

PREA Facility Audit Report: Final

Name of Facility: SCI Albion

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/27/2017

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: Yana Pusich	Date of Signature: 05/27/2017

AUDITOR INFORMATION	
Auditor name:	Pusich, Yana
Address:	
Email:	Yana.Pusich@wisconsin.gov
Telephone number:	
Start Date of On-Site Audit:	04/10/2017
End Date of On-Site Audit:	04/11/2017

FACILITY INFORMATION	
Facility name:	SCI Albion
Facility physical address:	10745 Route 18, Albion, Pennsylvania - 16475
Facility Phone	814-756-5778
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:	Valarie C. Kusiak	Title:	CCPM
Email Address:	vkusiak@pa.gov	Telephone Number:	814-756-5778 [REDACTED]

Warden/Superintendent			
Name:	Michael Clark	Title:	Superintendent
Email Address:	mclark@pa.gov	Telephone Number:	814-756-5778 [REDACTED]

Facility PREA Compliance Manager			
Name:	Valerie Kusiak	Email Address:	vkusiak@pa.gov

Facility Health Service Administrator			
Name:	Jeri Smock	Title:	Correctional Health Care Administrator
Email Address:	jesmock@pa.gov	Telephone Number:	814-756-5778 [REDACTED]

Facility Characteristics			
Designed facility capacity:	2280		
Current population of facility:	2231		
Age Range	Adults: 18-92	Youthful Residents: NA	
Facility security level/inmate custody levels:	1-5		
Number of staff currently employed at the facility who may have contact with inmates:	569		

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:	[REDACTED]	Telephone Number:	[REDACTED]

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

AUDIT FINDINGS

Narrative:

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

The Prison Rape Elimination Act (PREA) on-site audit of SCI Albion located at 10745 PA-18, Albion, PA 16475 was conducted on April 10-11, 2017 by Yana Pusich, from Oshkosh, Wisconsin, a U.S. Department of Justice Certified PREA Auditor for adult facilities. Pre-audit preparation included a thorough review of all documentation and materials submitted by the facility along with the data included in the completed Pre-Audit Questionnaire (PAQ). The documentation reviewed included agency policies, procedures, forms, training materials, electronic communications, institution organizational chart, posters, brochures, handouts and other relevant materials that were provided by SCI Albion to demonstrate compliance with the PREA standards. Additionally, prior documented PREA audit was reviewed by accessing the information through the public website. Since the submission of the PAQ until the time of the on-site audit this auditor was in frequent electronic communication with SCI Albion requesting clarification/explanation of the submitted materials in effort to learn and better understand the procedures and operations of the audited facility.

SCI Albion PCM was instructed to provide a notice of the PREA audit to all staff and inmates. The notice form was provided to the facility and contained contact information for the auditor, informing SCI Albion staff and inmates that confidential correspondence may be submitted to the listed address. Proof that this audit notice was posted throughout the facility was not requested, as the auditor received confidential correspondence from three inmates at the facility. This correspondence was reviewed and the inmates were interviewed during the on-site portion of the audit. Two of the three letters contained allegations of inmate-on-inmate sexual harassment, these were provided to the facility PCM for investigative follow up.

On April 7, 2017 prior to the on-site portion of the audit, telephone interviews were conducted with a SANE from St. Vincent's Medical Center located at 232 West 25 St, Erie, PA; and a counselor from the Crime Victims Center of Erie County located at 125 W 18th street, Erie, PA. The interviewed staff provide SANE care and counseling/support services to the victims who allege sexual abuse at SCI Albion and confirmed that agreements are in place to provide such services.

During the on-site audit of the facility this auditor was accompanied by Robin Diebold from Racine, Wisconsin, a U.S. Department of Justice Certified PREA Auditor for adult facilities. Ms. Diebold assisted in collecting information during the audit tour, as well as conducting interviews with staff and inmates. All of the information gathered by Ms. Diebold was communicated to Ms. Pusich- the primary auditor for SCI Albion. During the two days of the on-site audit, the auditor was provided access to any and all areas of the institution. Areas to conduct private interviews with staff and inmates were also provided. Formal interviews were conducted with facility staff, inmates and contractors. The auditor held formal interviews with one inmate from each of the housing units (total 10), as well as informal interviews with seven inmates during the tour of the facility. Additionally, formal interviews were held with one inmate representing each of the following categories: Limited English Proficiency inmates; Transgender,

intersex, gay and bisexual inmates; Inmates who reported a sexual abuse; and Inmates who disclosed sexual victimization during risk screening. The total number of interviewed inmates during the on-site audit was 21. While the sample of inmates depicts 9.4% of the total population (2231 inmates at the time of the on-site audit), it is considered to be sufficiently representative of the population as a whole.

Stratified sampling and random sampling methods were utilized in the selection of candidates for the interviews. Stratified sampling technique consists of dividing the entire population into different subgroups, then randomly selecting the final subjects proportionally from the different subgroups. Stratified sampling was used in selection of candidates from the following inmate subgroups: inmates who reported sexual victimization; disabled/LEP inmates; transgender and intersex inmates, gay, and bisexual inmates; inmates who discussed sexual victimization during risk screening. Interview response rate was 100%, as no inmates refused to answer the auditors' questions.

Staff interviews included random selection of three security personnel representing all three shifts (1st shift 0600-1400; 2nd shift 1400-2200; and 3rd shift 2200-0600) and a non-security staff member. During the on-site tour, informal interviews with seven offices/sergeants were held. Stratified sampling was used in selection of one candidate from each of the following staff subgroups: Intermediate- or higher-level facility staff; Medical and mental health staff; Human Resources staff; SAFE and SANE providers; Volunteers and contractors who have contact with inmates; Investigative staff; Staff who perform screening for risk of victimization and abusiveness; Staff who supervise inmates in segregated housing; Staff on the incident review team; Designated staff member charged with monitoring retaliation; First responders, both security and non-security staff; and Intake staff. Also interviewed were the Institution Superintendent, Agency PREA Coordinator and PREA Compliance Manager. The total number of interviewed staff during the on-site audit was 25. Interview response rate was 100%, as no staff refused to answer the auditors' questions.

DOJ recommended protocols were used to interview staff and inmates. Inmates were questioned on the knowledge of their rights to be free from sexual victimization; institution reporting mechanisms to report instances of sexual abuse or sexual harassment and other general knowledge of protection afforded by the PREA. Staff were questioned on their responsibility to respond to allegations of inmate sexual abuse and sexual harassment in confinement; training related to PREA incidents; response protocols; reporting mechanisms available to staff and inmates; as well as overall knowledge of the agency's zero tolerance policy.

Tour of the facility took place on April 10, 2017. The auditors were accompanied by by PCM Valerie Kusiak, PREA Administrative Officer Brenda Atkin, PREA Lt. Tricia Bashor and PCM Rene Adams from SCI Pittsburgh. The auditors visited all areas of the institution, including the housing units, Administrative areas, Commissary, Dietary, Activities Building, Education Building, Control area, Visiting room, Maintenance, Laundry, Medical and structures accessible to inmates outside the fenced perimeter. Observations related to PREA posters placement, audit notices, physical layout of the structures, placement of the video monitoring equipment were made. It was noted that subsequent to the prior PREA audit held for this facility in the last 12 months, significant improvements were made to ensure presence of video monitoring of areas and activities to aid in prevention of inmate sexual victimization. Specific observations relate to the abundance and efficacy of camera placement in Dietary and Commissary. Additionally, while the Laundry area is sufficiently monitored with the use of existing equipment, the facility has future plans on installing additional cameras to assist in supervision efforts.

