

PREA Facility Audit Report: Final

Name of Facility: State Correctional Institution at Mercer

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/17/2016

| Auditor Certification | |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input checked="" type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input checked="" type="checkbox"/> |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input checked="" type="checkbox"/> |
| Auditor Full Name as Signed: David Wolinski | Date of Signature: 12/17/2016 |

| AUDITOR INFORMATION | |
|-------------------------------------|-----------------------------|
| Auditor name: | Wolinski, David |
| Address: | |
| Email: | dwolinski@dpscs.state.md.us |
| Telephone number: | |
| Start Date of On-Site Audit: | 10/25/2016 |
| End Date of On-Site Audit: | 10/27/2016 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | State Correctional Institution at Mercer |
| Facility physical address: | 601 Butler Pike, Mercer, Pennsylvania - 16137 |
| Facility mailing address: | |
| The facility is: | <input type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit |
| Facility Type: | <input checked="" type="radio"/> Prison <input type="radio"/> Jail |

| Primary Contact | | | |
|-----------------------|-----------------|--------------------------|--|
| Name: | Michelle Wagner | Title: | Corrections Classification and Program Manager |
| Email Address: | miwagner@pa.gov | Telephone Number: | 724-662-1837 x 1031 |

| Warden/Superintendent | | | |
|-----------------------|-------------------|--------------------------|----------------|
| Name: | Brian H. Thompson | Title: | Superintendent |
| Email Address: | ██████████ | Telephone Number: | 724-662-1837 |

| Facility PREA Compliance Manager | | | |
|----------------------------------|--------------------|--------------------------|--|
| Name: | Michelle R. Wagner | Title: | Corrections Classification and Program Manager |
| Email Address: | miwagner@pa.gov | Telephone Number: | 724-662-1837 |

| Facility Health Service Administrator | | | |
|---------------------------------------|-------------|--------------------------|--|
| Name: | Keith McCoy | Title: | Acting Corrections Health Care Administrator |
| Email Address: | ██████████ | Telephone Number: | 724-662-1837 |

| Facility Characteristics | | |
|--|---------------|---------------------|
| Designed facility capacity: | 1538 | |
| Current population of facility: | 1420 | |
| Age Range | Adults: 20-86 | Youthful Residents: |
| Facility security level/inmate custody levels: | minimum | |
| Number of staff currently employed at the facility who may have contact with inmates: | | |

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

| Agency Chief Executive Officer Information: | | | |
|---|-------------|--------------------------|------------|
| Name: | John Wetzel | Title: | Secretary |
| Email Address: | ██████████ | Telephone Number: | ██████████ |

Agency-Wide PREA Coordinator Information

| | | | |
|-----------------------|-------------------|--------------------------|------------------|
| Name: | David Radzewicz | Title: | PREA Coordinator |
| Email Address: | dradzewicz@pa.gov | Telephone Number: | 717-728-4135 |

AUDIT FINDINGS

Narrative:

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

This audit of State Correctional Institution Mercer, a facility within the Pennsylvania Department of Corrections and located at 801 Butler Pike, Mercer, Pennsylvania was conducted by David Wolinski (Lead Auditor) and Howard Ray. Both individuals are trained PREA Auditors and are currently employed by the Maryland Department of Public Safety and Correctional Services. This audit was conducted as a part of an interstate consortium consisting of Maryland, Pennsylvania, Michigan, and Iowa. Notices were posted in the facility announcing the audit on September 9, 2016 and the onsite portion of the audit began on October 25, 2016. The PREA Compliance Manager sent photos to verify that the announcements were posted as requested. No correspondence was received from the facility at the address on the posted announcements.

The audit was conducted using the Online Audit System (OAS) developed by the PREA Resource Center. On October 25, 2016 both auditors, Wolinski and Ray, entered SCI Mercer at approximately 1300 hours. After brief introductions and a review of the agenda a tour of the facility began. SCI Mercer is a minimum security institution. The auditors, accompanied by key staff members, toured the facility separately. Each auditor toured approximately half of the facility taking notes on pre-printed forms to assist with the continuity of the inspection process. The auditors were allowed to inspect all grounds, buildings and rooms within the facility. This included buildings outside of the fence where inmates performed work assignments and all rooms within the fenced area. The staff opened any locked doors that the auditors requested and established no areas restricted to the audit team. During the walking tour of the facility both auditors freely spoke to any staff member or inmate that was encountered. The impression of both auditors was that the facility was an orderly, well run institution.

During the tour both auditors considered such things as supervision levels, blind spots, compliance with policy, and the overall safety of the facility. As the tour progressed the auditors noted that inmates in common areas, such as classrooms, gymnasium, barbershop or chapel were always supervised. Cameras were strategically placed throughout the facility. Some potential blind spots were covered with mirrors. There were no cameras placed to unnecessarily impinge upon inmate privacy. The staff was very diligent about making announcements when opposite gender staff entered a housing unit. There were even reminder signs placed in the housing units requiring such announcements. There were regularly placed signs providing PREA information and reminders throughout the institution. Many of the housing units consisted of two person cells with a solid steel door with an observation window. The window did provide a view of the toilet and one inmate complained that this allowed casual viewing. Further questioning revealed that it was standard practice to allow the inmates to temporarily cover the window with paper to obscure normal eye level, but the window could not be completely covered. The covering was to be removed when not needed for privacy. Officers in charge of tiers were required to use an electronic monitoring device to log their rounds through the housing units.

During the tour it came to the auditor's attention that in the "Round" housing units the shower configuration might present a problem for the privacy of some inmates. While each shower in the shower room was private, there was a central area that some inmates used to change clothes or dry themselves.

Female staff members are required to check the shower area while on their rounds and the auditors felt that this set up a cross-gender viewing situation. The staff immediately agreed to require an announcement to be made before entry into the common area of the shower room. The facility changed their post orders and provided documentation that the staff had been notified of the procedural change. The documentation for this change has been included with standard 115.15.

The tour included Central Control. All of the cameras in the facility could be monitored from this single location and were monitored by a designated staff member. The cameras monitored key areas on the inside and outside of the buildings in the facility. It was felt that the camera usage in the facility was excellent and contributed to inmate safety. The facility conducted a thorough camera review in 2015 which identified 280 cameras. The plan is reviewed annually and updated.

Summarizing the tour, SCI Mercer was found to be an orderly, well run facility. The facility was in full operation during the tour with inmates engaged in a variety of work and programming opportunities. When questioned about PREA the staff provided appropriate responses and appeared to understand their responsibilities. The inmates readily acknowledged that they understood what PREA means and that they have received considerable information on the topic. The tour of the facility ended at approximately 1630 hrs. At the conclusion of the tour the auditors meet with the PREA Compliance Manager, the Agency PREA Coordinator and other facility staff members in preparation for the next day's activities. The auditors reviewed staff and inmate rosters, selecting individuals randomly for interview the next day. The PREA Coordinator was interviewed privately by both auditors before the end of the day. The auditors left the facility at about 1730 hrs.

On October 26, 2016 at 0800 hours the auditors returned to SCI Mercer to begin interviewing staff and inmates. During the second and third days of the audit the auditors privately interviewed a total of ninety individuals, fifty- seven (57) staff members and thirty- three (33) inmates. These thirty-three interviews represent direct contact with 2% of the inmate population. At the time of the onsite audit the facility housed 1420 inmates. Most of the interviews were selected at random from a comprehensive list of all inmates housed at the facility covering all housing units and shifts (for staff). Interviews were conducted in private rooms provided by the facility. Specialized interviews were conducted on an availability basis. The two auditors worked separately using the standard questions provided by the PREA Resource Center. Staff interviews included the facility superintendent, the PREA compliance manager, supervisory and management staff, two medical and mental health staff, a human resources representative, two volunteers, an investigative staff member, a medical staff member who performs screening, a staff member from the restricted housing unit, a member of the incident review team, first responders, and intake staff. Inmate interviews included a limited English proficient inmate, a gay inmate, an inmate who reported sexual abuse and an inmate who disclosed sexual victimization. There were no youthful inmates in the facility which precluded any staff or inmate interviews pertaining to such inmates. Additionally, the staff reported that no transgender inmates were housed in the facility. The facility sends any sexual assault victims to a local hospital for the forensic exam, so there were no SAFE or SANE medical staff members to interview.

The two auditors conducted the interviews separately using the recommended question sets and issuing the introduction provided. No inmates or staff members refused to be interviewed and most were found to be cooperative. The activity on the second day onsite primarily consisted of an intensive interview schedule. Interviews continued throughout the day with evening shift personnel reporting for interviews as the day progressed. The auditors took some time to review onsite documentation and request supporting documentation as needed. Activity ended on the second day at about 1800 hours.

The auditors arrived on October 27, 2016, the third day of the onsite audit, at 0500 hrs. Interviews were conducted from the night shift staff that was leaving that morning. Interviews were finished on the morning of the 27th and a review of documentation continued. Most of the documentation required for review had been uploaded to the OAS, this included the directives and procedures included in the agency's PREA Procedures Manual, forms educational materials, training curriculum, organizational charts, brochures and other related documents. The staff provided copies of any documents requested. Most of those documents were included with this report in the appropriate sections. The document review continued throughout the morning into the early afternoon. After a brief closeout with key staff the auditors left SCI Mercer at approximately 1300 hrs.

Interviews with random staff members, a group comprised of primarily correctional officers, proved to provide a consistent picture of the facility. As a group the random staff members stated that they had been trained in all aspects of PREA and understood their responsibilities. When quizzed on aspects of their training, the staff correctly responded to basic questions. All of the officers had small cards that outlined their PREA responsibilities and several of the officers referred to them during the interview. Only one area of concern arose during the interview of random staff. The front line correctional officers (CO1) were nearly all unfamiliar with the provisions relating to the use of inmate translators. However, ranking officers (sergeants and above) were quite familiar with standard 115.16 as it pertains to the use of inmate translators. Further investigation revealed that the front line correctional officers would not make such a decision and that they protect the inmate, preserve evidence, and call for a supervisor. The supervisor would be the person who would initiate an investigation and make a decision regarding the use of inmate interpreters. A review of the documentation indicates that the training outlines do not contain references to the use of interpreters. However, the training requires the staff to protect the inmate, protect the staff, and notify a supervisor. There were, of course, policy references regarding the use of inmate interpreters. Since standard 115.31 regarding training does not require the use of interpreters be included in the curriculum there was no negative finding. There were absolutely no other negative patterns that became evident during random staff interviews.

Interviews with the Executive Deputy Secretary of Corrections (agency head designee), the PREA Coordinator, the facility Superintendent (warden) and the PREA Compliance Manager all supported a commitment to the Prison Rape Elimination Act and an understanding of the standards. None of the interviews revealed anything of negative consequence. The agency's PREA Coordinator indicated that the agency was developing a strong central control over PREA activities with designated staff. All of the interviews supported the policies that had been put in place and there was no disconnect between management direction and staff implementation.

Specialized staff interviews were conducted by both auditors using the Interview Guide for Specialized Staff developed by the PREA Resource Center. There were no youthful inmates in custody at this facility, so no related interviews were necessary. The specialized interviews supported the auditor's observations and the related documentation. There were no interviews that caused concern to the auditing team. Each of the individuals interviewed appeared comfortable with their specialized responsibilities.

The auditors interviewed a total of thirty-three inmates representing housing units throughout the facility. Included in this total were a limited English proficient inmate, two gay inmates, an inmate who reported sexual abuse and an inmate who disclosed sexual victimization. There were no youthful inmates to interview. The facility could not identify any transgender or intersex inmates. There were no inmates in segregated housing to protect them from sexual victimization. the inmates were interviewed using the

Interview Guide for Inmates developed by the PREA Resource Center. No inmates refused to interview with the auditors. The inmates confirmed that they had been instructed regarding PREA. When asked if female officers announced their presence in a housing unit, most confirmed that they did, though two inmates said that occasionally the announcement was not made. When quizzed about certain aspects of the PREA training, all could come up with at least one method that they could report a problem. Inmates did confirm screening. When asked if they felt safe in the facility, most inmates stated they did. They also stated that they believed that the facility was committed to making sure the inmates were safe from sexual abuse.

Follow-up work consisted of reading the documentation provided and comparing that information to the tour observations and interview content. A few questions or clarifications were required and the PREA Compliance Manager for the facility was readily available to answer questions. Since there were two auditors participating in the audit, the team members discussed their individual findings and compared their impressions of the facility. The auditors examined the agency web site, read past reports, and researched the agency and facility to make sure no discrepancies could be found. Generally, the facility was found to be very organized in its presentation of its PREA efforts. It should be noted that the agency designed a PREA Procedures Manual that contained language that was nearly identical to the standards. This made policy review extremely easy when evaluating content.

Facility Characteristics:

The auditor's description of the audited facility should include details about the type of the facility, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation.

The State Correctional Institution at Mercer initially was established as a State Regional Correctional Facility (SRCF) on June 23, 1978. Located in Findley Township, Mercer County, SRCF Mercer opened on July 5, 1978, receiving short-term male county offenders from 14 Northwestern Pennsylvania counties. SRCF Mercer was designed as an open, campus like setting positioned on 304 acres of land and was classified as a Level 2 (L 2) facility. In 2008, SRCF Mercer changed from a regional facility to a State Correctional Institution. The current all male population at the facility is 1420 with a maximum capacity of 1538. The facility has 440 staff positions to include custodial staff, medical and psychological treatment providers, maintenance staff, counselors (case managers), teachers and instructors, as well as numerous support staff.

This minimum security facility has thirty-seven building and thirteen housing units. Housing units consist of both cells and dormitory style housing. There are fifty- six beds in its restricted housing unit. The restricted housing cells are under constant observation by staff. Cell doors are of an open bar construction. Female staff are not assigned to this unit. Both styles of housing units are under constant supervision of a staff member. The "round" units consist of two floors of double cells arranged around a central, common core. Inmates are permitted to have keys to their cells. Doors to these cells are solid with an observation window. Shower stalls are designed for individual use with a curtain for privacy. The facility offers a number of educational opportunities to include: academic education through GED level, building trades, business education, auto mechanics, custodial maintenance and a barber manager program. All vocational programs at SCI Mercer offer official trade-based certifications, i.e., NCCER certifications for the Building Trades and Custodial Maintenance; ICDL computer certification for the Business Education Program; and the Automotive Repair Program offers the PA Auto Inspection certificate. The facility has a chapel, a fully equipped gymnasium, a large open recreation yard, a medical facility and on- site food service. The facility's 280 security cameras are monitored from a single control center. SCI Mercer is unique in that it operates solely on electrical power. The facility is equipped with nine diesel powered emergency generators to maintain essential services in the event of a power failure. In addition, the facility operates its own wastewater treatment plant. Areas that are not immediately being used were found to be secured and off limits to inmates.

The Community Work Program involves taking selected inmates with outside clearance who are near completion of their sentence into the community to perform voluntary, unskilled labor for governmental and non- profit public service agencies. The goals of this program are to enhance community relations and for the inmates to accomplish useful work, to make a contribution to society, and to develop a strong work ethic and a feeling of self-worth. The audit team toured several buildings on the outside of the fenced, secured area where certain inmates are permitted access.

