager would submit a report of their findings to the PREA Coordinator. If there were any deficiencies notated, there would also be documentation outlining the steps the facility plans to take to correct the problem.

§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)

DC-ADM 008 PREA Procedures Manual Section 1- Data Collection and Retention states The Bureau of Planning, Research and Statistics shall collect accurate, uniform data for every allegation of sexual abuse at facilities under the Department’s direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

The agency aggregates the incident-based sexual abuse data annually.

The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinements of its inmates.

The data from private facilities complies with the SSV reporting regarding content.
The agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.

§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)

DC-ADM 008 PREA Procedures Manual Section 1- Data Collection and Retention states The Bureau of Planning, Research and Statistics shall review data collected and aggregated annually pursuant to PREA Auditing Standard in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training by:

1) Identifying problem areas;

2) Taking corrective action on an ongoing basis; and

3) Preparing an annual report of its finding and corrective actions for each facility, as well as the Department as a whole.

The report shall include a comparison of the current year’s data and corrective actions taken to reduce the incident of sexual abuse, sexual harassment, and retaliation with those from prior years, and shall provide an assessment of the Department’s progress in addressing sexual abuse.

The Annual PREA Report shall be approved by the Secretary and posted on the Department website by June 30 of each year.

Specific identifying information collected for reporting purposes shall be redacted so that no individual is identifiable. In addition, the Department may redact specific material from the reports when publication would present a clear and specific danger to a facility, but must indicate the nature of the material redacted.

Through various staff interviews, it was determined that sexual abuse data is submitted to the agency monthly. If a problem or trend is noticed, a plan of action would be drafted to rectify the problem. Data is retained on secure servers that are backed up. Staff acknowledged their 2013 report did not include any corrective action; however, they are currently working on their 2014 report, and this report will include corrective action.
Annual reports are typically broad and are intended to capture statistical numbers. Inmate’s names and specific information related to the allegations are redacted.

### §§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)

DC-ADM 008 PREA Procedures Manual Section 1 - Data Collection and Retention states each facility and Office of Special Investigations and Intelligence (OSII) shall be responsible to securely maintain such files. The Department shall make all aggregated sexual abuse data from facilities under its direct control and contracted facilities, readily available to the public through the Department website, at least annually. The Department shall securely retain all aggregate PREA data, on the Department’s secure servers, collected for a period of no less than ten years after the date of the initial collection unless federal, state or local law requires otherwise.

Specific identifying information collected for reporting purposes shall be redacted so that no individual is identifiable. In addition, the Department may redact specific material from the reports when publication would present a clear and specific danger to a facility, but must indicate the nature of the material redacted.

Through various staff interviews, it was determined sexual abuse data is submitted to the agency monthly. If a problem or trend is noticed, a plan of action would be drafted to rectify the problem. Data is retained on secure servers that are backed up.

### 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.

*Jeff Kovar* ___________________________  July 8, 2015

Department of Justice Certified PREA Auditor  Date