During the tour observations were made regarding existing blind spots on the housing units, Auto Shop,

Central Plant, and the Warehouse, as noted below:

1. Units A, B, C, D, E and F each have a laundry room which is staffed by an inmate worker who prepares clothing distribution. The laundry room entrance door is in direct line of sight from the Sergeant's desk, however, once inside, there is a secondary room that does not allow for monitoring of inmate activities. The laundry room door remains open when the inmate worker is inside. Through the conversations with inmates and staff and actual observations of the unit operations it was determined that it is frequent that staff are absent from the Sergeant's desk, while access to the laundry room remains unmonitored. This provides for an easy access to an unsupervised area and creates risk for sexual victimization of inmates. In discussion with the institution management and PCM the following remedies are offered. Institution of one of the suggested remedies, or a comparable alternative, will be sufficient in addressing this issue:

- a. Remove the clothing distribution from the laundry room to another area, rendering the room inaccessible for inmates.
- b. Secure the secondary room inside the main laundry room making it inaccessible to inmates. There will be sufficient line of sight from the Sergeant's desk into the remaining area.
- c. Install video monitoring equipment in the room with direct feed to the Sergeant's desk.

It should be noted that on 5/4/2017 SCI Albion provided documentation that the secondary room inside the laundry room on Units A, B, C, D, E and F has been made inaccessible to the inmates. SCI Albion provided a memorandum to that effect and photographic evidence of the laundry room, documenting that the secondary room has been emptied. This notification is sufficient to ensure compliance.

2. Observation of G Unit operations revealed that the unit consists of three pods, with two side pods angled away from the middle pod. This is a level 2 security unit, where inmates are issued room keys to access their assigned rooms. Staff supervision of this unit consists of two officers who do not have a direct line of sight to all three pods. This provides for an easy access to unsupervised areas and creates risk for sexual victimization of inmates. In discussion with the institution management and PCM the following remedies are offered. Institution of one of the suggested remedies, or a comparable alternative, will be sufficient in addressing this issue:

- a. Increase levels of supervision by adding a third officer
- b. Increase the frequency of security rounds from once every hour to once every 30 minutes.

It should be noted that on 5/4/2017 an Addendum to G Unit post orders was received from SCI Albion modifying the expectations of security rounds to ensure patrol of the housing unit to provide one complete unit tour once every half hour. This notification is sufficient to ensure compliance.

3. Tour of Central Plant revealed that no monitoring equipment is present in the building. This building is located outside of the secure perimeter of the institution and at this time only one inmate has access to this building- a janitor who is a level 2 inmate on a work-release duty. Due to the physical lay-out of this area, a great number of overhead vents, pipes and equipment, it is not recommended that installation of video monitoring equipment would remedy the potential risk of inmate sexual victimization. In discussion with the institution management and PCM it is offered that elimination of the inmate janitor position and overall inmate access to the building would provide the needed relief.

It should be noted that on 5/4/2017 SCI Albion provided documentation stating that the position of the Central Plant janitor has been eliminated and no inmates are able to have access to the Central Plant. This notification is sufficient to ensure compliance.

4. Tour of the Auto Shop revealed limited line of sight for staff monitoring and no video monitoring equipment to augment supervision efforts. At the time of the audit a group of work-release inmates has daily access to the Auto Shop and are supervised by one staff. In discussion with the institution management and PCM the following remedies are offered:

- a. Installation of half-mirrors or video monitoring equipment to aid staff in inmate supervision.
- b. When welding services are not in operation, the canvas curtains separating the welding area must be drawn back to allow for an unobstructed line of sight.

5. Tour of the Warehouse revealed multiple areas with limited line of sight, which hinders staff efforts to effectively supervise the inmates. At the time of the audit work-release inmates have daily access to the warehouse. In discussion with the institution management and PCM the following remedies are offered:

- a. Addition of a PTZ camera above freezer #1, or increased security rounds of the area, with frequency of once per hour.
- b. Addition of video monitoring equipment in the back storage cage, or a documented effort to arrange pallets and other items in the cage in a manner which do not hinder direct line of sight.

By providing documentation to support compliance with paragraphs 1 through 3 above, prior to the completion of this report, the institution has reached overall compliance with this standard for the final findings.

During the tour the auditor was able to hold informal interviews with staff and inmates while maintaining reasonable expectation of privacy. Additionally, compliance with PREA standards was, in part, verified through the review of random sample of six investigative files; four staff employment records; two inmate case files; four medical and mental health files; and other documentation relevant to the specific standard provisions.

As part of the audit it was discovered that inmates receive written materials at intake that provide detailed information about PREA protections, the multiple ways to report sexual abuse or harassment and ways to protect themselves from abuse. Subsequent inmate education is also provided, and PREA educational video runs on the institution channel. Inmates have immediate access to the unit counselors and other staff and are able to address questions as they arise. During the interviews inmates indicated that they understand the various ways to report abuse and discussed the posters throughout the facility with the telephone number to call to report sexual abuse or harassment. Inmates were able to articulate to the auditor what they would do and whom to contact if they were sexually abused. Inmates' interviews showed a consistent response that inmates felt safe, as it relates to being free from sexual victimization.

During interviews with staff it was determined that all institutions staff are well educated and have demonstrated through knowledge of the zero tolerance policy toward sexual abuse and sexual harassment in confinement. All interviewed facility staff were able to articulate their roles and responsibilities in the prevention, reporting and response to sexual abuse and sexual harassment. Staff showed a thorough knowledge of the PREA first responder protocols and were able to articulate the steps that need to be taken when a sexual victimization disclosure is received.

It should be noted that SCI Albion management team made a tremendous effort to facilitate the auditors' requests and make access available to all areas of the institution as well as staff. It is evident that the institution staff take great pride in their achievements, as they relate to reaching compliance with the PREA standards, which was supported by staff extensive knowledge of the response procedures and

inmates' rights to be free of sexual abuse. The leadership team was open to collaborative effort to facilitate discussions regarding the audit findings and recommendations.

In summary, after reviewing all relevant documentation, interviewing staff and inmates, and making observations of the facility during the audit tour, it is found that the department and SCI Albion leadership have made PREA compliance a high priority and have devoted a significant amount of time and resources to policy development, training of staff and education of inmates on all the key aspects of PREA.

AUDIT FINDINGS

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 Albion (SCI Albion) was built in 1993 and is situated on 357 acres (67 acres are inside the secured perimeter fence). This is a 2280 bed male facility which operates under the scope of Pennsylvania Department of Corrections. There are 28 Operational Structures (inside and outside of perimeter), and 10 housing units (Units A, B,C, D, E, and F have two separate sides-A and B- and also include dormitory style settings). SCI Albion is a Level 3 custody facility, however houses inmates with custody levels 2 through 5. Level 2 inmates are primarily housed on G Unit and have work/program privileges outside of the secured perimeter fence; Level 4 inmates are primarily assigned to Units I and J; Level 5 inmates are assigned to the Restrictive Housing Unit.