Summary of Audit Findings:

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

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| Number of standards exceeded: | 6 |
| Number of standards met: | 39 |
| Number of standards not met: | 0 |

Standards Exceeded: 6

115.17, 115.31, 115.32, 115.53, 115.65, 115.68

Standards Met: 39

115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.18, 115.21, 115.22, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.54, 15.61, 115.62, 115.63, 115.64, 115.66, 115.67, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403

Standards Not Met: 0

No corrective action plan is recommended for this facility. The facility, its management and staff appear committed to creating an environment free from sexual misconduct and sexual violence.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

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| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.11 (a) The agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency 's approach to preventing, detecting, and responding to such conduct.</p> <p>The Agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. The written policy outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The Agency has developed a PREA Procedures manual that clearly articulates all of the elements required in a Zero Tolerance policy. The policy covers all forms of sexual abuse and sexual harassment in facilities it operates and contracts with .The policy outlines how it implements the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment . The policy is inclusive of definitions of prohibited behaviors regarding sexual abuse and harassment. Policies include sanctions for prohibited behavior and strategies and responses to prevent and reduce sexual abuse and sexual harassment. The review of the agency manual and local procedures affirmed the zero tolerance policy is in place. Random interviews with correctional staff and the local PREA Compliance Manager reflected a substantial understanding of the zero tolerance policy. Inmate interviews reflected that all the inmates interviewed were aware of the zero tolerance policy. Signage throughout the facility reinforced the policy.</p> <p>*115.11 (b) The agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.</p> <p>The agency has employed an agency-wide PREA Coordinator. The PREA Coordinator position is in the upper-level of the agency hierarchy and the PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. Mr. David Radziewicz is the full time PREA Coordinator who has a staff of five who work full time to coordinate the PREA efforts throughout the agency. Mr. Radziewicz states that he has ample time to perform his PREA duties to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. Mr. Radziewicz works organizationally under Deputy Secretary Carol Mattis.</p> <p>*115.11 (c) Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p>This agency operates more than one facility, and each has each facility designated a PREA compliance manager according to the Agency PREA coordinator, supported by written policy located in the Agency's PREA Procedures Manual. Ms. Michele Wagner is the PREA Compliance Manager at SCI Mercer. Ms. Wagner is the Classification Programs Manager and serves as the PREA Compliance Manager. She has the authority to coordinate the facilities efforts to comply with the PREA standards. She indicated that she had sufficient time to</p> |

perform her duties. She was very knowledgeable of PREA standards, understands the intent of the standards and works to improve the facilities program to develop a safe facility environment. Ms. Wagner coordinates training, provides information to staff and inmates, contacts the PREA Coordinator for clarification on issues and coordinates with the facility leadership. During the tour of the facility the staff and inmates were aware that Ms. Wagner is the facility PREA Manager.

A determination of MEETS STANDARDS was assigned for the following reasons:

- > The agency has a written policy that clearly meets the standard. (Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training)
- > The auditors have interviewed and met the PREA Coordinator and the PREA Compliance Manager.
- > The Coordinator and Manager both confirm that they have the time and authority to perform their jobs.
- > An organizational chart was provided confirming the Coordinators position in the organization.

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| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.12 (a) A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.</p> <p>This agency is public and it contracts for the confinement of its inmates with private agencies and has included the entity's obligation to comply with the PREA standards in any new contracts or contract renewals signed on or after August 20, 2012. The Pennsylvania Department of Corrections has renewed thirteen contracted facility contracts. The Mercer facility includes renewals for Montgomery County, Chester County and Cambria County. Those renewed contracts do include contractor's obligation to adapt and comply with PREA standards. A copy of the contracts for these three locations was supplied. The Agency's website contains audit reports for all of the contracted facilities indicating PREA compliance at all thirteen contracted facilities.</p> <p>*115.12 (b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.</p> <p>New contracts or contract renewals signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. The Policy requires that new contracts and contract renewals shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. Contracts did include statements referencing contract monitoring. The contracts were provided via the PREA Audit Compliance documentation. Additionally, the compliance monitoring is supported by past audit reports available on the Agency's website.</p> <p>A determination of MEETS STANDARD was provided for the following reasons:</p> <ul style="list-style-type: none"> > The agency has a policy governing the operation of contracted facilities. (DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual, Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training > Copies of contracts with private entities were provided. > The contracts with the facilities preserve the rights of the agency to monitor PREA compliance. > The contracted facilities are included in the agency's PREA audit plan. > The contracted facilities have all been successfully audited. |

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| 115.13 | Supervision and monitoring |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.13 (a) The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan 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) Institution 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.</p> <p>According to Agency policy the Agency ensures that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The Agency ensures that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The Agency ensures that each facility’s staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration all components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring. The Agency ensures that each facility’s staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and</p> |

determining the need for video monitoring. The Agency ensures that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring. All of these provisions appear in the Agency's PREA Procedures Manual.

The Pennsylvania Department of Corrections has a policy and practice that ensures that all of its facilities develop and document a staffing plan that is supplemented by video monitoring to protect inmates against sexual abuse. SCI Mercer has developed a staffing plan and makes it's best efforts to comply with the plan. The current average daily population for the facility is 1431 inmates. The current staffing is based off of an average daily population of 1538 inmates. The review revealed no deviations from the staffing plans with positions being covered by part time positions or overtime. The facility has 209 cameras with recording capabilities. During the tour the auditor observed the full complement of cameras from the control room which covered the perimeter area behind housing units within housing units, kitchen, program areas and shops. The camera deployment was supplemented by some fixed posts which require staff to patrol areas on a regular basis to cover areas with no cameras. There are several housing units which have low security inmates housed in them which have a camera only in the recreation area. Do to the housing configuration and the low security level of the inmates the unit require more frequent rounds by the staff to augment the limited number of cameras. There are unannounced rounds documented in the logs and performed randomly on shifts. There is a documented policy that prohibits staff from alerting other staff that supervisory rounds are taking place. Random interviews with staff and inmates and observation confirmed unannounced rounds were being performed.

*115.13 (b) In circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the plan.

The annual review of the staffing plan revealed no deviations with open positions being covered by part time positions or overtime. In circumstances where the staffing plan is not complied with, the facility is required by regulation to document and justify all deviations from the plan.

*115.13 (c) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

In the past 12 months, the facility has, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section. In the past 12 months, the facility has, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies. In the past 12 months, the facility has, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan. The staffing plan is reviewed annually by the facility.

Every three years an agency team conducts an onsite review of the staffing plan. The last three year agency review took place in April 2015 subsequently the facility is not due an agency review until 2017- 2018. On August 16, 2016 as evidenced by memorandum and signed by the Compliance Manager Michele Wagner, Brian H. Thompson, Superintendent, and David Radziewicz an annual review was completed. Copies of the staffing plan review were provided to the audit team and these reviews were signed by the PREA Coordinator.

*115.13 (d) Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

The facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. This policy and practice has been implemented for all shifts. The facility/agency has a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. There are unannounced rounds documented in the logs and performed randomly on shifts. There is a documented policy that prohibits staff from alerting other staff that supervisory rounds are taking place. Random interviews with staff and inmates and observation confirmed unannounced rounds were being performed.

A determination of MEETS STANDARD provided for the following reasons:

- > The written policy supported the standard in its entirety. (Prison Rape Elimination Act (PREA) Procedures Manual Section 2.A.4)
- > The facility provided a staffing plan for review.
- > A documented review was provided as evidence.
- > Unannounced rounds are required by policy. (DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2.A.2.
- > Rounds by upper level staff are documented in a log.
- > Staff confirmed that unannounced rounds are made.
- > Management staff also conducts facility wide tours that are documented.

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| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.14 (a) A youthful inmate 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 use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p>*115.14 (b) In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.</p> <p>*115.14 (c) Agencies shall make its best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.</p> <p>SCI Mercer does not confine youthful offenders. The Pennsylvania Department of Corrections makes its best efforts for youthful inmates to not be placed in a housing unit in which the youthful inmate will have sight, sound or physical contact with any adult inmate through shared dayroom or other common space, shower area, or sleeping quarters and avoids placing youthful inmates in isolation to comply with PREA standard 115.14 through designating specific facilities to confine youthful offenders.</p> <p>The determination of MEETS STANDARDS is provided for the following reasons:</p> <ul style="list-style-type: none"> > This facility does not house youthful offenders, as verified by memo and inmate roster. > The agency has policy which meets PREA standards. (Prison Rape Elimination Act (PREA) Procedures Manual <p>Section 2.A.8 – Sexual Abuse/Sexual Harassment Prevention and Training)</p> |

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| 115.15 | Limits to cross-gender viewing and searches |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1449 450">*115.15 (a) The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.</p> <p data-bbox="252 499 1477 913">The facility always refrains from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners. The Prison Rape Elimination Act Procedures manual thoroughly outlines the facilities search procedures for cross gender searches. In addition it outlines the process for searching transgender and intersex inmates. The facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or performed by medical staff nor does the staff search or physically examine a transgender or intersex inmate for the purpose of determining genital status. The facility has not performed cross gender strip searches or cross gender visual body cavity searches during the audit cycle. This determination was made based on :</p> <ul data-bbox="252 925 1481 1128" style="list-style-type: none"> < Reviewing the PREA Procedures Manual (DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual, Section 2.A.9 – Sexual Abuse/Sexual Harassment Prevention and Training) < Interviews with correctional staff and administrators < Interviews with inmates and observation <p data-bbox="252 1182 1477 1391">*115.15 (b) As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.</p> <p data-bbox="252 1442 791 1476">This section does not apply to this facility.</p> <p data-bbox="252 1527 1485 1650">*115.15 (c) The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates.</p> <p data-bbox="252 1700 1442 1861">Policy and Procedure dictate that inmates are able to shower , perform bodily functions and change clothes without non-medical staff observing their genitalia or buttocks. This was confirmed by: Staff and Inmate interviews; Review of Policy and Procedures; Touring the housing units and observation.</p> <p data-bbox="252 1912 1473 2121">The PREA Procedures Manual requires staff of the opposite sex to announce their presence when entering an inmate housing unit. Upon entering housing units and visible on the unit there is signage instructing opposite sex officers to announce their presence .This was confirmed by: Staff and inmate interviews; Housing unit tours and observation; Observation of signs; Review of policy and procedure.</p> |

SCI Mercer is an all-male facility and is not subject to 115.15 (b) and (c) .

The Security Procedures Manual 6.3.1 require staff to be trained to conduct cross gender pat down searches and transgender inter sex searches in a professional and respectful manner. This was confirmed by: interviews with staff and inmates; review of training; records and lesson plans; review of policy and procedure.

A determination of MEETS STANDARD was provided for the following reasons:

- > Appropriate policy is in place. (Prison Rape Elimination Act (PREA) Procedures Manual Section 2.A.9 – Sexual Abuse/Sexual Harassment Prevention and Training)
- > Training was confirmed by staff during the interview process.
- > Training documentation was provided.
- > Signs were posted as a compliance reminder.
- > The Agency's search policy was further supported by the facility procedures manual (Facility Security Procedures Manual Section 30 – Searches).

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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.16 (a) The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.</p> <p>The agency takes appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing. The agency takes appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision. The agency takes appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities. The agency takes appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities. The agency takes appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities. The agency takes appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing. Steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. The agency ensures that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who have intellectual disabilities. The agency ensures that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who have limited reading skills. The agency ensures that written materials are</p> |

provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who are blind or have low vision.

The Pennsylvania Department of Corrections has a broad range of policies which outlines the agencies approach to providing services to inmates with disabilities .The agency takes the steps to ensure inmates with disabilities and inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent ,detect,and respond to sexual abuse and sexual harassment . These services were confirmed by :

<Review of DC-ADM 006 Reasonable Accommodations for Inmates with Disabilities Manual Section 1- General Procedures ,Section 2- Accommodations ,Section 3 Disabilities .DC-ADM 118 Automated Inmate Telephone System .

< Observation of PREA handouts, Inmate hand book available in English and Spanish .

< A staff roster of individuals identified who sign and speak a foreign language .

< Contract for Services for Language Interpretation. (Propio. Language Services LLC.)

< Staff and Inmate Interviews verified that inmates are not used as interpreters .

*115.16 (b) The agency shall take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

The agency takes reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient. These steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. This is evidenced by Agency policy requiring such services and a contract with a language service available to the facility for assistance with such matters.

*115.16 (c) The agency 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 could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations.

The Agency refrains from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations. This is evidenced by Agency policy found in the PREA Procedures Manual. It should be noted that the auditors were concerned that the non-supervisory staff were not generally familiar with this provision. However, they also stated that this would be a decision outside their authority and that a supervisor would make such a determination. When supervisors were asked about the use of inmate interpreters they where aware of this standard and responded appropriately.

A determination of MEETS STANDARDS was provided for the following reasons:

> The agency has acceptable policy regarding the standard. (DC-ADM 008, Prison Rape

Elimination Act (PREA) Procedures Manual

Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training, part A-5)

- > The facility has multiple methods to communicate with inmates (i.e. translation lines, translated documents, braille, etc.)
- > Reviewed copy of contract with PROPIO, LCC, a language service provider.
- > Interviews of staff and inmates supported compliance with the standard.

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| 115.17 | Hiring and promotion decisions |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>*115.17 (a) The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who—</p> <p>(1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.</p> <p>The agency prohibits the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. The agency prohibits the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse. The agency prohibits the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above. The agency prohibits the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. The agency prohibits the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse. The agency prohibits the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described above.</p> <p>The agency has clear hiring policy with specific adaptations to make the policy compliant to PREA standards. The facility supplied a blank employment application which asks specific information required by PREA. The form includes warnings against fictitious or misleading data. The hiring policy included a procedure for conducting background investigations. The procedure specifically addressed PREA concerns relating to all forms of sexual misconduct. The individual interviewed regarding human resources procedures advised that criminal history is handled at a Central Clearing Unit (CCU) and clearances are provided by email. A copy of one of those messages was provided. Furthermore the HR representative stated that employees had a continuing affirmative duty to disclose misconduct and that employee sexual misconduct information would be released to other agencies that may be considering hiring a past or current staff member. The HR staff member also confirmed that sexual conduct would be considering in promotional decisions.</p> <p>*115.17 (b) The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.</p> |

The agency considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. This is supported by the PREA Procedures Manual and the Human Resources and Labor Relations Procedures Manual.

*115.17 (c) Before hiring new employees who may have contact with inmates, the agency shall: (1) Perform a criminal background records check; and (2) Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

Before hiring new employees who may have contact with inmates, the agency performs a criminal background records check. Before hiring new employees who may have contact with inmates, the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. This is supported by the PREA Procedures Manual and the Human Resources and Labor Relations Procedures Manual.

*115.17 (d) The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.

The agency performs a criminal background records check before enlisting the services of any contractor who may have contact with inmates. This procedure is described in detail in the Centralized Clearances Procedures Manual, section 4.A.

*115.17 (e) The agency shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.

The agency either conducts criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees. The agency uses a system that constantly monitors arrest data to determine if employees of the agency are arrested, thereby providing a constant criminal history, rather than a five year check. The system is called JNet and the facility supplied copies of notifications generated.

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

The agency asks all applicants and employees who may have contact with inmates directly about previous misconduct in written applications or interviews for hiring or promotions. The agency asks all applicants and employees who may have contact with inmates directly about previous misconduct in any interviews or written self-evaluations conducted as part of reviews

of current employees. The agency imposes upon employees a continuing affirmative duty to disclose any such misconduct.

*115.17 (g) Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

The agency considers material omissions regarding such misconduct, or the provision of materially false information, grounds for termination. The Pennsylvania Department of Corrections, Application for Employment contains language that specifically supports the standard and must be signed by the applicant.

*115.17 (h) Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

The agency provides information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The interview with the human resources representative confirmed that such information would be released.

The determination of EXCEEDS STANDARD was assigned for the following reasons:

- > The agency has a comprehensive hiring policy which contains specific PREA considerations. (Human Resources and Labor Relations Procedures Manual)
- > Employment applications clearly address PREA concerns putting prospective employees on notice.
- > Criminal history checks are completed at a central unit providing a consistent vetting process.
- > The HR staff member interviewed was well-versed on the PREA standards and clearly understood her role in the process.
- > The agency used a system called JNet to constantly monitor the arrest records of staff members thereby exceeding the five-year requirement.
- > A copy of the Agency's employment application contains supporting language, as previously described.
- > Centralized Clearances Procedures Manual

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| 115.18 | Upgrades to facilities and technologies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.18 (a) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse.</p> <p>If the agency designs or acquires any new facility or planned any substantial expansion or modification of existing facilities, the agency considers the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse. Policy dictates that the Agency considers the effect of the design, acquisition, expansion or modification and use of, installing, and modifications of monitoring technology upon the agency’s ability to protect offenders. There have not been any new facilities designed or built since the last audit or upgrades . SCI Mercer meets monthly to discuss security concerns to include current placement of cameras .</p> <p>*115.18 (b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse.</p> <p>If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, the agency considers how such technology may enhance the agency’s ability to protect inmates from sexual abuse. The most recent camera plan was updated in April of 2015 . The plan was a thorough review and analysis of the location, number and types of cameras. The agency has not installed or updated the video monitoring system since the last audit .</p> <p>A determination of MEETS STANDARD was provided for the following reasons:</p> <ul style="list-style-type: none"> > The agency has policy that satisfies the standard. (Prison Rape Elimination Act (PREA) Procedures Manual Section 2, part A-7) > This facility has had no significant physical changes since the last audit, so the policy could not be violated. > Interviews with Compliance Manager, Superintendent, and Agency Head supported the standard. > There was no evidence of new construction observed during the tour of the facility. |

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| 115.21 | Evidence protocol and forensic medical examinations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.21 (a) To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.</p> <p>The agency is responsible for investigating allegations of sexual abuse, and follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Prison Rape Elimination Act Procedures Manual clearly outlines the facilities responsibilities regarding criminal and administrative sexual abuse investigations (including inmate on inmate sexual abuse or staff sexual misconduct) .The Pennsylvania State Police perform all criminal investigations .The Department of Corrections requested that the State Police follow all PREA investigation and training requirements .The office of Special Investigations and Intelligence conducts investigations of allegations of misconduct by correctional staff that is not considered criminal. The facility is responsible for all administrative investigations . Inmates who experience sexual abuse are offered access to forensic medical examines at no cost by SANE/SAFE nurse examiners. There were no forensic medical exams conducted in the past 12 months. All forensic sexual exams are performed at the University of Pennsylvania Medical Center Horizons. Victims Advocate services as well as emotional support services are provided by AWARE Inc .</p> <p>115.21 (b) The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011.</p> <p>The protocol is adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents.”</p> <p>*115.21 (c) The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.</p> <p>The agency offers all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate. Such examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). If SAFEs or SANEs cannot be made available, the examination is performed by other qualified medical practitioners. The agency</p> |

documents its efforts to provide SAFEs or SANEs. The Prison Rape Elimination Act (PREA) Procedures Manual, Section 4 confirms the agency's commitment to this standard. The facility also provided a Letter of Agreement between the facility and UPMC, a local medical center, to provide certified forensic examiners as required by the standard.

*115.21 (d) The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

The agency attempts to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. The agency's Prison Rape Elimination Act (PREA) Procedures Manual, Section 4.E.4 requires that the facility provide support services as required by the standard. The facility also provided a letter of agreement between AWARE, Inc., the local rape crisis facility for Mercer County. The Letter of Agreement commits AWARE, Inc. to provide the services required by the standard. There were no incidents during the audit period that required AWARE to provide such services.

*115.21 (e) As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

If requested by the victim, the victim advocate accompanies and support the victim through the forensic medical examination process and investigatory interviews. The advocate will also provide emotional support, crisis intervention, information, and referrals. This is supported by a written agreement with AWARE, Inc., the local rape crisis center. The agreement states that the center will provide the required services, if needed. The interview with the PREA Compliance Manager and a review of the PREA Procedures Manual further confirms the facility's compliance. There were no incidents since the last audit that required services to be provided.

*115.21 (f) To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

The agency itself is not responsible for investigating allegations of sexual abuse, and has requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section. The facility provided a letter sent to the Pennsylvania State Police requesting

assistance with this standard. A return letter from the Pennsylvania State Police stated that the agency would comply with the standard.

*115.21 (g) The requirements of paragraphs (a) through (f) of this section shall also apply to:
 (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.

Auditor is not required to audit this provision.

*115.21 (h) For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

The facility uses the service of Aware, Inc., a rape crisis center with a forty year history of providing services in Mercer County.

A determination of MEETS STANDARD was provided for the following reasons:

- > Review of Policy and Procedure/ Prison Rape Elimination Act Manual DC-ADM- 008 Section 4 and Section 5 ,attachment 4 E Instructions for PREA evidence collection .
- > MOU Pennsylvania State Police and Department of Corrections
- > Letter Pennsylvania State Police confirming compliance to the standard
- > Letter Pennsylvania Department of Corrections requesting the Pennsylvania State Police help with compliance to this standard.
- > UPMC Sane/Safe agreement providing the required trained forensic staff as required
- > AWARE Inc. Letter of Agreement to provide support services as required.
- > Staff interviews with medical Administrator, Facility Investigator and Compliance Manager.

| 115.22 | Policies to ensure referrals of allegations for investigations |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.22 (a) The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p>The agency ensures an administrative or criminal investigation is completed for all allegations of sexual abuse. The agency also ensures an administrative or criminal investigation is completed for all allegations of sexual harassment. According to the Prison Rape Elimination Act (PREA) Procedures Manual, Section 5 - "Every report, complaint, or allegation of sexual abuse and sexual harassment, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively. " According to the agency head, this is the agency policy and there were no indications from any staff or inmate interviews that this policy was not being followed. The facility also provided a copy of a printout that tracks investigations making sure reported events are investigated.</p> |

The Pennsylvania Department of Corrections and SCI Mercer through the PREA Procedures Manual and practice ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment and that all allegations of sexual abuse and sexual harassment are referred to the agency with legal authority to perform the investigation. The Department of Corrections Policy and MOU with the Pennsylvania State Police describe the responsibilities of both agency's. There were thirteen allegations of sexual abuse/sexual harassment during the period. Seven allegations of sexual abuse were investigated by the State Police and five allegations of sexual harassment were investigated by the facility investigator. There were no referrals for criminal investigation.

*115.22 (b) The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency publishes such policy on its website or, if it does not have one, makes the policy available through other means. The agency documents all such referrals.

The agency has a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The Pennsylvania State Police conducts these investigations. The agency publishes its investigative policy on its website. The policy can be found on the web at www.cor.pa.gov/General%20Information/PrisonRapeEliminationAct
The agency also documents all investigative referrals. The agency has a system to track reported events. The system was demonstrated for the auditors.

*115.22 (c) If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.

The Pennsylvania State Police is responsible for conducting criminal investigations, and the website describes the responsibilities of both the agency and PSP.

*115.22 (d) Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.

Auditor is not required to audit this provision.

*115.22 (e) Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.

Auditor is not required to audit this provision.

The Pennsylvania Department of Corrections and SCI Mercer through the PREA Procedures Manual and practice ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment and that all allegations of sexual abuse and sexual harassment are referred to the agency with legal authority to perform the

investigation. The Department of Corrections Policy and MOU with the Pennsylvania State Police describe the responsibilities of both agency's. There were thirteen allegations of sexual abuse/sexual harassment during the period. Seven allegations of sexual abuse were investigated by the State Police and five allegations of sexual harassment were investigated by the facility investigator. There were no referrals for criminal investigation.

A determination of MEETS STANDARD has been provided for the following reasons:

- > Review of PREA Procedures Manual, Section 5 relating to reporting and investigating sexual misconduct.
- > Pennsylvania State Police MOU
- > Department of Corrections web site
- > Interviews of staff and inmates

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| 115.31 | Employee training |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>*115.31 (a) The agency shall train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights 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 lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>The agency trains all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment. The agency trains all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. The agency trains all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment. The agency trains all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment. The agency trains all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement. The agency trains all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims. The agency trains all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse. The agency trains all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates. The agency trains all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. And finally, the agency trains all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>The agency has developed a PREA Procedures Manual that clearly articulates in Section 2.E, each facility's training responsibilities. The manual contains information regarding the information to be included in the training, the individuals to be trained, and the frequency of such training. There were no deficiencies noted in manual as they relate to PREA standards training requirements. The facility employs a combination of strategies to fulfill its training responsibilities. These strategies include both classroom and computer-based training. The agency has a well-developed training curriculum that it documented in the form of detailed lesson plans. The plans included a variety of training strategies and were found to contain references to all of the PREA standards training elements. Additionally, the facility provided training logs that tracked the training records of its employees. The agency also employs a</p> |

written training record that confirms the employees understanding of the policy. Samples of this verification form were provided. The facility was able to identify a small number of staff members that had not completed the required training updates, but was able to provide reasonable explanations for those deficient staff members (i.e. extended sick leave, etc.).

During the tour of the facility the auditors engaged several staff members in brief conversations relating to their obligations relating to PREA. None of those individuals hesitated to answering questions, providing appropriate responses in every case. During the interview phase of the audit staff members were asked questions related to their training experiences. Every staff member interviewed confirmed that they had received the required training. When quizzed at random regarding the elements of certain portions of that training most staff members responded from memory. In some cases the staff members produced a small card that contained key PREA information. A newly assigned correctional officer revealed that he received forty hours of PREA training during his entry level training program. It should be noted that many of the staff members at the rank of Correctional Officer were not well-informed about the use of inmate interpreters, but those at the higher ranks (sergeant and above) had a clear grasp of the requirements. Deeper inquiry revealed that Correctional Officers would generally not be engaging the inmate victim except to provide for the protection of the inmate victims and securing evidence. Higher ranking and supervisory staff would be responsible for any decisions relating to inmate interpreters with all of those individuals understanding the restrictions. Given that the Correctional Officers all indicated that one of their first actions would be to call a higher ranking staff member to the scene of an incident, it was only suggested that the facility reinforce this training element.

*115.31 (b) Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only female inmates, or vice versa.

Training is tailored to the gender of the inmates at the employee's facility and employees receive additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa. Section 2.1.E of the policy states, "Staff shall receive training in accordance with Department policy 5.1.1, "Staff Development and Training." Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa." SCI Mercer is a male facility and training is conducted with this in mind.

*115.31 (c) All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

All current employees who have contact with inmates have received such training. The agency provides each employee with refresher training every year to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, does the agency provide refresher

information on current sexual abuse and sexual harassment policies. This years training record indicates that only about ten percent of the staff remain to be trained during the last two months of the year. This is a reasonable number since the records are maintained by calendar year.

*115.31 (d) The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.

The agency documents, through employee signature and electronic verification, that employees understand the training they have received. The agency employs a written verification and an electronic log. Samples of the form and the log were provided as evidence.

The facility was given a determination of EXCEEDS STANDARD for the following reasons:

- > The agency had a clearly written and complete training policy as documented in the PREA Procedures Manual, Section 2-E.
- > The facility demonstrated that it followed the agency policy through written verification and interviews.
- > The facility could provide detailed lesson plans.
- > The agency employed a variety of training strategies.
- > The facility could provide detailed training records.
- > The facility could readily identify staff members that missed training.
- > Staff members confirmed that the training was completed.
- > Staff members demonstrated that they had a firm knowledge of PREA requirements for which they would be responsible.
- > Staff members carried cards that outlined their PREA responsibilities.

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| 115.32 | Volunteer and contractor training |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>*115.32 (a) The agency shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures.</p> <p>The agency ensures that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The agency has developed a PREA Procedures Manual that clearly articulates in Section 2.E each facility's training responsibilities as they pertain to contractors and volunteers. The manual contains policy regarding the information to be included in the training, the individuals to be trained, and the frequency of such training. There were no deficiencies noted in manual as they relate to PREA standards training requirements. The manual describes the training that contractors and volunteers must undergo. The level of training required is based on the amount of contact the individual has with inmates. Volunteers and contractors averaging more than five hours of contact per week have the same training requirements as regular staff. The facility maintains documentation for each contractor and volunteer indicating the level of training, when the training was conducted, and a verification that the training has been understood.</p> <p>Interviews with randomly selected volunteers and contractors confirmed that the training had been conducted. Furthermore, the volunteers were asked if they thought the training was adequate and if the agency seemed committed to making sure that inmates were free from sexual abuse or harassment. The volunteers stated that they were comfortable with the level of training and believed that the facility was committed to protecting the inmates.</p> <p>*115.32 (b) The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.</p> <p>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. The agency keeps a written roll of contractors and volunteers, as well as a training log for those individuals. The interviews of contractors and volunteers also confirmed training.</p> <p>*115.32 (c) The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.</p> <p>The agency maintains documentation confirming that volunteers and contractors understand the training they have received. Copies of the signed training verification forms were supplied as evidence. This verification is required by agency policy, as previously described and confirmed through interviews.</p> |

The facility was given a determination of EXCEEDS STANDARD for the following reasons:

- > Contractors and volunteers were trained at a level comparable to regular staff if their contact with inmates exceeded five hours per week.
- > The facility clearly followed the agency policy set forth for contractors and volunteers.
- > During the interview the contractors and volunteers demonstrated their PREA knowledge.
- > The training curriculum used for many volunteers and contractors met the same standards as for regular employees.