SCI Albion provides inmates with Adult Basic Education and other programming opportunities to meet their rehabilitative and reentry goals. The ABE program at SCI-Albion encompasses all academic classes through the eighth grade level, including English-as-a-Second Language (ESL). Students are placed into ABE classes at a level determined by scoring on the TABE test administered by the Education Guidance Counselor. All academic programs are conducted in self-contained classrooms. Students are assigned to attend five days per week at the same designated time each day. The goal of the secondary education program at SCI-Albion is the successful completion of the General Educational Development (GED) test. Secondary classes begin at the GED level and advance through classes in which students are given a rigorous program of skill building leading to a mastery of the GED test.

Other inmate programs include: Inside Out Dads; Hospice; Post Traumatic Stress Disorder; Reading to your Children; Sex Offender treatment Moderate-High and Low Intensity; Special Needs Sex Offender Booster Program; AODA Dual Diagnosis; Therapeutic Community; Parole Violator; Outpatient Therapy Group; AA/NA/SOS Support Meetings; Impact of Crime; Seeking Safety; Thinking for a Change; Act 143 Victim Awareness ; Violence Prevention; Batterer's Intervention; and a variety of Mental Health treatment programs.

The Correctional Industries Commissary Distribution Center began operation in November 2010, and services nine assigned state prisons by providing bagged inmate commissary services. The Commissary Distribution Center processes, packs and ships orders to their assigned prisons and employs 90 inmates.

The average daily population at SCI Albion is 2215, with the population of 2230 on the date of the on-site audit. Inmates between the ages of 18 and 92 are housed at SCI Albion. There are no youthful offenders housed in this facility.

There are a total of 569 employees at SCI Albion who have contact with the inmate population and 306 volunteers and contractors who are authorized to enter the premises.

SCI Albion employs the use of video monitoring equipment which backs up to a DVR system. There are currently 208 video cameras in place. A listing of cameras and locations was provided to this auditor. Cameras are added as identified in the Sexual Abuse Incident Reviews and as resources allow. They are

located in all housing units, in addition to the following areas: Administration, Commissary, Dietary, Activities Building, Education Building, Control area, Visiting room, Maintenance, Laundry and Medical. There is a gender-specific post charged with monitoring of the cameras in the Control Center. Structures outside of the secured perimeter which inmates have access to include Auto Shop and Central Plant, neither of the buildings have video surveillance to assist in viewing of blind spots, however recommendations were made to remedy this fact. All inmate activities in these areas are supervised by non-security staff and intermittent rounds of the areas made by security personnel.

All housing units are equipped with cameras and mirrors to assist in viewing of inmate activities. The showers on the housing units are designed to provide privacy to inmates yet allow for supervision by security staff to ensure the safety of inmates. The showers are individual stalls which allow for adequate privacy when in use.

SCI Albion has a full service Medical Department which provides all medical, dental and mental healthcare services to the inmate population. Patients requiring emergency services are transported to UPMC Hamot or St. Vincent's Health Center in Erie.

AUDIT FINDINGS

Summary of Audit Findings:

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

Number of standards exceeded:	3
Number of standards met:	36
Number of standards not met:	0
Number of Standards Not Applicable: (The total number of standards that were audited at the agency level)	6

During the on-site audit and through review of the documentation provided for the Pre-Audit Questionnaire, it was determined that SCI Albion has reached substantial compliance with the PREA standards.

Overall Compliance As Reflected in the Final Compliance Report:

Number of standards exceeded: 3

Number of standards met: 36

Number of standards not met: 0

Number of standards not applicable: 2

Total Standards: 41

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 280">Auditor Discussion</p> <p data-bbox="252 327 1469 573">SCI Albion operates under the agency policy DC-ADM 008 Prison Rape Elimination Act Procedures Manual which states that "The Department will take appropriate actions to ensure zero tolerance toward all forms of sexual abuse and sexual harassment in order to promote the safety of inmates. The Department will implement federal Prison Rape Elimination Act (PREA) Standards to ensure that all aspects of operations work toward preventing, detecting, and responding to such conduct resulting in a safer environment. (28 C.F.R. §115.11[a])".</p> <p data-bbox="252 629 1477 1256">Additionally the Local Policy DC-ADM 008 is outlining how SCI Albion will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy contains a glossary of definitions describing prohibited behaviors regarding sexual abuse and sexual harassment and a list of sanctions for those found to have participated in prohibited behaviors (DC-ADM 008, Section 7 – Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation). The said policy also includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates, such as "Work with each facility on an annual basis to assess, determine, and document whether adjustments are needed to: the staffing plan, deployment of the video monitoring systems and other monitoring technologies, and the resources the facility has available to commit to ensure adherence to the staffing plan. The statewide PREA Coordinator shall also review any documentation for non-compliance with a staffing plan. (28 C.F.R. §115.11) (28 C.F.R. §115.13[c])" and "Coordinate with the Pennsylvania Coalition Against Rape (PCAR), to ensure that the Department is providing all related parties with the most current information on sexual abuse and sexual harassment". (115.11(a)).</p> <p data-bbox="252 1312 1477 1644">SCI Albion has designated a PREA Compliance manager (PCM), who reports that she has sufficient time and authority to coordinate the institution's efforts to comply with the PREA standards. This fact was supported by the information received through the interviews with the institution Superintendent. The PCM responsibilities are held by the Corrections Classification Program Manager, which is documented in the facility's organizational chart and supported by the position description, noting that the incumbent is to "Serve as the PREA Compliance Manager for the institution". PCM reports directly to the Deputy Superintendent of the institution (115.11(c)).</p> <p data-bbox="252 1700 1023 1731">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul data-bbox="252 1742 1469 2029" style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; DC-ADM 801, Inmate Discipline; Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual. * Email documentation evidencing: in-service training rosters; Org. Chart; CCPM Position Description; * Interviews with PCM ; Superintendent

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	<p>SCI Albion does not have any responsibility, separate from that on the Agency level, to enter into or maintain contracts for confinement of inmates with other agencies or jurisdictions. Sample documentation of contracts has been reviewed to support this fact. Additionally, interviews with the institution PCM and the Agency PREA coordinator reveal the fact that SCI Albion has not entered into any contract at the facility level in the last 12 months.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Interviews with PCM Agency PREA Coordinator</p>