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| 115.33 | Inmate education |
| Auditor Overall Determination: Meets Standard | |
| Auditor Discussion | |
| <p>*115.33 (a) During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.</p> <p>During intake, inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and they receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment. The agency has developed a PREA Procedures Manual that clearly articulates in Section 2.F each facility's training responsibilities regarding inmates. The manual clearly describes each facility's responsibility to properly train inmates. There were no deficiencies in the the information resented. The facility provided training materials in the form of an inmate handbook and an informational handout. Additionally, the facility uses the PREA Resource Center's Facilitator's Guide as a training resource. The facility also uses the video " PREA: What you need to know" to augment its training efforts. The video is played regularly on the facility television network. A video schedule was provided. The facility maintains training records for the inmates in the form of a sign off sheet and notations in the inmate's computer file. To accommodate inmates with limited reading skills the facility has documents available in Spanish, a video translated into Spanish, braille documents are made available at designated facilities, and staff entertain questions during training sessions.</p> <p>During the facility tour it was noted that signage regarding PREA was distributed throughout the facility. The audit team engaged several inmates at random asking general questions about PREA; the responses were positive and the inmates all seemed knowledgeable about PREA. Inmates from throughout the facility were interviewed in private and asked about PREA training. In every case the inmates stated that they had received training when arriving at the facility. Intake staff confirmed that training was conducted when inmates arrived at the facility.</p> <p>*115.33 (b) Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.</p> <p>Within 30 days of intake, the agency provides comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment. Within 30 days of intake, the agency provides comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents. Within 30 days of intake, provides comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents. The PREA Procedures Manual in Section 2.F states, "Within the first 30 days of reception, additional information shall be provided to all inmates, including PVs, either during orientation at the Diagnostic and Classification Center (DCC) and reception sites, or upon return to Department custody. All inmates shall be shown a video regarding their rights to be free from sexual abuse, sexual harassment, and retaliation. They shall also be</p> | |

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 National PREA Resource Center Inmate Education Facilitator's Guide PREA: What You Need To Know (Attachment 2-1) and to answer questions." Interviews with inmates confirm the extensive training within 30 days of intake has occurred.

*115.33 (c) Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility.

All inmates at SCI Mercer have received such education. Inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility. According to the agency policy on inmate training inmates are retrained upon transferring to another agency. According to the PREA Compliance Manager all inmates at the facility have been trained. Compliance verification forms are on file. Inmate interviews, both scheduled and impromptu, indicated that the training had been completed as required.

*115.33 (d) The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.

The agency provide inmate education in formats accessible to all inmates including those who are limited English proficient. The agency provides inmate education in formats accessible to all inmates including those who are deaf. The agency provides inmate education in formats accessible to all inmates including those who are visually impaired. The agency provides inmate education in formats accessible to all inmates including those who are otherwise disabled. The agency provides inmate education in formats accessible to all inmates including those who have limited reading skills. Agency policy contained in the PREA Procedures Manual 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. Compliance is supported by the existence of materials written in Spanish and a video schedule indicating the times that Spanish translation is to be aired. The Reasonable Accommodations for Inmates with Disabilities Manual, Section 3 provides guidance to staff regarding the accommodation of other disabilities.

*115.33 (e) The agency shall maintain documentation of inmate participation in these education sessions.

The agency maintain documentation of inmate participation in these education sessions. The facility was able to provide verification sheets for selected inmates to support this standard.

*115.33 (f) In addition to providing such education, the agency shall ensure that key

information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

In addition to providing such education, the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. A copy of the inmate handbook was provided to the auditor to indicate that information was readily available to the inmates. Additionally, the training video is regularly replayed in the inmate network. A recent schedule for the video showing was supplied as further evidence. Finally, the auditing team noted that information was posted in locations throughout the facility where inmates could see the data.

A determination of MEETS STANDARDS was provided:

- > The agency has a policy that satisfies the standard as found on the PREA Procedures Manual, Section 2-F.
- > Training materials were presented, reviewed and found to be adequate.
- > All inmates interviewed confirmed that they were trained.
- > The training video used was recommended by the PREA Resource Center.
- > Staff members confirmed that the training was completed and logs were provided.
- > Random inmates questioned during tour exhibited knowledge of their PREA rights.

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| 115.34 | Specialized training: Investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.34 (a) In addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.</p> <p>In addition to the general training provided to all employees pursuant to §115.31, the agency ensures that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. The facility presented curriculum documentation that indicated that the agency performed training related to investigating sexual assaults in a confinement setting. The facility also presented agency policy that requires investigators to attend such training. This facility has ten investigators and the training log indicates that twelve employees at the facility have attended such training. The attendees are required to submit a verification form. A sample form was submitted with the facility's documentation. an interview with investigative staff confirmed that the training had been conducted and facility investigative staff attended that training.</p> <p>It should be noted that facility investigators only conduct administrative investigative investigations. The facility investigators work in conjunction with the Pennsylvania State Police on criminal investigations.</p> <p>*115.34 (b) Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>This specialized training includes techniques for interviewing sexual abuse victims. This specialized training includes proper use of Miranda and Garrity warnings. This specialized training includes sexual abuse evidence collection in confinement settings. This specialized training includes the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency uses the curriculum designed by the PREA Resource Center and contains the elements outlined for this standard.</p> <p>*115.34 (c) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.</p> <p>The agency maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. This has been verified with both a training log and an individual verification form. All of the current investigators at the facility have attended the training. The supervisor of the investigations unit also verbally confirmed this.</p> <p>*115.34 (d) 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</p> |

conduct such investigations.

Agents and investigators must be trained in conducting investigations in confinement settings as per 115.34(b) above. Auditor is not required to audit this provision.

Based on the following, the agency has been given a MEETS STANDARD for this section:

- > Policy was provided regarding the training of investigators as indicated in the PREA Procedures Manual, Section 2.E.2.
- > The agency requires investigators to be trained.
- > Documentation was provided that the investigators attended the training.
- > The content of the training was sufficient to meet standards.

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| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.35 (a) The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment. The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse. The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment. The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The agency has policy requiring the facility mental/mental health staff are required to attend training related to sexual assault. The policy, as indicated in the PREA Procedures Manual, Section 2.E.2, indicates the topics to be covered in the training. This policy was supplemented by training curriculum that verified the policy regarding the content of the training. Medical staff confirmed that they were trained.</p> <p>*115.35 (b) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.</p> <p>This standard does not apply. Medical staff employed by the agency do not conduct forensic examinations. These exams are conducted at a local hospital.</p> <p>*115.35 (c) The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.</p> <p>The agency maintains documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency. The training records were examined and a copy of the log for one of the classes was included in the facility's documentation. The facility also requires trainees to sign verification forms. Copies of several of these forms were provided with the facility's documentation. Interviews with the medical and mental health staff confirmed that the training was provided and the individuals interviewed attended the training. Training logs and verification forms have been provided as evidence.</p> <p>*115.35 (d) Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32,</p> |

depending upon the practitioner 's status at the agency.

Medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31. Training logs and verifications forms have been provided. Agency policy requires that all staff having contact with inmates are to be given the basic PREA training, as documented in standard §115.31.

A determination of MEETS STANDARDS was provided for standard 115.35 based on the following:

- > The agency has policy requiring medical/mental health to be trained regarding sexual assault as indicated in the PREA Procedures Manual, Section 2.E.
- > The policy outlines topics to include in the training.
- > Curriculum confirming training content was provided and reviewed by the auditor.
- > Training was verified through logs and verification forms.
- > Interviewed staff verified training.

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| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.41 (a) All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</p> <p>All inmates are assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Additionally, all inmates are assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. The policy and procedure found in the PREA Procedures Manual, Section 2.B requires that all inmates are assessed during intake screening for their risk of being a sexual abuser or being abused. The policy 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 his/her annual review, for risk of being sexually abused by other inmates or sexually abusive toward other inmates." The screening is conducted at intake upon arrival by an RN utilizing the PRAT screening tool which includes each item prescribed in standard 115.41. The screening staff confirmed that the screening tool was being used and the inmates confirmed that they had been screened.</p> <p>*115.41 (b) Intake screening shall ordinarily take place within 72 hours of arrival at the facility.</p> <p>The intake screenings ordinarily take place within 72 hours of arrival at the facility. By policy this screening takes place within 72 hours of arrival and a tour of the intake process confirms that the initial screening occurs as part of the inmates acceptance into the facility. The facility has inmate management software that indicates the date that inmates arrive and the date of the screening. These two events normally occur on the same day.</p> <p>*115.41 (c) Such assessments shall be conducted using an objective screening instrument.</p> <p>Intake screening considers, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated;(5) Whether the inmate’s criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener’s perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI); (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate’s own perception of vulnerability; (10) Whether the inmate is detained solely for civil immigration purposes. These ten requirements are listed within the PREA Procedure Manual, Section 2-B. A printed copy of the screening tool supports this requirement with these ten factors being considered.</p> |

*115.41 (d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.

The intake screening considers, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI); (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; (10) Whether the inmate is detained solely for civil immigration purposes. These ten requirements are listed within the PREA Procedure Manual, Section 2-B. A printed copy of the screening tool supports this requirement with these ten factors being considered. The screening staff confirmed that the screening tool was being used and the inmates confirmed that they had been screened.

*115.41 (e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

In assessing inmates for risk of being sexually abusive, the initial PREA risk screening considers, when known to the agency: prior acts of sexual abuse; prior convictions for violent offenses; and history of prior institutional violence or sexual abuse. Policy found in the PREA Procedures Manual, section 2.B confirms the consideration of these factors. Additionally, these factors appear on the printed screening tool used by the agency and provided to the audit team for examination. The screening staff confirmed that the screening tool was being used and the inmates confirmed that they had been screened.

*115.41 (f) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

With 30 days from the inmate's arrival at the facility, the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. The PREA Procedures Manual, Section 2.B.5.c states, "A reassessment shall be conducted between day 20 and 30 of every inmate's arrival in the system or receipt into another facility utilizing the PRAT. Additionally, the counselor shall reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant

information received by the facility staff since the intake screening." A review of the inmate manifest indicates both the original screening and the reassessment. Counseling staff confirmed that they perform the reassessment as required.

*115.41 (g) An inmate's risk level shall 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 sexual victimization or abusiveness.

The facility reassesses an inmate's risk level when warranted due to a: referral, request, an incident of sexual abuse, or a receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Prison Rape Elimination Act (PREA) Procedures Manual, Section 2.B.5.c confirms this as agency policy. The agency provided an example of an inmate record where this was done.

*115.41 (h) Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.

Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section. This is supported by policy found in the PREA Procedures Manual, Section 2.B.5.h which states, "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." The assessment tool contains language which advises the inmate that no penalty will incur for not answering questions. Finally, there was no indication in any interview that the facility violated this policy.

*115.41 (i) The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

The agency has implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. Interviews. This was confirmed during interviews with the PREA Coordinator, the PREA Compliance Manager and the staff responsible for screening. It was determined through these interviews that there is a system in place to insure appropriate controls on the dissemination of sensitive information is in place.

A determination of MEETS STANDARD was provided for the following reasons:

- > The agency has policy found in the PREA Procedures Manual that satisfies the standard.
- > The facility provided adequate documentation to indicate screenings were completed.
- > Inmates confirmed that they had been screened.
- > Staff confirmed that they conducted screenings and follow-up screenings.
- > The screening tool was evaluated for compliance to the standard and was found to be adequate.

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| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.42 (a) The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>The agency uses information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments, Bed assignments, Work Assignments, Education Assignments, and Program Assignments. This is supported by policy found in the PREA Procedures Manual, Section 2.B.3 which 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 facility also provided a printout from its inmate management system that clearly indicates when an inmate presents a concern under this standard. Interviews with the PREA Compliance Manager and the intake staff also confirmed compliance with this standard.</p> <p>*115.42 (b) The agency shall make individualized determinations about how to ensure the safety of each inmate.</p> <p>The agency makes individualized determinations about how to ensure the safety of each inmate. This is supported by the PREA Procedures Manual, section 2.B.5.I which states, "The Department shall make individualized determinations about how to ensure the safety of each inmate." The facility provided printouts from its inmate management system that indicates how inmates are tracked for purposes of compliance with this standard. Finally, staff interviews confirmed that individual determinations were made regarding the safety of each inmate. By Policy and practice the facility uses the screening information to determine housing, bed, work, education and program assignment with the goal of keeping inmates at high risk of being sexually victimized separate from those at high risk of being abusers. Decision are made on an individual basis using information from the screening tool and good judgement. Inmates who are vulnerable to sexual assault are coded and tracked through the institutional system and given single cells.</p> <p>*115.42 (c) In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency 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.</p> <p>When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, the agency considers on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management</p> |

or security problems. Additionally, when making housing or other program assignments for transgender or intersex inmates, the agency considers on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems. Support for the standard can be found in the PREA Procedures Manual, section 9.B.5 which states, "In deciding whether to assign a transgender or intersex inmate to a facility that is consistent with his/her gender identity, and in making other housing and programming assignments, the Department shall consider, on a case-by-case basis, whether a placement would ensure the health and safety of all impacted inmates and whether the placement could potentially present management or security problems." An interview with the PREA Compliance manager confirmed that the facility would follow the policy if circumstances dictated compliance. However, the Manager reported that the facility has not housed a transgender or intersex inmate during the past year.

*115.42 (d) Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

Placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate. Support for the standard can be found in the PREA Procedures Manual, section 9.D.2 which states, "The Unit Manager and the PCM shall meet with identified transgender or intersex inmates during the semi-annual and annual review, in accordance with Department policy 7.2.1, "Counseling Services." (28 C.F.R. §115.42[d]) During these meetings, the PCM shall complete the Gender Review Reassessment Checklist (Attachment 9-B) and forward the document to the PCD via the CR, DOC PREA Reports email address." There were no transgender or intersex currently housed at the facility for interview, but the PREA Compliance Manager stated that the facility followed the protocol.

*115.42 (e) A transgender or intersex inmate 's own views with respect to his or her own safety shall be given serious consideration.

Each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments. Support for this standard is found in the PREA Procedures Manual, Section 9.B.5.a which states, "A transgender/intersex inmate's own views, with respect to his/her own safety shall be given serious consideration." Interviews with staff members confirmed that they were aware of the policy and would comply when the situation was presented.

*115.42 (f) Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

Transgender and intersex inmates are given the opportunity to shower separately from other inmates. The PREA Procedures Manual, Section 9.G confirms that this is policy by stating, "Transgender and intersex inmates shall be given the opportunity to shower separately and privately from other inmates." The PREA Compliance Manager stated that the facility is prepared to meet this standard. During the tour of the facility it was observed that showering arrangements could easily accommodate private showering.

*115.42 (g) The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

The agency refrains from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status. The agency or facility is not under any consent decree or judgement. Support for the standard can be found in the PREA Procedures Manual, Section 9.C.2 which states, "The OPM shall not place transgender or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates." Discussions with staff members indicated that there were no dedicated housing units specifically for LGBTI inmates. Gay inmates interviewed indicated that they were currently housed with the general population.

A determination of MEETS STANDARD was provided for the following reasons:

- > The agency has policy that satisfies the standard.
- > An inmate tracking system alerts staff to housing concerns.
- > Staff confirmed that the information is used to protect the inmates from abuse.
- > A vulnerable inmate confirmed that he was given a single cell.
- > There were no transgender or intersex inmates could be identified at the facility, so no associated negative findings could be found.
- > Shower stalls are designed for individual use.