115.13	Supervision and monitoring
	<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 1477 528">SCI Albion developed a staffing plan which provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The staffing plan is predicated upon confinement of 2431 inmates (which is the maximum number of available beds at SCI Albion), noting that the average daily number of inmates at SCI Albion over the past 12 months has been 2120.</p> <p data-bbox="252 584 1471 875">It should be noted that SCI Pittsburgh is in preparation for closure of their facility which resulted in other institutions, including SCI Albion to increase their inmate population over the numbers reported during PAQ. The inmate population on the first day of the onsite audit was 2231. While the staffing plan is predicated upon a higher number of inmates, in their efforts to effectively absorb the increase in population, SCI Albion added an additional Officer to their SNU and two officers to RHU. They are also in the process of receiving ten additional officers from SCI-Pittsburgh.</p> <p data-bbox="252 931 1474 1223">Additionally, SCI Albion has inmate on Parole Violations, a quick turnaround population, with inmates averaging a two week stay. Due to this the facility increased its population primarily in the RHU where these inmates are housed by two Officers to assist with the increased volume. Also, one additional Psychology staff was added to the RHU on a permanent basis as well as a Corrections Counselor assigned there full time. Finally, seven new Psychology staff were added to help with treatment and assure that as a D Stability and treatment institution they receive appropriate care.</p> <p data-bbox="252 1267 1426 1424">The staffing plan is documented and reviewed annually for compliance. Sample documentation of Staffing Plan reviews over the past two years were examined, as well as interviews held with PCM and the institution Superintendent show that adherence with the staffing plan is achieved through the hiring of overtime to cover the vacant posts. Superintendent and the PCM report that the following parameters are given consideration when determining appropriate levels of staffing (DC-ADM 008, Section 2):</p> <ol data-bbox="252 1525 1485 2029" style="list-style-type: none"> (1) generally accepted detention and correctional practices; (2) any judicial findings of inadequacy; (3) any findings of inadequacy from Federal investigative agencies; (4) any findings of inadequacy from internal or external oversight bodies; (5) all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) the composition of the inmate population; (7) the number and placement of supervisory staff; (8) facility programs occurring on a particular shift; (9) any applicable State or local laws, regulations, or standards; (10) the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) any other relevant factors. <p data-bbox="252 2085 1439 2152">Additionally, the Policy states that "The Department shall ensure that each facility develops, documents, and makes its best efforts to comply on a regular basis with a staffing plan as</p>

found in Department policy 6.3.1, Section 15 that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. (28 C.F.R. §115.13[a]). There have been no instances of deviation from the staffing plan in the past 12 months, covering staff shortages with mandated overtime, if necessary. Through the interviews with commissioned officers and the institution administrative staff it was discovered that if vacant positions are not able to be filled with overtime, inmate activities would be collapsed in order to maintain appropriate staffing levels for supervision and monitoring of essential activities. (115.13(b)).

Staffing plan and adequate levels of supervision are reviewed at least annually, and are documented in a survey. Review of surveys from 2015 and 2016 supports this provision. Furthermore, staffing levels, including deployment of monitoring technology are evaluated through the monthly institution PREA tours assigned to the administrative staff. This information is assessed with input from the institution PCM and the Agency PREA Coordinator (115.13(c)).

Agency policy DC-ADM 008 requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Additionally, 6.3.1, Facility Security Procedures Manual (Section 19 – Managerial Visits/Inspections) instructs that "Unannounced PREA compliance inspections shall be conducted and documented to identify and deter staff sexual abuse and sexual harassment. These inspections can be incorporated with Administrative/Managerial Visits/Inspections, with the exception that they be documented separately. (§115.13 [d])". PCM reports that PREA Tour assignments are scheduled in advance and specific instructions are provided to the administrative staff. Interview with DSCS and review of sample of the PREA tour logs covering the period of 12 months supports the fact that rounds are completed on all shifts and at random times. Review of the logs shows significant effort is put forth to ensure that unannounced tours are completed at various times, documented on PREA Administrative Tour Documentation Form and debriefed for any significant findings that would warrant procedure or process modifications.

Facility Security Procedures Manual, 6.3.1 prohibits staff from alerting others when such rounds are taking place "Staff members will NOT inform anyone that these visits are occurring. Any staff member found to be alerting other staff or inmates to these unannounced visits will be subject to disciplinary action. (§115.13 [d])". Unit staff report that they are aware of the policy provisions prohibiting announcement of the PREA tours and indicate that upper-level management staff conduct their rounds on a frequent and random basis. PCM and DSCS indicated during the interview that they conduct unannounced tours on a monthly rotation and document them in on Tour logs.

While the institution is deemed in compliance with a significant portion of this standard, the following deficiencies are noted during the on-site visit and recommendations to achieve full compliance are made as follows:

1. Units A, B, C, D, E and F each have a laundry room which is staffed by an inmate worker who prepares clothing distribution. The laundry room entrance door is in direct line of sight from the Sergeant's desk, however, once inside, there is a secondary room that does not allow for monitoring of inmate activities. The laundry room door remains open when the

inmate worker is inside. Through the conversations with inmates and staff and actual observations of the unit operations it was determined that it is frequent that staff are absent from the Sergeant's desk, while access to the laundry room remains unmonitored. This provides for an easy access to an unsupervised area and creates risk for sexual victimization of inmates. In discussion with the institution management and PCM the following remedies are offered. Institution of one of the suggested remedies, or a comparable alternative, will be sufficient in addressing this issue:

- a. Remove the clothing distribution from the laundry room to another area, rendering the room inaccessible for inmates.
- b. Secure the secondary room inside the main laundry room making it inaccessible to inmates. There will be sufficient line of sight from the Sergeant's desk into the remaining area.
- c. Install video monitoring equipment in the room with direct feed to the Sergeant's desk.

2. Observation of G Unit operations revealed that the unit consists of three pods, with two side pods angled away from the middle pod. This is a level 2 security unit, where inmates are issued room keys to access their assigned rooms. Staff supervision of this unit consists of two officers who do not have a direct line of sight to all three pods. This provides for an easy access to unsupervised areas and creates risk for sexual victimization of inmates. In discussion with the institution management and PCM the following remedies are offered. Institution of one of the suggested remedies, or a comparable alternative, will be sufficient in addressing this issue:

- a. Increase levels of supervision by adding a third officer
- b. Increase the frequency of security rounds from once every hour to once every 30 minutes.

3. Tour of Central Plant revealed that no monitoring equipment is present in the building. This building is located outside of the secure perimeter of the institution and at this time only one inmate has access to this building- a janitor who is a level 2 inmate on a work-release duty. Due to the physical lay-out of this area, a great number of overhead vents, pipes and equipment, it is not recommended that installation of video monitoring equipment would remedy the potential risk of inmate sexual victimization. In discussion with the institution management and PCM it is offered that elimination of the inmate janitor position and overall inmate access to the building would provide the needed relief.

4. Tour of the Auto Shop revealed limited line of sight for staff monitoring and no video monitoring equipment to augment supervision efforts. At the time of the audit a group of work-release inmates has daily access to the Auto Shop and are supervised by one staff. In discussion with the institution management and PCM the following remedies are offered:

- a. Installation of half-mirrors or video monitoring equipment to aid staff in inmate supervision.
- b. When welding services are not in operation, the canvas curtains separating the welding area must be drawn back to allow for an unobstructed line of sight.