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| 115.43 | Protective Custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.43 (a) Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>The facility always refrains from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility holds the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. The standard is supported by agency policy found in the PREA Procedures Manual, Section 2.A.6 which states, "Inmates at a high risk for sexual victimization or inmates who have allegedly suffered sexual 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 Facility Manager/designee, 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." Interviews with the PREA Compliance Manager indicate that the agency complies with the policy if the situation arises. There have been no cases in the last where involuntary protective custody has been an option. When touring the restricted housing unit, the auditor asked staff if there were any inmates housed for the purpose of involuntary protective custody and there were none.</p> <p>*115.43 (b) Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.</p> <p>Inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs, Privileges, Education, and Work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility documents the opportunities that have been limited. If the facility restricts access to programs, privileges, education, or work opportunities, the facility documents the duration of the limitation. If the facility restricts access to programs, privileges, education, or work opportunities, the facility documents the reasons for such limitations. The standard is supported by agency policy found in the PREA Procedures Manual, Section 2.A.6.e which states, "If the Shift Commander assigns an inmate to involuntary AC for the purpose of protection from sexual victimization, access to programs, privileges, education, or work opportunities shall be afforded to that inmate to the extent possible. If the facility restricts</p> |

access to these opportunities, the facility shall document in the Involuntary Administrative Custody Services Access Restriction Form (Attachment 2-C): (1) the opportunities that have been limited; (2) the duration of the limitation; and (3) the reasons for such limitations. Interviews with the PREA Compliance Manager indicate that the agency complies with the policy if the situation arises. There have been no cases in the last where involuntary protective custody has been an option. The auditor did interview an offender who was identified as at risk for sexual victimization . The facility provided alternative housing in the medical unit for the offender .The offender did have access to activities and programs that were afforded the population .

*115.43 (c) The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

The facility assigns inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. Such an assignment does not ordinarily exceed a period of 30 days. The standard is supported by agency policy found in the PREA Procedures Manual, section 2.A.6.f which 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." Interviews with the PREA Compliance Manager indicate that the agency complies with the policy if the situation arises. There have been no cases in the last year where involuntary protective custody has been an option.

*115.43 (d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility 's concern for the inmate 's safety; and (2) The reason why no alternative means of separation can be arranged.

If an involuntary segregated housing assignment is made, the facility clearly documents the basis for the facility's concern for the inmate's safety. If an involuntary segregated housing assignment is made the facility clearly documents the reason why no alternative means of separation can be arranged. The standard is supported by agency policy found in the PREA Procedures Manual, section 2-A-6-d which states, "If an involuntary AC housing assignment is made in accordance with Subsection A.6.a. above, the Shift Commander shall clearly document on the DC-141, Part 1, (Other) Report, the following information: (1) the basis for the staff member's concern for the inmate's safety; (2) the other alternative means of separation that were explored; and (3) the reason why no alternative means of separation can be arranged." Interviews with the PREA Compliance Manager indicates that the agency complies with the policy if the situation arises. There have been no cases in the last year where involuntary protective custody has been an option.

*115.43 (e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

In the case of each inmate who is placed in involuntary segregation because he is at high risk of sexual victimization the facility affords a review to determine whether there is a continuing need for separation from the general population every 30 days. The standard is supported by

agency policy found in the PREA Procedures Manual, Section 2.A.6 which states, "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 1, (Other) Report." Interviews with the PREA Compliance Manager indicate that the agency complies with the policy if the situation arises. There have been no cases in the last where involuntary protective custody has been an option.

A determination of MEETS STANDARDS was provided for the following reasons:

- > The agency has policy that satisfies the standard.
- > Interviews with management personnel indicated that protective custody in its restricted housing unit is avoided.
- > There were no inmates held in restricted housing for their protection from sexual abuse.
- > Interviews with line staff supported the finding.
- > There was absolutely no indication that the facility was violating its policies or otherwise concealing the use of involuntary protective custody.

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| 115.51 | Inmate reporting |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1469 488">*115.51 (a) The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p data-bbox="252 539 1481 999">The agency provides multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents. Agency policy found in the PREA Procedures Manual, Section 3 indicates reporting can be through staff, in writing and to the Pennsylvania State Police. The agency has a PREA Procedures Manual that clearly indicates the PREA reporting requirements to include staff responsibilities and inmate reporting protocols. Inmates may make written reports or may report to staff verbally. The facility provided written examples of complaints that were filed in different ways. The facility provided copies of posters that were seen throughout the facility during the tour. These posters were designed to remind inmates of their reporting options as well as their other PREA rights. Both staff and inmate interviews confirmed that there were alternative ways to report a complaint.</p> <p data-bbox="252 1055 1469 1301">*115.51 (b) The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.</p> <p data-bbox="252 1357 1481 1895">The agency also provides at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency. That private entity or office is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials. The private entity or office allows the inmate to remain anonymous upon request. There are no inmates detained solely for civil immigration purposes at the facility. The PREA Procedures Manual, Section 3 clearly indicates that reports can be made directly to the Pennsylvania State Police, an independent agency. The manual contains detailed procedures regarding reported incidents. This includes incidents reported anonymously. The facility also provided examples of posters and other notices that inform inmates of reporting procedures. The PREA Compliance Manager confirmed compliance with this standard during the interview. Most of the inmates interviewed readily confirmed that they were aware of their right to report anonymously. All inmates knew of a least on way to report abuse.</p> <p data-bbox="252 1951 1437 2029">*115.51 (c) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.</p> <p data-bbox="252 2085 1437 2152">The staff accepts reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. The staff is required to promptly document any verbal</p> |

reports of sexual abuse and sexual harassment. The PREA Procedures Manual, Section 3.A.3 states, "Staff shall accept and document reports made verbally, in writing, anonymously, and from third parties and promptly forward to the facility's designated investigators." The facility provided examples of reports accepted by staff members. The staff indicated during the interviews that they were aware of their reporting responsibilities. Inmate interviews confirmed that this method of reporting was known to the inmate population.

*115.51 (d) The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

The agency provides a method for staff to privately report sexual abuse and sexual harassment of inmates. The PREA Procedures Manual, Section 3.C clearly provides reporting procedures for staff including methods for making a private report. The facility provided training materials to indicate how staff were informed regarding reporting methods. Staff interviews confirmed that the staff knew about their ability to make confidential reports.

The facility provided examples of written reports by inmates and verbal reports that were documented by staff members. Both inmates and staff confirmed that they were aware of the multiple reporting procedures that were available. When asked how they would report sexual abuse all of the inmates interviewed could articulate at least one method for reporting, though one inmate stated that he would fight so violently that the staff would find out very quickly.

The facility was found to MEET STANDARDS for this section based on the following:

- > The facility provided evidence of well-documented policy in the PREA Procedures Manual, Section 3.
- > The policy meets the requirements of the standard.
- > There was considerable supporting evidence during the tour including signage and verbal verification from several inmates.
- > The agency provided training documentation.
- > Interviews with staff and inmates supported the observations and documentations.

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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.52 (a) An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>Agency policy prohibits the use of the grievance procedure for reporting sexual abuse and is exempt from the standard. If an inmate inadvertently uses the grievance system the complaint is diverted to the PREA complaint procedure. The PREA Procedures Manual, Section 3.B.6 states, " Inmates shall not utilize the inmate grievance system to report sexual abuse or sexual harassment by a staff member or inmate-on-inmate sexual abuse, as defined in the Glossary of Terms for this procedures manual. However, if an inmate files a grievance related to staff on inmate sexual abuse/sexual harassment or inmate on inmate sexual abuse, the Facility Grievance Coordinator shall reject the grievance and forward it to the facility Security Office and PREA Compliance Manager (PCM)/designee for tracking and investigation. The inmate shall be notified of this action."</p> <p>A determination of MEETS STANDARD was provided for the following reason: > The grievance process can not be used for PREA complaints.</p> |

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| 115.53 | Inmate access to outside confidential support services |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>*115.53 (a) The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.</p> <p>The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations. local, State, The facility enables reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The PREA Procedures Manual, Section 4.E.1 states, "The Department works in collaboration with the Pennsylvania Coalition Against Rape (PCAR) and its member centers. The facility PCM, in conjunction with the statewide PREA Coordinator/designee has worked to establish mutual agreements with local rape crisis centers where all Department facilities are located." The facility further provided a letter of agreement with AWARE, Inc., the rape crisis center where SCI-Mercer is located. The letter commits AWARE, Inc. to providing the inmate services specified in this standard. The facility also provided a flyer that indicated how inmates could contact AWARE., Inc. The facility also provided a copy of an announcement regarding access to AWARE, Inc. that played on the inmate television network within the facility. During the interviews some inmates indicated that they were aware of the services, but most seemed generally indifferent to the effort. The facility offered to make additional efforts to make sure inmates understood the services available and developed a video announcement that would play on the internal television system to further advertise the information.</p> <p>*115.53 (b) The facility 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.</p> <p>The facility informs 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. In support of this standard the PREA Procedures manual, Section 2.E.3 states, "The PCM 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." The facility also provided a copy of a confidentiality agreement that is used when inmates communicate with AWARE, Inc.</p> <p>*115.53 (c) The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain</p> |

copies of agreements or documentation showing attempts to enter into such agreements. The agency maintains or attempts to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency maintains copies of an agreement with AWARE, Inc.

A determination of EXCEEDS STANDARD was provided for the following reasons:

- > The agency had an appropriate policy outlining the services to be provided.
- > The facility has a letter of agreement with one of two facilities.
- > Though the inmates seemed to be indifferent to their access to outside services, they were aware of the provisions of the standard.
- > The facility has demonstrated that they make a continual effort to make sure that the inmates are aware of this provision, despite the indifference of the inmates.
- > The EXCEEDS STANDARD is provided due to the facility's extraordinary effort to make the provisions of the standard known.

| 115.54 | Third-party reporting |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.54 (a) The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</p> <p>The has agency established a method to receive third-party reports of sexual abuse and sexual harassment and has distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate. The agency has a website that allows third part reporting. The existence of this website has been revealed to the inmates through a poster and an informational handout. These documents were provided with screen printouts of the website. The website was examined and found to be functional.</p> <p>A determination of MEETS STANDARD for the following reasons:</p> <ul style="list-style-type: none"> > A reporting method has been provided. > The method was distributed publicly on the Internet. > The information was distributed to inmates, so that it could be passed on to family or friends. |

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| 115.61 | Staff and agency reporting duties |
| | <p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 1474 533">*115.61 (a) The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p data-bbox="248 584 1449 1088">The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment. The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation. This is supported by the PREA Procedures Manual, Section 3.C.1 that states, "Any staff member, contract service provider, and volunteer shall immediately report to the Shift Commander if he/she has knowledge, suspicion, or information regarding any of the following:</p> <p data-bbox="248 1099 1461 1346">a. sexual abuse of an inmate; b. sexual harassment of an inmate that occurred in a facility; c. retaliation against inmates or staff who reported such an incident; and/or d. staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. NOTE: The incidents listed above may have occurred in any confinement facility, whether or not it is affiliated with the Department." The interviewed staff confirmed that they were trained regarding this standard and they comply with the procedure.</p> <p data-bbox="248 1397 1481 1559">*115.61 (b) 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 agency policy, to make treatment, investigation, and other security and management decisions.</p> <p data-bbox="248 1615 1481 2074">Apart from reporting to designated supervisors or officials, staff must refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions. The standard is supported by PREA Procedures Manual Section 3.C.4 which states, "An Extraordinary Occurrence Report shall be filed in every sexual abuse allegation in accordance with Department policy 6.3.1, "Facility Security." Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse allegation to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decisions, where sexual abuse with an inmate is reported." Staff members indicated that they were aware of the confidentiality of the information.</p> <p data-bbox="248 2125 1434 2161">*115.61 (c) Unless otherwise precluded by Federal, State, or local law, medical and mental</p> |

health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner 's duty to report, and the limitations of confidentiality, at the initiation of services.

Medical and mental health practitioners are required to report sexual abuse pursuant to paragraph (a) of this section. Medical and mental health practitioners are required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Medical and mental health practitioners are required to report sexual abuse pursuant to paragraph (a) of this section. Medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. The medical staff confirmed this information, but no reports were reviewed since none had been submitted.

*115.61 (d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency reports the allegation to the designated State or local services agency under applicable mandatory reporting laws. This facility does not house youthful inmates and otherwise has not needed to make a report required under this standard. The superintendent confirmed that this standard would be followed if the situation presented.

*115.61 (e) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility 's designated investigators.

The facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. The superintendent confirmed that all cases are reported to investigators. Additionally, the agency employs an investigative packet that is initiated at the time an incident is reported. The packet provides an extraordinary level of accountability when reports are made. Interviews with staff indicated that they were aware of the applicable policies. The Superintendent (Warden) confirmed that all reports of abuse are investigated by appropriate staff. He also verified that anonymous and third party reports would be sent to the designated investigators. The medical staff confirmed their adherence to the reporting requirements of this standard. All of the reports from the past twelve months were made available for inspection. There were no indications that incidents were not reported to the investigators.

The designation for this standard is MEETS STANDARD for the following reasons:

- > The agency has a well-defined policy that is in agreement with the standard.
- > Interviews with staff indicated familiarity and adherence to the written policy.
- > There were no indications that the policy was not followed either from the facility tour or related inmate questioning.

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| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.62 (a) When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</p> <p>When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. This is supported by the PREA Procedures Manual, Section 2.A.2.j which states, "Ensure that when Department staff learn that an inmate is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action shall be taken to protect that inmate." In its PREA Procedures Manual the PREA Compliance Manager at the facility is tasked with making sure that the staff appropriately protect inmates that may be at risk. The agency has developed forms to assist the decision process relating to this duty to protect. The staff confirmed that they knew that they must protect vulnerable inmates and would take action. Interviews with the high level officials confirmed that protection of inmates was very important. While the facility reported that it had not had an occasion to provide protection as described in this section, it was not surprising as several inmates expressed the opinion that this facility was very safe. The superintendent and other staff members confirmed that the facility follows the policy. There were no instances where this occurred during the past year.</p> <p>A determination of MEETS STANDARD was provided for the following reasons:</p> <ul style="list-style-type: none"> > While no policy is required for this standard the agency addressed the standard in its PREA Procedures Manual. > The facility had forms to help it with the protection process, if needed. > Interviews supported the documentation. > There were no contrary indications. |

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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.63 (a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.</p> <p>Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation notifies the head of the facility or appropriate office of the agency where the alleged abuse occurred.</p> <p>The agency indicates in its PREA Procedures Manual, Section 3.E.1 that, " Reporting to Other Confinement Facilities: a. An inmate may file a report of sexual abuse sustained while confined at another facility; b. It is the Facility Manager/designee's responsibility to notify the head of the facility in which the reported abuse occurred. Notification must be provided as soon as possible, but no later than 72 hours after receipt of information and documented on the Notification of Sexual Abuse Allegation to Another Facility (Attachment 3-A). This document shall be maintained by the PCM in an annual file for audit verification purposes in accordance with Section 1 of this procedures manual; c. A copy of the notification must also be sent to the facility PCM for audit verification purposes. The facility indicated that it reported to other facilities three times in the past year using a form developed for that express purpose . The facility provided a blank form as well as a form that had been completed and emailed to another facility in accordance with the written policy. The facility also reported that on two occasions notifications were received from other facilities. A copy of these notifications was provided. Documentation clearly indicated that the expressed policy was followed and key staff interviews supported the written documentation. An investigative report was found to match on of the inbound notifications.</p> <p>*115.63 (b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>Notification is provided as soon as possible, but no later than 72 hours after receiving the allegation. The agency's PREA Procedure Manual, Section 3.E.1 states, "Notification must be provided as soon as possible, but no later than 72 hours after receipt of information and documented on the Notification of Sexual Abuse Allegation to Another Facility." The notification form used by the agency contains both the date of the report and the date of the notification which assists in compliance with this standard.</p> <p>*115.63 (c) The agency shall document that it has provided such notification.</p> <p>The agency documents that it has provided notification. The agency's PREA Procedure Manual, Section 3.E.1 states, "Notification must be provided as soon as possible, but no later than 72 hours after receipt of information and documented on the Notification of Sexual Abuse Allegation to Another Facility." Copies of the completed forms were offered by the facility as evidence.</p> <p>*115.63 (d) The facility head or agency office that receives such notification shall ensure that</p> |

the allegation is investigated in accordance with these standards.

The facility head or agency office that receives such notification ensures that the allegation is investigated in accordance with these standards. The PREA Procedures Manual, Section 3.E.2 states, "a. Upon receipt of an allegation from another facility that an inmate was sexually abused 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 Allegation to Another Facility. b. The Facility Manager/designee shall immediately notify the Security Office to initiate a PREA investigation as outlined in Section 5 of this procedures manual." A copy of a notification form was provided as evidence of compliance in addition to confirming statements by the facility superintendent.

The facility was found to MEET STANDARDS for the following reasons:

- > The facility provided appropriate policy.
- > Copies of incoming and outgoing notifications were provided.
- > Interviews supported the documentation
- > An investigation matched one of the notifications.
- > There was no contraindicating evidence discovered during the tour or document review.

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| 115.64 | Staff first responder duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.64 (a) Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</p> <p>Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report required to: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence; ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence. The agency's PREA Procedures Manual, Section 4.A.1 states, "Upon learning of an allegation that an inmate was sexually abused, the first staff member to respond shall follow the procedures below. Security staff shall: a. notify the Shift Commander; 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. This policy associated with this standard was reviewed and found to be adequate. The facility provided a copy of a PREA card that is carried by staff to remind them of their responsibilities as first responders. The facility utilizes pre-made packets to help organize its response to PREA incidents. A copy of the contents of that packet was provided. During the last twelve months there were no incidents where a first responder interdicted an incident in progress. However, the staff interviews were found to support the policy with several of the staff members presenting their first responder cards at the interview. One staff member did seem to demonstrate a lack of specific knowledge, but it is believed that the problem was more of an attitude issue rather than a true lack of knowledge.</p> <p>*15.64 (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, and then notify security staff.</p> |

If the first staff responder is not a security staff member, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. In the PREA Procedures Manual, Section 4.A.2 it is stated, "Non-Security staff shall: a. immediately notify the Shift Commander; 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." Non-security staff confirmed that they were aware of this procedure and also produced reminder cards that were kept in their possession.

The determination for this item is MEETS STANDARD for the following reasons:

- > The facility has policy which reflects the standard.
- > Staff members carry a reminder card that outlines their first responder duties.
- > The facility utilizes pre-made PREA packets to organize the response to incidents.
- > Staff interviews generally supported the documentation.
- > There were no observations that contraindicated a positive finding.

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| 115.65 | Coordinated response |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>*115.65 (a) The facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>The facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership developed in response to an incident of sexual abuse. The facility provided a well-developed plan, identified as DC-ADM 008 MER 001, that is unique to SCI-Mercer. This seventeen page policy addressed a broad range of PREA issues and indicated a thoughtful, organized approach. Additionally, the facility utilizes pre-made packets to coordinate its response to abuse incidents. The superintendent (warden) confirmed that it was the PREA Compliance Manager's responsibility to maintain the facility directive.</p> <p>The determination for this item is EXCEEDS STANDARD for the following reasons:</p> <ul style="list-style-type: none"> > The facility has a policy articulating its response to PREA. > The policy is well-defined covering a broad range of issues. > The detail and organization in the policy far exceeded the minimum effort needed to meet this standard. |

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*15.66 (a) Neither the agency nor any other governmental entity responsible for collective bargaining on the agency 's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency 's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>The agency has multiple contracts and has undergone considerable research to determine if they are in compliance with this standard. The facility provided a detailed letter to explain their position. Research into Pennsylvania government contracts revealed that each contract contains a standard management rights clause that grants the agency certain rights. The agreement states, "It is understood and agreed that the Employer, at its sound discretion, possesses the right, in accordance with applicable laws, to manage all operations including the direction of the working force and the right to plan, direct, and control the operation of all equipment and other property of the Employer, except as modified by this Agreement." The agency also provided a copy of an arbitration agreement with its correctional officers that removed a 24 hour notification of transfer provision when PREA issues are involved.</p> <p>*115.66 (b) Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member 's personnel file following a determination that the allegation of sexual abuse is not substantiated.</p> <p>Auditor is not required to audit this provision.</p> <p>The determination for this item is MEETS STANDARD for the following reasons:</p> <ul style="list-style-type: none"> > The agency eliminated a clause that required required a 24 hour notification of inmates charges. > Labor agreements contain a management rights clause that allows the State to manage its operations and direct the workforce. > The agency's Director of Human Resources provides in a letter that he does not believe that there are any provisions in the labor agreements that would be contrary to PREA standards. |

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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.67 (a) The agency shall establish a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and shall designate which staff members or departments are charged with monitoring retaliation.</p> <p>The agency has established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. The agency also has designated staff members or departments that are charged with monitoring retaliation. The agency has a PREA Compliance Manual that appropriately and accurately states the agency's policy relating to the monitoring of retaliation. A copy of that policy was provided in the documentation and Section 2.A.2 states the PREA Compliance Manager shall, " 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 of sexual abuse or sexual harassment related to this procedures manual. The facility utilizes a specific form to track the monitoring of retaliation and a copy of that form was provided for review. Interviews of key staff involved in the retaliation monitoring process confirmed that the facility follows its agency policy and takes this provision seriously. The inmate that reported abuse confirmed that the staff monitored retaliation and treated him very well.</p> <p>Monitoring falls upon one of the deputy superintendent at the facility. This process is documented in the Prea Procedures Manual, Section 2.A.2.d which states, " Notify the Deputy Superintendent of Centralized Services (DSCS) when staff require monitoring due to report of sexual abuse or sexual harassment, or because of an expressed fear of retaliation due to cooperation with an investigation of inmate sexual abuse or sexual harassment, per PREA Standard 28 C.F.R. §115.67[a][c][e] and in accordance with Section 3 of this procedures manual.</p> <p>*115.67 (b) The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p>The agency employs multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Interviews with the Superintendent and the PREA Compliance Manager confirm that multiple strategies would be used to protect individuals from retaliation. Actions are documented on a form specifically designed to monitor retaliation.</p> <p>*115.67 (c) For at least 90 days following a report of sexual abuse, the agency shall monitor</p> |

the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, the agency: monitors the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff; monitors the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff; acts promptly to remedy any such retaliation; monitors any inmate disciplinary reports; monitors inmate housing changes; monitors inmate program changes; monitors negative performance reviews of staff; monitors reassignments of staff and the agency will continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. Interviews indicate that such monitoring is done and a form (copy supplied) is used to document monitoring.

*115.67 (d) In the case of inmates, such monitoring shall also include periodic status checks.

In the case of inmates, monitoring also includes periodic status checks. This was verified by the PREA Compliance Manager and documented on a form designed for this purpose.

*115.67 (e) If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency takes appropriate measures to protect that individual against retaliation. The superintendent confirmed that such action would be taken. There were no cases to review.

*115.67 (f) An agency 's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

Auditor is not required to audit this provision.

The determination for this item is MEETS STANDARD for the following reasons:

- > The agency policy is sufficiently detailed and accurate
- > The facility provided a form that they use to track retaliation.
- > The interviews supported the proper implementation of the standard.

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| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.68 (a) Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.</p> <p>Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of § 115.43. The agency's PREA Procedure Manual provides policy to the facility that meets the PREA standards. In Section 2.A.6 the policy says, "If an involuntary AC housing assignment is made in accordance with Subsection A.6.a. above, the Shift Commander shall clearly document on the DC-141, Part 1, (Other) Report, the following information: (1) the basis for the staff member's concern for the inmate's safety; (2) the other alternative means of separation that were explored; and (3) the reason why no alternative means of separation can be arranged.</p> <p>The facility provided a copy of a form that the facility uses to monitor services that an inmate would lose while in involuntary protective custody. During the past twelve months the facility reported that no inmates were placed in involuntary protective custody. During the tour of the Restricted Housing Unit the staff confirmed this. Interviews with Superintendent (Warden) indicated that he was familiar with this standard. There was nothing stated in any interviews that indicated that the facility had used involuntary protective custody in the last twelve months relating to sexual abuse incidents.</p> <p>A determination of MEETS STANDARD has been given for the following reasons:</p> <ul style="list-style-type: none"> > The agency policy was found to be accurate. > The facility uses a form to track restricted services. > The facility has not used IPC relating to a PREA complaint for the last twelve months and shows no propensity to do so. > Interviews confirm that the standard is understood by the warden. |

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| 115.71 | Criminal and administrative agency investigations |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1461 450">*15.71 (a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</p> <p data-bbox="252 499 1469 831">When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it does do so promptly, thoroughly, and objectively. The agency conducts such investigations for all allegations, including third party and anonymous reports. Section 5 of the PREA Procedures Manual states, "Every report, complaint, or allegation of sexual abuse and sexual harassment, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively." Investigators confirmed the policy and a review of reports found them to be satisfactory. A review of all of the PREA related reports from the last twelve months revealed that the reports were prompt thorough and objective.</p> <p data-bbox="252 880 1398 1003">*115.71 (b) Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.</p> <p data-bbox="252 1052 1477 1301">Where sexual abuse is alleged, the agency uses investigators who have received specialized training in sexual abuse investigations as required by 115.34. The Captain in charge of the facility investigators also confirmed the training. It should be noted that criminal complaints are investigated by the Pennsylvania State Police. Administrative investigations are conducted by the facility investigative staff. A training log for investigators was also provided as evidence for the standard.</p> <p data-bbox="252 1350 1461 1518">*115.71 (c) Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.</p> <p data-bbox="252 1568 1469 1816">Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. However, evidence required for criminal cases would be handled by the State Police. Investigators interview alleged victims, suspected perpetrators, and witnesses. Investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator. Investigators advised that these steps are taken. This was supported by a review of incident reports.</p> <p data-bbox="252 1865 1469 1989">*115.71 (d) When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.</p> <p data-bbox="252 2038 1485 2161">When the quality of evidence appears to support criminal prosecution, the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. While there were no substantiated</p> |

criminal complaints involving sexual abuse occurring over the last twelve months, the investigative staff confirmed that when the Pennsylvania State Police enter the facility to conduct a criminal investigation the facility investigators work closely with the PSP. It is the responsibility of the PSP to determine if the evidence is sufficient for criminal prosecution. Once the PSP has completed its investigation the facility investigators will complete a written, administrative investigation. A review of incident reports and interviews with staff indicate that investigations are conducted in a professional manner with consideration of physical evidence, witness interviews and the background of involved parties.

*115.71 (e) The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff. The agency investigates allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding. The PREA Procedures Manual, Section 5.A.6 states, "The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff. The Department shall NOT require an inmate who alleges unwanted or forced sexual abuse to submit to a polygraph examination or other truth telling device as a condition of proceeding with the investigation of such an allegation." Investigative personnel are aware of the policy and there was no indication in the reviewed reports that the policy was violated.

*115.71 (f) Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Administrative investigations are documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. An interview with the investigative supervisor confirmed that reports are always submitted when investigations are initiated. There was no evidence to the contrary that could be found.

*115.71 (g) Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

Criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. While there were no substantiated criminal complaints involving sexual abuse occurring over the last twelve months, the investigative staff confirmed that when the Pennsylvania State Police enter the facility to conduct a criminal investigation the

facility investigators work closely with the PSP. It is the responsibility of the PSP to determine if the evidence is sufficient for criminal prosecution. Once the PSP has completed its investigation the facility investigators will complete a written, administrative investigation. A review of incident reports and interviews with staff indicate that investigations are conducted in a professional manner with consideration of physical evidence, witness interviews and the background of involved parties.

*115.71 (h) Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

All substantiated allegations of conduct that appears to be criminal are referred for prosecution. Criminal prosecution falls within the authority of the Pennsylvania State Police. The facility's investigative unit works closely with the PSP and conducts an administrative investigation at the conclusion of the criminal investigation. No substantiated criminal events were investigated within the last year. The investigative supervisor confirmed this procedure.

*115.71 (i) The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The agency retains all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The agency maintains an extensive records retention schedule. In Section 1.E of the PREA Procedures Manual it is stated, " Each facility and Office of Special Investigations and Intelligence (OSII) shall be responsible to securely maintain such files and the Department shall retain all criminal and administrative agency investigative reports for as long as the alleged abuser is incarcerated or employed plus five additional years." There was no indication that the facility was violating this policy.

*115.71 (j) The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

The agency ensures that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation. Section 5.A.10 of the PREA Procedures Manual states. "The departure of the alleged victim or abuser from the employment or control of the facility or Department shall not provide a basis for terminating an investigation." The investigative supervisor confirms the policy and states that it would be followed if circumstances required it.

*115.71 (k) Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

Auditor is not required to audit this provision.

*115.71 (l) When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

When an outside entity investigates sexual abuse, the facility cooperates with outside investigators and endeavors to remain informed about the progress of the investigation. Section 5.D.4 of the PREA Procedures Manual states, " The Department shall fully cooperate in the investigation conducted by the PSP or other applicable outside law enforcement agency." All applicable interviewees confirmed the agency policy and their commitment to following the standard.