5. Tour of the Warehouse revealed multiple areas with limited line of sight, which hinders staff efforts to effectively supervise the inmates. At the time of the audit work-release inmates have daily access to the warehouse. In discussion with the institution management and PCM the following remedies are offered:

- a. Addition of a PTZ camera above freezer #1, or increased security rounds of the area, with frequency of once per hour.
- b. Addition of video monitoring equipment in the back storage cage, or a documented effort to

arrange pallets and other items in the cage in a manner which do not hinder direct line of sight.

It should be noted that prior to the completion of this auditor's report, SCI Albion provided verification that deficiencies in paragraphs 1 through 3 above were remedied as follows:

1. On 5/4/2017 SCI Albion provided documentation that the secondary room inside the laundry room on Units A, B, C, D, E and F has been made inaccessible to the inmates. SCI Albion provided a memorandum to that effect and photographic evidence of the laundry room, documenting that the secondary room has been emptied.
2. On 5/4/2017 an Addendum to G Unit post orders was received from SCI Albion modifying the expectations of security rounds to ensure patrol of the housing unit to provide one complete unit tour once every half hour.
3. On 5/4/2017 SCI Albion provided documentation stating that the position of the Central Plant janitor has been eliminated and no inmates are able to have access to the Central Plant.

The verification provided satisfies the provisions of the standard 115.13(a) to ensure substantial compliance.

Policy, Materials, Interviews and Other Evidence Reviewed

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; 6.3.1, Facility Security Procedures Manual;
- * Email documentation evidencing: PREA tour assignments; monthly PREA tour reports; PIDS meeting minutes; staffing survey; facility layout; shift schedules;
- * Interviews with Superintendent ; PCM ; Agency PREA Coordinator ; Security Captain

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>SCI Albion does not house youthful offenders. This fact was verified through the review of inmate population documentation denoting inmates' dates of birth and information related to their intake at the facility. Interviews with the PCM and the Superintendent revealed that there has not been any youth housed at SCI Albion in the last 12 months. It should be noted that while no youth are housed in this institution, DC-ADM 008 has specific provisions that would govern such placements in the event youthful offenders were to be housed at SCI Albion: "a. A youthful inmate (under the age of 18) shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters. (28 C.F.R. §115.14[a])".</p> <p>Because no inmates in the age group below 18 are housed at SCI Albion, there were no staff interviewed who would be charged with supervision of these inmates.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation: inmate locator on-line inmate tracking system * Interviews with PCM , Superintendent

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training states that "Staff shall not conduct cross-gender strip searches except in exigent circumstances, in accordance with Department policy 6.3.1, Section 30. (28 C.F.R. §115.15 [a])". SCI Albion has not conducted cross-gender strip searches of inmates, however does have the appropriate form to document such occurrence, if necessary.</p> <p>In addition to DC-ADM 008, 6.3.1, Facility Security Procedures Manual, Section 30 – Searches states that "Female staff members may search female, male, transgender, or intersex inmates. Male staff members may search male, transgender, or intersex inmates housed in a male facility. Absent exigent circumstances, male staff members shall not search female, transgender, or intersex inmates housed in a female facility. (§115.15 [b])". Interviews with 10 random staff indicated that there has not ben an instance of exigent circumstances in which staff of the opposite gender would be necessitated to conduct strip searches of inmates at SCI Albion.</p> <p>Prevention section of DC-ADM 008 states that "Inmates shall be able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. This limitation not only applies to in-person viewing, but also all forms of remote viewing as well. (28 C.F.R. §115.15[d]). Tour of the facility and interviews with inmates and staff showed that inmates are allowed adequate privacy. It should be noted that each housing unit in the facility has centralized shower area, however each stall is separated from others to ensure adequate privacy and to prevent cross-gender viewing. Additionally, the established policy instructs staff of the opposite gender to announce their presence when entering the housing units. (DC-ADM 008 e.Staff of the opposite gender shall announce their presence when entering an inmate housing unit in accordance with the following: (28 C.F.R. §115.15[d]). During tour of the facility it was substantiated that practical application of this policy is in place, staff were witnessed announcing the presence of female staff/visitors on the unit. Additionally, the living unit which houses inmates with disabilities has additional accommodations for the hearing impaired inmates- marquee announcement board- to indicate the presence of female staff.</p> <p>Agency policy prohibits searches of transgender or intersex inmates for the sole purpose of determining the inmate's genital status (6.3.1, Section 30, "Every inmate is subject to search at any time. They will be conducted in a professional manner with tact and proper attitude displayed. At no time will a search or physical examination be conducted for the sole purpose of determining an inmate's genital status. (§115.15 [e])"). Two transgender/intersex inmates were interviewed and corroborated that they have not been subjected to searches which would violate this standard. No such searches have taken place at SCI Albion.</p> <p>Review of PREA training logs for all staff over the past 12 months and interviews with 25 staff showed that 100% of all staff have been properly trained on how to conduct cross-gender</p>

searches and searches of transgender and intersex pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Searches have also been observed during the on-site audit and noted to be consistent with this standard (115. 15(f)).

Policy, Materials, Interviews and Other Evidence Reviewed:

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; 6.3.1, Facility Security Procedures Manual;
- * Email documentation evidencing: Cross-Gender Strip Search Validation Form; Post Orders Addendum; training rosters
- * Interviews with: random sample of staff and inmates; random sample of transgender inmates

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency has established procedures to provide disabled inmates 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. Policy (DC-ADM 008) reads that " a. Pursuant to Department policy DC-ADM 006, "Reasonable Accommodations for Inmates with Disabilities," the Department shall ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. (28 C.F.R. §115.16[a])</p> <p>b. Written materials shall either be delivered in alternative formats that accommodate the inmate's disability or the information shall be delivered through alternative methods, such as reading it to the inmate or communicating through an interpreter, which ensures the understanding of the PREA-related material. (28 C.F.R. §115.16[a]).</p> <p>Additional forms of access are in place to facilitate communications with disabled inmate populations, such as Braille, translation telephone lines, alternative language posters, marquee boards, etc. Interview with a limited English proficiency inmate took place with the use of telephone translation line. Twenty five random staff were interviewed and all were knowledgeable in accessing this form of accommodation, as was the inmate. Interviews with counselor staff and inmates showed that access to PREA related information for population with intellectual and psychiatric disabilities is afforded through thorough discussions with counselors and clinical staff to ensure that inmates knew their rights to be free of sexual abuse and harassment and understood reporting options.</p> <p>Inmates with limited English proficiency are afforded multiple opportunities to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Interviews with inmates and tour observations revealed posters in languages other than English, as well as the use of translation telephone line. Review of multiple contracts with vendors showed that translations from and to a variety of languages is available to establish effective communication. Additionally, SCI Albion maintains a directory of institution staff who are proficient in other languages to facilitate translation when necessary. (115.16(b)).</p> <p>The agency policy prohibits the use of inmate interpreters to facilitate communications related to PREA disclosures or in the course of PREA related investigations (DC-ADM 008 "d. The Department shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate's safety, the performance of first response duties under PREA Standard 28 C.F.R. §115.64, or the investigation of the inmate's allegations (28 C.F.R. §115.16[c]). Justification for any use of an inmate interpreter shall be documented accordingly. " Random sample of staff (25) and inmates (10) reported that they are aware of the policy provisions and are not aware of instances when inmate interpreters were used. SCI Albion PCM reports no instances where inmate interpreters, readers, or other types of inmate assistants have been used and there was not a case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response</p>

duties under §115.64, or the investigation of the inmate's allegations.