A determination of MEETS STANDARDS was assigned to this standard for the following reasons:

- > The agency has a written policy that supports all elements of the standard.
- > All of the reports for the last year were examined and found to be in compliance with the standard.
- > Staff interviews confirmed the observations for this standard.

| 115.72 | Evidentiary standard for administrative investigations |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.72 (a) The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The agency provides in its PREA Procedures Manual that the standard of evidence for administrative investigations is preponderance of the evidence. The staff confirmed that the policy was followed. There were no indications in the facility's investigative reports that the policy was not being followed. The PREA Procedures Manual, Section 5.A.9 states, "In administrative investigations, the Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated." Interviews confirmed compliance and a review of reports indicated no divergences from the policy.</p> <p>A MEETS STANDARDS was provided for the following reasons:</p> <ul style="list-style-type: none"> > Policy meets the standard. > Staff confirmed compliance. > There was no evidence to the contrary. |

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| 115.73 | Reporting to inmates |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1406 450">*115.73 (a) Following an investigation into an inmate 's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p data-bbox="252 499 1469 831">Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, the agency informs the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The agency has a policy that supports the standard in all its facets. A copy of that policy was provided and can be found in Section 8 of the PREA Procedures Manual. The agency also has a form that tracks the notifications to the inmates. During the past year the facility only made notifications on six of eight investigations, but it was determined that in one case the victim could not be determined and in the second case the complaining inmate was released and could not be located.</p> <p data-bbox="252 880 1374 958">*115.73 (b) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.</p> <p data-bbox="252 1008 1481 1346">If the agency did not conduct the investigation into an inmate’s allegation of sexual abuse in an agency facility, the agency requests the relevant information from the investigative agency in order to inform the inmate. The facility's security office is given the task of complying with this standard as indicated by the PREA Procedures Manual, Section 5.D.3.c. The policy states, "When a complaint is investigated by the PSP or other outside law enforcement agency, the facility Security Office shall be responsible for the following: c. request notification of the outcome of the investigation in order to notify the inmate." Notifications are documented with a form designed for such purpose.</p> <p data-bbox="252 1395 1474 1688">*115.73 (c) Following an inmate 's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (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 agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="252 1738 1474 2157">Following a inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, the agency subsequently informs the resident whenever: The staff member is no longer posted within the inmate’s unit. Following a inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, the agency subsequently informs the resident whenever: The staff member is no longer employed at the facility. Following a inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, the</p> |

agency subsequently informs the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility. Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, the agency subsequently informs the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. The PREA Procedures Manual, Section 8.A contains each of the previously articulated provisions. The notification form used by the agency also contains these items as a selection. Completed forms were provided as evidence of notification. The inmate signs for the notification, leaving no doubt of notification.

*115.73 (d) Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency subsequently informs the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility. Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency subsequently informs the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. Section 8.A.4 of the PREA Procedures Manual reflects these provisions. These notification provisions are also included on the notification form and acknowledged by signature of the inmate.

*115.73 (e) All such notifications or attempted notifications shall be documented.

The agency document all such notifications or attempted notifications. The agency produced signed forms to indicate compliance.

*115.73 (f) An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

Auditor is not required to audit this provision.

A determination of MEETS STANDARDS was provided for the following reasons:

- > The agency policy supports the standard.
- > Notifications are documented on a designated form and signed by the inmate notified.
- > The facility was able to provide a reasonable explanation for missed notifications.

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| 115.76 | Disciplinary sanctions for staff |
| | <p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1452 403">*115.76 (a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="252 459 1484 739">Staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Section 7.A of the PREA Procedures Manual states, "Any employee who violates the Department's zero tolerance policy by engaging in, failing to report, or knowingly condoning sexual abuse or sexual harassment of an inmate shall be subject to appropriate disciplinary or administrative action up to and including termination." The facility provided a copy of a disciplinary reprimand for sexual misconduct of a staff member.</p> <p data-bbox="252 795 1404 873">*115.76 (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p data-bbox="252 929 1420 1041">Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. This is confirmed and reiterated in Human Resources and Labor Relations Policy 4.1.1.1.</p> <p data-bbox="252 1097 1460 1299">*115.76 (c) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member 's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p data-bbox="252 1355 1484 1556">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. The agency provided two disciplinary records from the last twelve months for review.</p> <p data-bbox="252 1612 1484 1769">*115.76 (d) 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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p data-bbox="252 1825 1476 2150">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). 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 relevant licensing bodies. As documented in several areas throughout this report, the Pennsylvania State Police investigate criminal offenses and would be aware of all substantiated crimes. The agency has policy that requires notification of licensing bodies, this policy can be found in the PREA</p> |

Procedures Manual, Section 7.A.2 which states, "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, shall be reported to law enforcement agencies, unless the activity was not clearly criminal, and to any relevant licensing bodies."

The facility has policy in its PREA Compliance Manual and a labor relations bulletin that complies with this standard. There are no cases where the agency would be required to report criminal conduct to law enforcement agencies after a perpetrator has resigned. The facility indicated that there were two discipline cases involving staff and a review of the cases revealed that they were handled within PREA standards.

A determination of MEETS STANDARDS has been provided for the following reasons:

- > The agency has policy that satisfies the standard.
- > Because the PSP investigates all criminal events, notification of law enforcement is moot. However, there is policy that states such notifications would be made.
- > The two disciplinary cases reviewed from the the last twelve months meet the standard.

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| 115.77 | Corrective action for contractors and volunteers |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1437 450">*115.77 (a) Any contractor or volunteer who engages in sexual abuse is 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.</p> <p data-bbox="252 499 1426 701">Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates. Any contractor or volunteer who engages in sexual abuse is reported to: Law enforcement agencies (unless the activity was clearly not criminal). Any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies. The PREA Procedures Manual states in Section 7.A:</p> <p data-bbox="252 752 970 786">Contractors and volunteers are subject to the following:</p> <ol data-bbox="252 797 1481 1133" style="list-style-type: none"> 1. when an allegation is made involving a contractor or volunteer, this person shall 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; and 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. <p data-bbox="252 1182 1469 1473">No referral were required during the last twelve months, but the agency does have sufficient policy to respond to a qualifying situation. The agency PREA Procedures Manual includes policy that is compliant with all elements of this standard. Since the Pennsylvania State Police investigate criminal allegations, the notification of a law enforcement agency is not necessary. There were no incidents of contractor or volunteer misconduct during the last twelve months. The interview with the facility superintendent indicated that all requirements related to this standard would be followed.</p> <p data-bbox="252 1525 1474 1648">*115.77 (b) The facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p data-bbox="252 1697 1461 1899">In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates. Section 7.A of the PREA Procedures Manual provides supporting policy and the interview with the superintendent provides support for the standard.</p> <p data-bbox="252 1951 1257 1984">A determination of MEETS STANDARDS was given for the following reasons:</p> <ul data-bbox="252 1995 1098 2119" style="list-style-type: none"> > Policy supports the standard. > A law enforcement agency investigates all criminal complaints, > Leadership interviews supported compliance with the standard. |

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| 115.78 | Disciplinary sanctions for inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.78 (a) Inmates shall be subject to disciplinary sanctions pursuant to a 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.</p> <p>Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process. This is supported by the PREA Procedures Manual (PPM), Section 7.C.1 stating, "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." The PREA Compliance advised that there were no disciplinary cases involving inmate sexual misconduct in the past year.</p> <p>*115.78 (b) 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.</p> <p>Sanctions are 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. Section 7.C.2 of the PPM states, " 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. There were no cases to review, but the superintendent confirmed the standard during the interview.</p> <p>*115.78 (c) The disciplinary process shall consider whether an inmate 's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.</p> <p>When determining what types of sanction, if any, should be imposed, the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. The PPC, Section 7.C.3 states, "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." No reports from the past year were available, but the warden confirmed the standard.</p> <p>*115.78 (d) If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Section 7.C.4 of the PPM states, "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</p> |

part of the sanctions or as a condition to access programming or other benefits." Mental health staff confirmed this procedure.

*115.78 (e) The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

The agency disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Section 7.C.5 of the PPC states, "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."

*115.78 (f) 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.

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 does NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The PPM in Section 7.C.6 states, " 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."

*115.78 (g) An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

The agency always refrains from considering non-coercive sexual activity between inmates to be sexual abuse. The PPM, Section 7.C.7 states, "The Department prohibits all sexual activity between inmates and may discipline inmates for such activity. The Department shall not deem such activity to constitute sexual abuse if the Department, through the investigative process, determines that the activity is not coerced or forced."

The facility provided written support for this standard although it was not required. All conversations with the facility staff indicated that the policy was know and would be supported, if circumstances warranted. While there was little additional information available to support compliance with this standard it should be noted that the demonstrated a propensity to adhere to policy and there was no reason to believe that this directive would not be followed.

A determination of MEETS STANDARDS was provided for the following reasons:

- > Written policy supports the standard.
- > Staff interviews indicated that the policy would be followed.
- > There were no no observations that would indicate that the facility was operating contrary to the stated policy.

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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.81 (a) If the screening pursuant to § 115.41 indicates that a prison/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 or mental health practitioner within 14 days of the intake screening.</p> <p>If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensures that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. The PREA Procedures Manual, Section 2.D.2 states, "If the screening pursuant to PREA Standard 28 C.F.R. §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 or mental health practitioner within 14 days of the intake screening or sooner, if clinically indicated." The agency provided further documentation of compliance in the form of a printout and interview form used to initiate the required services. Medical staff, who perform screening, confirmed the practice. The Psychology Department has a tracking system which identifies referrals and monitors the progress of those who desire additional services.</p> <p>*115.81 (b) If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. Section 2.D.3 states, "If the screening pursuant to PREA Standard 28 C.F.R. §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, or sooner, if clinically indicated. In addition, when information becomes available relating to perpetration of inmate-on-inmate sexual abuse history, a mental health evaluation shall be conducted on these abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners." The facility also provided a log and a referral form in support of the standard. The medical staff member performing screening confirmed the practice. The Psychology Department has a tracking system which identifies referrals and monitors the progress of those who desire additional services.</p> <p>*115.81 (c) If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p>NA - SCI Mercer is a prison.</p> <p>*115.81 (d) Any information related to sexual victimization or abusiveness that occurred in an</p> |

institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. The PPM, Section 2.D.4 states, "Any information related to sexual victimization or abusiveness occurring in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans, security and management decisions, including housing, bed placement, work, education, and program assignments, or otherwise required by Federal, State, or local law." The confidential details of the screening report, known at this facility as the PRAT, are not generally available to staff outside of the medical department. Screening is done by medical personnel and is treated with the security of other health records.

*115.81 (e) 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.

Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. The PPM, Section 2.D.5 states, "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, Mental Health Informed Consent Form shall be used for this purpose in accordance with Department policy 13.8.1, "Access to Mental Health Care." 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." A copy of the informed consent form was provided as support for the standard.

The determination provided is MEETS STANDARD for the following reasons:

- > The agency has policy that supports the standard.
- > The facility uses a number of forms and logs to track and monitor the standard.
- > Staff interviews were supportive of compliance to the standard.

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| 115.82 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.82 (a) Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.</p> <p>Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. The PREA Procedures Manual (PPM), Section 4.D.1.a states, "Alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment." The alleged victims are removed to a community hospital for treatment. Staff interviews were supportive of the finding and staff advised that they would follow the policy when the situation arises.</p> <p>*115.82 (b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.</p> <p>If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, security staff first responders take preliminary steps to protect the victim pursuant to § 115.62. Security staff first responders immediately notify the appropriate medical and mental health practitioners. The PPM, Section 4.D.2 states, "If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the alleged victim, in accordance with Prison Rape Elimination Act (PREA) Standard 28 C.F.R. §115.62 and shall immediately notify the appropriate medical and mental health practitioners." Sexual assault victims are transported to a local community hospital equipped to handle sexual treatment and forensic investigation. Staff interviews were supportive of the finding and staff advised that they would follow the policy when the situation arises.</p> <p>*115.82 (c) Inmate victims of sexual abuse while incarcerated 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.</p> <p>Inmate victims of sexual abuse are 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. Section 4.D.2.g of the PPM states, "alleged victim 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. "</p> |

Again, it should be noted that sexual assault victims are treated at a community hospital receiving the same quality care as the local population. Staff interviews were supportive of the finding and staff advised that they would follow the policy when the situation arises.

*115.82 (d) 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.

Treatment services are 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. Section 4.D.1.c confirms that the agency complies with the standard stating, "Treatment services shall be provided to the alleged victim without financial cost and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident." Staff interviews were supportive of the finding and staff advised that they would follow the policy when the situation arises.

A determination of MEETS STANDARD was provided for the following reasons:

- > Agency policy properly supports the standard, though written policy is not required by the standard
- > Emergency treatment for sexual assault cases is performed at a community hospital prepared to provide such services.
- > Staff interviews were supportive of the finding.
- > Reports and checklists were provided which supported compliance with the standard.

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| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.83 (a) 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.</p> <p>The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. Section 4 of the PREA Procedures Manual (PPM) states in its preamble, " 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." The entire section is devoted to the facility's response to sexual assault. Medical staff confirmed their commitment and knowledge of this standard.</p> <p>*115.83 (b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.</p> <p>The evaluation and treatment of such victims includes, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Section 4.F.3 of the PPM states, "The evaluation and treatment of alleged victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody." Discussions with the medical staff support the standard.</p> <p>*115.83 (c) The facility shall provide such victims with medical and mental health services consistent with the community level of care.</p> <p>The facility provides victims with medical and mental health services consistent with the community level of care. Section 4.D.1.d of the PPM states, "All facilities shall provide alleged victims with medical and mental health services consistent with the community level of care." Primary care for sexual assault victims is conducted at a local hospital which provides these same services to the community at large. Medical staff confirmed their commitment and knowledge of this standard.</p> <p>*115.83 (d) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.</p> <p>NA - SCI Mercer is an all male facility.</p> <p>*115.83 (e) If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.</p> |

NA - SCI Mercer is an all male facility.

*115.83 (f) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. According to PPM, Section 4.D.2.F.4, "Regardless of when an allegation of vaginal/oral/anal penetration occurred, the facility physician shall ensure that testing of the alleged victim for sexually transmitted infections is completed. At a minimum, this testing shall include the following: (a) HIV; (b) Gonorrhea; (c) Hepatitis C; (d) Hepatitis B; (e) Chlamydia trachomatis; (f) Syphilis; (g) Bacterial Vaginosis and Trichomoniasis; (h) pregnancy test (females only); and (i) other diseases as per the physician order." Mental staff confirmed their commitment and knowledge of this standard.

*115.83 (g) 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.

Treatment services are 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. The PPM, Section 4.D.1.C states, " Treatment services shall be provided to the alleged victim without financial cost and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident."

*115.83 (h) All prisons attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

The facility is a prison and attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. The PPM, Section 2.D.3 states, "In addition, when information becomes available relating to perpetration of inmate-on-inmate sexual abuse history, a mental health evaluation shall be conducted on these abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners." Mental health and medical staff confirmed their commitment and knowledge of this standard.

The determination of MEETS STANDARD was provided for the following reasons:

- > Agency policy adequately supports the standard even though written policy is not required.
- > Staff interviews supported the finding.
- > While there were documented cases to review, there was no evidence to indicate that the facility would operate contrary to stated policy.