Policy, Materials, Interviews and Other Evidence Reviewed:

* Completed Pre-Audit Questionnaire submitted by SCI Albion

* Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; DC-ADM 006, Reasonable Accommodations for Inmates with Disabilities Manual

* Email documentation evidencing: SCI Albion Foreign Language Employee Directory; contracts with sign/foreign language service providers; PREA posters and handouts in Spanish;

* Interviews with Superintendent ; random sample of staff; random sample of inmates with disabilities; random sample of inmates with limited English proficiency

115.17	Hiring and promotion decisions
	<p data-bbox="252 168 925 201">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 246 518 280">Auditor Discussion</p> <p data-bbox="252 324 1484 873">Agency employs policies (4.1.1 Resources and Labor Relations Procedures Manual and 1.1.4 Centralized Clearances) which mandate background check on all prospective employees, volunteers, contractors or other persons entering the institution who have a potential of having contact with inmates. The background checks are performed on the Agency level through the JNET application. The policies prohibit engaging services of individuals who (1) Have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution ; (2) Have 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) Have been civilly or administratively adjudicated to have engaged in these activities. The policies also indicate that a consideration is given to 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> <p data-bbox="252 929 1364 996">Review of a sample of five files showed that each reviewed employee has appropriate documentation of such background check in their employment files (115.17(b)).</p> <p data-bbox="252 1052 1460 1265">HR staff report that prior to hiring an employee or engaging in a contract with an individual or a vendor, a background check is conducted and documented. The verification of prohibited behaviors also includes communication with prior employers, as well as imposing an affirmative duty upon the employee to disclose any acts of misconduct. Employment application asks potential candidates about previous misconduct described in this standard.</p> <p data-bbox="252 1310 1484 1736">Additionally, interviews with HR staff showed that JNET application runs continuous scan of employee backgrounds (exceeding the mandate of once every five years) and "pings" any instances of misconducts, which are then forwarded to the corresponding facilities for follow up, in the event the employee fails to disclose. (115.17(e)). Agency considers material omissions regarding such misconduct, or the provision of materially false information, to be grounds for termination and requires a signed acknowledgement of this fact in the Consent to Release Information for PREA Compliance form (4.1.1, Human Resources and Labor Relations Procedures Manual "I understand that any material omission or provision of materially false information shall be grounds for non-selection or discipline, up to and including termination of employment. (§115.17 [g])").</p> <p data-bbox="252 1780 1444 1948">Finally, the Agency policy requires to 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. HR staff report that no such requests have been received in the last 12 months.</p> <p data-bbox="252 1993 1476 2161">Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; 4.1.1 Human Resources and Employee Relations Procedures</p>

	<p>Manual; 1.1.4 Centralized Clearances Procedure Manual; * Email documentation evidencing: verification with prior employers; PREA Employment Application; Centralized Clearance form; JNET application; personnel files; checklist for background checks requests; * Interviews with HR staff</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>PCM and institution Superintendent report that SCI Albion made the following structural changes: completed Commissary project and installment of the new security cameras in the library, food service, activities area, visits waiting room, medical. Half mirrors have been added to the Auto Shop, activities and units I and J. Observations of these areas showed that thorough consideration had been given to placement of the monitoring equipment. The facility upgrades are documented on the monthly PIDS meeting minutes and is indicative that supervision and monitoring concerns had been given consideration, as noted by the involvement of the SCI Albion PREA Compliance Manager (115.18).</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Email documentation evidencing: PIDS meeting minutes; * Interviews with Superintendent ; PCM</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>SCI Albion staff are responsible for conducting administrative investigations pertaining to allegations of sexual abuse and sexual harassment in confinement, including inmate-on-inmate sexual abuse or staff sexual misconduct. This responsibility and the uniformed evidence protocol are thoroughly outlined in Policy DC-ADM 008 Section 5 -Investigating Allegations of Sexual Abuse and Sexual Harassment and the Local Policy DC-ADM 008. During interviews random sample of staff (25) indicated that they were aware and understood the department policy for obtaining usable physical evidence, and whom was the primary investigator of allegations of sexual misconduct at SCI Albion.</p> <p>Evidence collection kits are made available to first responder staff at SCI Albion to aid their efforts in collecting timely usable evidence. DC-ADM 008 states that "Investigators shall gather and/or preserve direct and circumstantial evidence, including any available physical, DNA, and any electronic monitoring data; interview alleged victims, suspected abusers, and witnesses; and shall review prior complaints and reports if sexual abuse involving the suspected abusers".</p> <p>Responsibility for conducting criminal investigations falls under the purview of Pennsylvania State Police (PSP) and SCI Albion had signed a memorandum of understanding with that agency outlining the scope of responsibility and necessity to comply with the applicable PREA standards in the course of the investigations held by PSP personnel. (115.21(a)).</p> <p>The uniformed evidence protocol was adapted from "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents". Review indicated that this protocol at SCI Albion is not developmentally appropriate for youthful inmates, although no youth are housed at this institution (115.21(b)).</p> <p>SCI Albion offers all inmates who experience sexual abuse access to forensic medical examinations without financial cost to the victim. This expectation is articulated in DC-ADM 008, stating that "The alleged victim shall be evaluated by facility medical personnel immediately, when there is an allegation of sexual abuse that involved physical contact, to ensure the absence of any injury requiring urgent treatment. The medical staff shall document any injuries on the DC-457, Medical Incident/Injury Report in accordance with Department policy 13.2.1, Section 6" and "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". SCI Albion medical staff are not responsible for conducting forensic examinations of inmates, MOUs with UPMC Hamot and St. Vincent's Health Center are in place and articulate responsibility of both agencies with respect to SANE/SAFE care. Interviews with staff UPMC Hamot and St. Vincent's Health Center noted that in absence of SANE, the hospital doctors are responsible for conducting forensic examinations.</p> <p>Facility's efforts to document providing SANE care are noted through the review of three medical files, as well as two investigatory files of allegations, which were brought forward within 96 hours of occurrence. All reviewed documents showed consistent adherence to this</p>

standard by transporting inmates to the outside health care providers in effort to obtain examination by SANE staff. (115.21(c)).

SCI Albion entered into agreement with the Crime Victims Center (CVC) of Erie County and secured services of qualified staff to make a victim advocate from this rape crisis center available to the victim. This letter of agreement is formally documented as of March 6, 2014. Interview with CVC staff revealed that an advocate is available to meet with the victim during a SANE exam upon request. Additionally, follow up care is provided to the inmates on a minimum of weekly basis -on Mondays, and more frequently if needed. Furthermore, availability of victim advocate is corroborated by the random sample of inmates who had reported sexual abuse (one inmate interviewed), as well as documented as part of the investigative/first responder effort. (115.21(d)).

Crime Victims Center of Erie County is a rape crisis center, staff employed by this agency are qualified to serve in this role and received education concerning sexual assault and forensic examination issues in general. (115.21(g)).

When requested by the victim, a victim advocate from CVC accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. This was corroborated by the CVC staff, random sample of inmates (10) and the Agreement signed with CVC of Erie County. Follow up and on-going care is provided to the inmates on a minimum of a weekly basis -on Mondays,-and more frequently if needed. (115.21(e)).

SCI Albion is responsible for conducting administrative investigations of sexual abuse and sexual harassment. Allegations of potentially criminal nature are referred to Pennsylvania State Police (PSP) for investigation. Agreement with PSP had been signed on the Agency level and notes that " PSP will develop a policy for conducting criminal investigations of sexual abuse allegations as required by 28 C.F.R. part 115 included but not limited to paragraphs 115.22 and 115.71 and review allegations of sexual crimes committed within state correctional facilities". Furthermore, investigative staff reported that SCI Albion refers all allegations of sexual misconduct to PSP, regardless of whether there is a potential for violation of criminal statutes. This fact was verified through the review of random sample of six investigatory files. (115.21(f)) and interview with the Investigative staff.

Policy, Materials, Interviews and Other Evidence Reviewed:

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;
- * Email documentation evidencing: MOU with Pennsylvania State Police; MOU with UPMC Hamot and St. Vincent's Health Center; correspondence with Pennsylvania State Police; inmate medical records; disclosure of victim advocacy services;
- * Interviews with: PCM ; Investigative Lieutenant; random sample of staff; St. Vincent's Health Center staff; Crime Victims' Center of Erie County staff; random sample of inmates who reported sexual abuse

115.22	Policies to ensure referrals of allegations for 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 1477 958">SCI Albion ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment, including inmate-on-inmate sexual abuse and staff sexual misconduct. This expectation was also communicated by the institution Superintendent. Agency policy DC-ADM 008 states in part that "every report, complaint, or allegation of sexual abuse and sexual harassment, including third party and anonymous reports, shall be investigated promptly, thoroughly , and objectively". The institution employs a tracking system to ensure accountability, progress and follow through on all allegations, in accordance with DC-ADM 008 Section 5, which mandates that "every report, complaint, or allegation of sexual abuse and/or sexual harassment shall be entered into the PREA Tracking System, a web-based application designed to track all incidences of sexual abuse and sexual harassment for U.S. Department of Justice reporting purposes". Interview with Investigative staff and review of investigative documentation (five files reviews) showed appropriate investigative response from the institution leadership. In the past 12 months the number of allegations received at SCI Albion was 146, all of which were investigated, 105 were referred for criminal investigation with Pennsylvania State Police (115.22(a)).</p> <p data-bbox="252 1010 1485 1603">SCI Albion follows provisions of DC-ADM 008 which instructs that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior (DC-ADM 008 "If the case is being investigated for criminal charges, the Department investigators shall suspend the administrative investigation and allow the criminal investigation to take precedence. The Security Office and/or Office of Special Investigations and Intelligence (OSII) shall coordinate with the criminal investigator/District Attorney's Office (as applicable) to determine when to resume the administrative investigation so as to avoid interference with the criminal investigation"). The agency's policy regarding outside referrals is made available on the Pennsylvania DOC website. Additionally, memorandums of understanding are completed between the agency and Pennsylvania State Police outlining responsibilities of each agency as they relate to investigations of allegations of sexual abuse and sexual harassment (115.22(c)). All referrals for outside law enforcement are documented. (115.22(b))</p> <p data-bbox="252 1655 1024 1688">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul data-bbox="252 1697 1485 2029" style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Local policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Email documentation: PREA log; Sexual Abuse Incident Review forms; random sample of investigative files; MOU with Pennsylvania State Police; Shift Commander Response check list; PSP notifications * Interviews with Superintendent; Investigative Lieutenant.

115.31	Employee training
	<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 1484 488">SCI Albion employees received comprehensive training on the Agency's zero tolerance policy toward inmate sexual abuse and sexual harassment. DC-ADM 008 states that "a. The PCM, in conjunction with the Training Coordinator at each facility, shall ensure that all employees who have contact with inmates receive the following training: (28 C.F.R. §115.31[a])</p> <ol data-bbox="252 499 1484 1346" style="list-style-type: none"> (1) the zero tolerance policy against sexual abuse and sexual harassment within the Department; (28 C.F.R. §115.31[a][1]) (2) how staff are to fulfill their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures as defined in this policy; (28 C.F.R. §115.31[a][2]) (3) inmates' right to be free from sexual abuse and sexual harassment; (28 C.F.R. §115.31[a][3]) (4) the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (28 C.F.R. §115.31[a][4]) (5) the dynamics of sexual abuse and sexual harassment in confinement; (28 C.F.R. §115.31[a][5]) (6) the common reactions of sexual abuse and sexual harassment victims; (28 C.F.R. §115.31[a][6]) (7) how to detect and respond to signs of threatened and actual sexual abuse; (28 C.F.R. §115.31[a][7]) (8) how to avoid inappropriate relationships with inmates; (28 C.F.R. §115.31[a][8]) (9) how to communicate effectively and professionally with inmates, including LGBTI or gender nonconforming inmates; and (28 C.F.R. §115.31[a][9]) (10) how to comply with relevant laws of Pennsylvania related to mandatory reporting of sexual abuse to outside authorities. (28 C.F.R. §115.31[a][10]) <p data-bbox="252 1397 1452 1559">Review of the training records for all SCI Albion staff and interviews with random sample of staff (21) support the fact that the policy provisions had been put into practice. Staff are able to articulate their responsibilities as they relate to responding to allegations of sexual abuse, reporting mechanisms available to both staff and inmates and other topics.</p> <p data-bbox="252 1615 1452 1776">The training held at SCI Albion is gender specific to the male population. Employees who are reassigned from facilities housing the opposite gender would be given additional training, however, there have been no employees transferring from facilities which house female inmates.</p> <p data-bbox="252 1832 1476 2074">Policy states that "c. Beginning in 2016, and every even numbered year thereafter, the annual PREA education shall be provided in the form of a refresher of the initial basic staff training information for all staff members. Staff shall be required to verify that they have received the updates and understand the included items on the PREA Training and Understanding Verification Form (Attachment 2-F) to be kept in the staff member's training file in accordance with Section 1 of this procedures manual. (28 C.F.R. §115.31[c][d])</p> <p data-bbox="252 2085 1436 2157">d. Beginning in 2017 and every odd numbered year thereafter, the annual PREA education shall be provided in the form of an update to this procedures manual for all staff members.</p>

Staff shall be required to verify that they have received the information and understand the included items on the PREA Training and Understanding Verification Form. This information shall be kept in the employee's training file in accordance with Section 1 of this procedures manual. (28 C.F.R. §115.31[c][d]).

Review of 15 training records showed that employees receive PREA training/updates annually.

Finally, all PREA training is documented and employees are required to sign an acknowledgement indicating they understand the training via the In-Service Training Roster. Additionally, a spreadsheet of employees' PREA training records is maintained.