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| 115.86 | Sexual abuse incident reviews |
| | <p data-bbox="252 168 925 201">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 1476 443">*115.86 (a) The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.</p> <p data-bbox="252 499 1476 913">The facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Section 6.A.1 of the PPM states, "Each facility shall conduct a Sexual Abuse Incident Review (SAIR) at the conclusion of every sexual abuse investigation where the allegation was substantiated or unsubstantiated whether the investigation was conducted by the facility Security Office or by the Office of Special Investigations and Intelligence (OSII). 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 OSII that the investigation was deemed satisfactory." The facility provided a copy of its evaluation form that is used to track the review of each case.</p> <p data-bbox="252 969 1348 1048">*115.86 (b) Such review shall ordinarily occur within 30 days of the conclusion of the investigation.</p> <p data-bbox="252 1104 1476 1350">Reviews ordinarily occur within 30 days of the conclusion of the investigation. Again, this is supported by Section 6.A.1 of the PREA Procedure Manual (PPM) which states, "The review shall occur within 15 working days of the receipt of the notification from OSII that the investigation was deemed satisfactory." The facility provided a copy of its evaluation form that is used to track the review of each case. The review form contains dates to track the timeliness of the review.</p> <p data-bbox="252 1406 1444 1485">*115.86 (c) The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.</p> <p data-bbox="252 1529 1476 2033">The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The PPM, Section 6.B.1 provides for the assignment of individuals to review team, as follows: The Prison Rape Elimination Act (PREA) Compliance Manager (PCM) shall chair the SAIR Committee. The PCM, in collaboration with the Facility Manager, shall determine the exact composition of the committee based on the nature of the incident. At a minimum, the SAIR Committee shall consist of the following: a. Deputy Superintendent for Centralized Services (DSCS); b. Deputy Superintendent for Facilities Management (DSFM); c. Licensed Psychology Manager (LPM)/designee; d. Corrections Health Care Administrator; e. Security Office representative; and f. Major of Unit Management or Major of the Guard. The review team's names are included on the review form. Staff interviews supported compliance with the standard.</p> <p data-bbox="252 2089 1444 2168">*115.86 (d) The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual</p> |

abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager. The required interviews supported compliance with the standard.

*115.86 (e) The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

The facility implements the recommendations for improvement, or document its reasons for not doing so. The PPM, Section 6.C.3 states, "The facility shall implement the recommendations for improvement or shall document its reasons for not doing so on the PREA Sexual Abuse Incident Review Plan of Action provided by the Central Office PREA ARC. The completed PREA Sexual Abuse Incident Review Plan of Action shall be forwarded from the PCM to the CR, DOC PREA Reports email address with copies provided to the Executive Deputy Secretary and Regional Deputy Secretary." The incident review has attached a supplementary document that documents the requirements in this standard.

The agency policy provided in its PREA Procedure Manual clearly complies with all aspects of the standard. Additionally, the agency has developed a detailed form that documents an intensive review and clearly list all staff members involved in that review. The review process far exceeds the requirements of the standard with questions that delve into all aspects of the allegation and subsequent investigation. A copy of a completed review was provided. Additionally, that facility review is approved by the agency upon its completion. The required staff interviews were conducted and uniform confirmation of agency procedures was provided.

A determination of Exceeds Standard has been provided for the following reasons:

- > Agency policy reflects the standard even though written policy is not required.
- > The incident review is controlled by a detailed form that exceeds the standards requirements.
- > The review is approved at the agency level which exceeds the standards requirement.
- > All interviews were supportive of the standard.
- > There were no negative indications discovered during the tour and document review.

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| 115.87 | Data collection |
| | <p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1406 443">*115.87 (a) The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p data-bbox="252 499 1477 831">The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. Section 8.A states, "The Bureau of Standards, Audits, and Accreditation (BSAA) shall collect accurate, uniform data for every allegation of sexual abuse at facilities under the Department's direct control using a standardized instrument and set of definitions." The agency provided copies of the agency's 2015 Annual PREA Report and the 2015 Survey of Sexual Violence (SSV) as supporting documentation. An automated tracking system containing incident data was also demonstrated to the audit team.</p> <p data-bbox="252 887 1374 958">*115.87 (b) The agency shall aggregate the incident-based sexual abuse data at least annually.</p> <p data-bbox="252 1014 1469 1301">The agency aggregates the incident-based sexual abuse data at least annually. Section 8.A.4 states, "The Department shall make all aggregated sexual abuse data information listed in Subsections A.3.a.-f. above, from facilities under its direct control and contracted facilities, readily available to the public through the Department website, at least annually." The agency provided copies of the agency's 2015 Annual PREA Report and the 2015 Survey of Sexual Violence (SSV) as supporting documentation. An automated tracking system containing incident data was also demonstrated to the audit team.</p> <p data-bbox="252 1357 1477 1473">*115.87 (c) The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p data-bbox="252 1529 1453 1691">The incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. Section 1.A.3 indicates that data required for the SSV must be captured. The completed 2015 SSV was provided as evidence of compliance with the standard.</p> <p data-bbox="252 1747 1445 1863">*115.87 (d) The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="252 1919 1477 2116">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 PPM, Section 8.A.2 states, "All data information shall be maintained, reviewed, and collected as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews."</p> |

*115.87 (e) The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

The agency also obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. Section 1.A.2 of the PPM also states, "Incident-based and aggregated data will also be collected from every facility the Department contracts with for the confinement of its inmates."

*115.87 (f) Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

The agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30. The facility has provided a copy of the 2105 SSV as support for the standard.

A determination of MEETS STANDARD was provided for the following reasons:

- > The agency has a policy supporting the standard.
- > The agency provided documents that fulfilled the requirements of the standard.

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| 115.88 | Data review for corrective action |
| | <p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1455 528">*115.88 (a) The agency shall review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.</p> <p data-bbox="252 584 1445 913">The agency reviews data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: identifying problem areas; taking corrective action on an ongoing basis; preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. All required interviews supported the standard. The facility provided a copy of the previous year's report as an indication of compliance. All interviews with staff members questioned regarding this standard provided supportive responses.</p> <p data-bbox="252 969 1469 1081">*115.88 (b) Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.</p> <p data-bbox="252 1137 1433 1294">The agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse. The 2015 report completed in response to this standard was provided as evidence of compliance.</p> <p data-bbox="252 1350 1426 1429">*115.88 (c) The agency's report shall be approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means.</p> <p data-bbox="252 1485 1481 1641">The agency's annual report is approved by the agency head and made readily available to the public through its website. Section 1.A of the PPM provides policy relating to the annual report. The 2015 report was provided a s evidence of compliance. The agency's website was examined and the previous reports were made available.</p> <p data-bbox="252 1697 1469 1809">*115.88 (d) The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.</p> <p data-bbox="252 1865 1477 2022">The agency indicates the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility. The agency provides this procedure in its PPM, Section 1.A. A copy of the previous years report was provided as evidence of compliance</p> <p data-bbox="252 2078 1281 2112">A determination of MEETS STANDARD was provided for the following reasons:</p> <ul data-bbox="252 2123 994 2157" style="list-style-type: none"> > The agency policy was in agreement with the standard. |

- > The annual reports for the last three years appeared on the agency's website and contained sufficiently compliant information.
- > The agency has a document retention schedule in its PREA policy.
- > All interviews were supportive of the standard.

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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>*115.89 (a) The agency shall ensure that data collected pursuant to § 115.87 are securely retained.</p> <p>The agency ensures that data collected pursuant to § 115.87 are securely retained. The PREA Procedures Manual (PPM), Section 1 provides the agency's reporting policy. The PREA Coordinator's interview provided additional support for compliance with the standard.</p> <p>*115.89 (b) The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.</p> <p>The agency makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website. The agency's website was examined and found to comply with the standard.</p> <p>*115.89 (c) Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.</p> <p>The agency removes all personal identifiers before making aggregated sexual abuse data publicly available. A review of the reports available on the website contained no personal data.</p> <p>*115.89 (d) The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</p> <p>The agency maintains sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise. The agency has a PREA Procedures Manual that contains policy that reflects all aspects of this standard. The policy contains a retention policy that governs the proper storage of PREA related documentation. The plan calls for the required ten year retention.</p> <p>The determination of MEETS STANDARDS was provided for the following reasons:</p> <ul style="list-style-type: none"> > The agency provided appropriate policy. > The agency website contains the required information without redactions or confidential information. > The agency provided a written retention and information management policy. > No information contrary to PREA standards could be found. |

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| 115.401 | Frequency and scope of audits |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The agency has thirty-nine (39) facilities that are required to be audited under PREA standards. While the agency did not audit one-third of its facilities in each of the three years of the first audit cycle, it did complete all of the audits within the three year period. The reports appear on the agency's website located at http://www.cor.pa.gov/General%20Information/PrisonRapeEliminationAct(PREA)/Pages/DOC-Audits. The audit team was permitted to enter all areas within the facility without restriction and the staff freely opened any locked areas when requested. The staff at the facility provided copies of any documents requested. Private interviews were conducted with every inmate of staff person requested. The audit conducted a total of ninety interviews. Notices were posted throughout the facility announcing the audit, but no correspondence was received. The auditors did consider this to be odd based on past experience, however, after the audit this was more easily accepted. During the interviews several inmates stated that they felt this facility was very safe and that they had no complaints regarding its response to PREA.</p> <p>A determination of MEETS STANDARDS was provided based on the following:</p> <ul style="list-style-type: none"> > All facilities were audited during the first three-year cycle. > The audit team had free, unimpeded access to the facility, staff, and inmate population > Inmates were allowed to communicate with the audit team if they desired to do so. |

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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>All reports are available on: http://www.cor.pa.gov/General%20Information/PrisonRapeEliminationAct(PREA)/Pages/DOC-Audits.</p> |

Appendix: Provision Findings

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

| 115.11 (b) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
|------------|--|-----|
| | Has the agency employed or designated an agency-wide PREA Coordinator? | yes |
| | Is the PREA Coordinator position in the upper-level of the agency hierarchy? | yes |
| | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities? | yes |

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

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

| 115.12 (b) | Contracting with other entities for the confinement of inmates | |
|------------|--|-----|
| | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) | yes |

| 115.13 (a) | Supervision and monitoring | |
|------------|---|-----|
| | Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into | yes |

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| | consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? | |
| | Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? | yes |
| | Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ? | yes |

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

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

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

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

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

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

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

| 115.15 (b) | Limits to cross-gender viewing and searches | |
|------------|---|----|
| | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) | na |
| | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.) | na |

| 115.15 (c) | Limits to cross-gender viewing and searches | |
|------------|--|-----|
| | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? | yes |
| | Does the facility document all cross-gender pat-down searches of female inmates? | yes |

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

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

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

| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient | |
|------------|--|-----|
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all | yes |

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

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

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

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

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

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

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

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

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

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

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

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

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

| 115.21 (a) | Evidence protocol and forensic medical examinations | |
|------------|---|-----|
| | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |

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

| 115.21 (c) | Evidence protocol and forensic medical examinations | |
|------------|---|-----|
| | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? | yes |
| | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? | yes |
| | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? | yes |
| | Has the agency documented its efforts to provide SAFEs or SANEs? | yes |

| 115.21 (d) | Evidence protocol and forensic medical examinations | |
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| | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? | yes |
| | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? | no |
| | Has the agency documented its efforts to secure services from rape crisis centers? | yes |

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

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

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

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

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

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

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

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

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

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

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

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

| | | |
|-------------------|---|-----|
| 115.32 (c) | Volunteer and contractor training | |
| | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? | yes |

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

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

| | | |
|-------------------|--|-----|
| 115.33 (c) | Inmate education | |
| | Have all inmates received such education? | yes |
| | Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? | yes |

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

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

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

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

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

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

| 115.35 (a) | Specialized training: Medical and mental health care | |
|------------|--|-----|
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? | yes |
| | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? | yes |

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

| | | |
|-------------------|---|-----|
| 115.35 (c) | Specialized training: Medical and mental health care | |
| | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? | yes |

| | | |
|-------------------|---|-----|
| 115.35 (d) | Specialized training: Medical and mental health care | |
| | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? | yes |
| | Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? | yes |

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

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

| 115.41 (c) | Screening for risk of victimization and abusiveness | |
|------------|---|-----|
| | Are all PREA screening assessments conducted using an objective screening instrument? | yes |

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

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

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

| 115.41 (g) | Screening for risk of victimization and abusiveness | |
|------------|--|-----|
| | Does the facility reassess an inmate's risk level when warranted due to a: Referral? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a: Request? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? | yes |
| | Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? | yes |

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

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

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

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

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

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

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

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

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

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

| 115.43 (b) | Protective Custody | |
|------------|---|-----|
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? | yes |

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

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

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

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

| | | |
|-------------------|--|-----|
| 115.51 (b) | Inmate reporting | |
| | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? | yes |
| | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? | yes |
| | Does that private entity or office allow the inmate to remain anonymous upon request? | yes |
| | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? | no |

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

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

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

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

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

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

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

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

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

| 115.53 (a) | Inmate access to outside confidential support services | |
|------------|---|-----|
| | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? | yes |
| | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? | no |
| | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? | yes |

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

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

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

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

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

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

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

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

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

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

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

| | | |
|-------------------|--|-----|
| 115.63 (c) | Reporting to other confinement facilities | |
| | Does the agency document that it has provided such notification? | yes |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

| | | |
|-------------------|---|-----|
| 115.73 (e) | Reporting to inmates | |
| | Does the agency document all such notifications or attempted notifications? | yes |

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

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

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

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

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

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

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

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

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

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

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

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

| | | |
|-------------------|---|----|
| 115.78 (g) | Disciplinary sanctions for inmates | |
| | Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) | no |

| | | |
|-------------------|---|-----|
| 115.81 (a) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? | yes |

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

| | | |
|-------------------|---|-----|
| 115.81 (c) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? | yes |

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

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

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

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

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

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

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

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

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

| | | |
|-------------------|--|----|
| 115.83 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) | na |

| | | |
|-------------------|--|----|
| 115.83 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) | na |

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

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

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

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

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

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

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

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

| 115.87 (a) | Data collection | |
|------------|--|-----|
| | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? | yes |

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

| | | |
|-------------------|--|-----|
| 115.87 (c) | Data collection | |
| | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? | yes |

| | | |
|-------------------|--|-----|
| 115.87 (d) | Data collection | |
| | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? | yes |

| | | |
|-------------------|--|-----|
| 115.87 (e) | Data collection | |
| | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) | yes |

| | | |
|-------------------|--|-----|
| 115.87 (f) | Data collection | |
| | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) | yes |

| | | |
|-------------------|--|-----|
| 115.88 (a) | Data review for corrective action | |
| | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? | yes |
| | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? | yes |
| | Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? | yes |

| | | |
|-------------------|---|-----|
| 115.88 (b) | Data review for corrective action | |
| | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse? | yes |

| | | |
|-------------------|--|-----|
| 115.88 (c) | Data review for corrective action | |
| | Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? | yes |

| | | |
|-------------------|---|-----|
| 115.88 (d) | Data review for corrective action | |
| | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? | yes |

| | | |
|-------------------|--|-----|
| 115.89 (a) | Data storage, publication, and destruction | |
| | Does the agency ensure that data collected pursuant to § 115.87 are securely retained? | yes |

| | | |
|-------------------|---|-----|
| 115.89 (b) | Data storage, publication, and destruction | |
| | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? | yes |

| | | |
|-------------------|--|-----|
| 115.89 (c) | Data storage, publication, and destruction | |
| | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? | yes |

| | | |
|-------------------|---|-----|
| 115.89 (d) | Data storage, publication, and destruction | |
| | Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? | yes |

| | | |
|--------------------|--|-----|
| 115.401 (a) | Frequency and scope of audits | |
| | During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once.? (N/A before August 20, 2016.) | yes |

| | | |
|--------------------|---|----|
| 115.401 (b) | Frequency and scope of audits | |
| | During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited? | no |

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

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

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

| | | |
|--------------------|---|-----|
| 115.401 (n) | Frequency and scope of audits | |
| | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | yes |

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|--------------------|--|-----|
| 115.403 (f) | Audit contents and findings | |
| | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) | yes |