Policy, Materials, Interviews and Other Evidence Reviewed:

- * Completed Pre-Audit Questionnaire submitted by SCI Albion

- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;

- * Documentation evidencing: lesson plans; in-service training roster; random training records; completed PREA classroom training database

- * Interviews with random sample of staff

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>SCI Albion 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. DC-ADM 008 states "(1) Contractors and volunteers (to include contract service providers, public visitors, or Non-Department Employees) shall receive training on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. They shall be trained during orientation sessions and annual training reflective of the level of contact that they have with inmates. (28 C.F.R. §115.32[a]).</p> <p>At the time of the audit 306 volunteers and contractors received such training. This information was verified through the interviews with one volunteer staff, volunteer database as well as review of a sample (11) of signed verification forms. The level of training volunteers and contractors are provided with is based on the type of services provided and the amount of contact they are expected to have with inmates. One contractor staff (medical) was interviewed to verify compliance and reported that she receives her PREA training annually, through both, SCI Albion and the parent company which employs her. Additionally compliance was verified through understanding of the contractor's responsibility to respond to instances of sexual abuse, detecting signs of abuse, limited confidentiality and other topics.</p> <p>Contractors and volunteers are required to sign a "PREA Training Understanding and Verification form". Sample of signed acknowledgements (11) had been reviewed and verified.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: volunteer database; PREA training and understanding verification forms; sample of training records; * Interviews with random sample of volunteer staff

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>At SCI-Albion inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. This is documented through the PREA Inmate Education Verification forms, which are signed by all inmates. Sample of 10 verification forms was reviewed. Additional information provided to the inmates includes Crime Victims Center of Erie brochure, a PREA video which is shown daily on the institution channel and inclusion of specific information in the inmate handbook. Review of the records shows that 100% of inmates received this information at intake during the past 12 months. Interviews with 21 inmates are indicative that they are aware of their rights to be free of sexual abuse and sexual harassment, reporting mechanisms, available services, and received this information at SCI Albion.</p> <p>SCI Albion provides a comprehensive orientation to all inmates admitted at the institution within 30 days of arrival. The agency policy states that "2. 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 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-I) and to answer questions. (28 C.F.R. §115.33[b])." Interview with 21 showed that all were provided an orientation within a month of arrival at SCI Albion; inmates were able to demonstrate knowledge of their right to be free from sexual victimization and discuss reporting options, adequate privacy while using institution facilities and showers and other related topics. Review of 11 records showed signed acknowledgements completed by the inmates.</p> <p>Inmates who were admitted at SCI Albion prior to 2014 had been educated in 2014. Electronic records corroborating this fact had been reviewed and support the findings that there are no inmates at this institution who had not received comprehensive PREA education.</p> <p>DC-ADM 008 notes that "4. An inmate who did not receive the education at the DCC shall receive this training within one year of the effective date of the PREA Standards. This education may be provided as a group presentation or individually during the inmate's annual/semi-annual case review, as needed. (28 C.F.R. §115.33[c])". Review of the ICAR records over the past 12 months revealed that all inmates arriving at SCI Albion, whether new inmates or transfers from other facilities, are subject to receive PREA education.</p> <p>During PREA training/education, the information is provided in formats accessible to all populations. DC-ADM 008 states that "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</p>

inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. (28 C.F.R. §115.33[d]) ". SCI Albion provided information regarding alternative means of education for disabled populations, to include Braille, foreign language translation, etc. Interview with one limited English proficiency inmate supports this provision. Interpreter line was used by the auditor to communicate with the inmate, who reported that information about PREA was provided to him in his native language.

Inmate PREA Education is documented through the acknowledgements and ICAR records. Sample of 11 acknowledgements was reviewed for verification.

SCI Albion ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, brochures, inmate handbook and institution TV Channel. This was visually verified during the tour of the institution.

Policy, Materials, Interviews and Other Evidence Reviewed:

* Completed Pre-Audit Questionnaire submitted by SCI Albion

* Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; DC-ADM 006, Reasonable Accommodations for Inmates with Disabilities Manual

* Documentation evidencing: PREA inmate education verification forms; Inmate Cumulative Adjustment Records (ICAR); Foreign language employee directory; contracts with language service providers; Inmate Handbook; Information Handouts

* Interviews with: Intake staff; random sample of inmates;

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DC-ADM 008 states that "(1) Any staff designated to conduct sexual abuse investigations shall receive training in accordance with 28 C.F.R. §115.34[a].</p> <p>(a) This specialized training shall include, but is not limited to: interviewing sexual abuse victims, proper use of Miranda warnings, the Garrity rule, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral. (28 C.F.R. §115.34[b]).</p> <p>Record of all 11 SCI Albion PREA investigators and corresponding training records have been reviewed and the findings support the Agency policy provisions. Additionally, training curriculum is indicative that investigators receive training on topics such as interviewing sexual abuse victims, proper use of Miranda warnings, the Garrity rule, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.</p> <p>Interviews with investigative staff revealed thorough comprehension of investigatory methods, interviewing techniques evidence collection and criteria required to substantiate an allegation of sexual abuse and sexual harassment. Review of the training curriculum and signed training rosters are in support of this determination. SCI Albion at the time of the audit employs 11 investigators trained in conducting sexual abuse investigations in confinement settings. It should be noted that the training curricular is specialized to prepare the investigators to conduct investigations of sexual abuse in confinement and is in addition to the annual PREA training that is mandated for all institution staff.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual * Documentation evidencing: Investigator training Program; trained investigators roster; sample of training records * Interviews with: Investigative staff

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>SCI Albion medical and mental health staff are trained in responding to sexual abuse and sexual harassment in confinement setting. DC-ADM 008 states that "(1) Any staff providing medical/mental health services, whether on a full or part-time status, shall receive additional training on working with victims of sexual abuse and sexual harassment. (28 C.F.R. §115.35[d]). For the purposes of this training requirement, medical staff shall include all licensed medical staff, as well as non-licensed contact medical staff such as dental assistants, Correctional Health Care Administrators (CHCAs), and contracted provider staff.</p> <p>(a) This specialized training shall include, but is not limited to: how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. (28 C.F.R. §115.35[a][1][2][3][4]).</p> <p>At the time of the audit 39 full/part time health and mental health practitioners were employed at SCI Albion, all of whom received the specialized training. SCI Albion provided appropriate records which document this training. Interviews with staff show knowledge and understanding of their responsibilities as they relate to responding to allegations of sexual abuse. In addition to specialized training, all SCI Albion employees, including medical and mental health personnel receive training consistent with 115.31 and contractor staff receive additional training consistent with 115.32. Sample of the training roster and signed acknowledgements of 12 medical staff were reviewed to support compliance. Interviews with 2 medical/mental health staff revealed knowledge of their responsibilities, limits of confidentiality, responding to allegations of sexual abuse in confinement, level of care/treatment necessary and referral responsibilities. Staff acknowledged partnerships with community service providers (UPMC Hamot, St. Vincent's Health Center and CVC of Erie County) and responsibilities of those entities as they relate to providing services and care for inmates.</p> <p>SCI Albion staff do not conduct forensic examinations. When the need for forensic exams exists, inmates are transported to UPMC Hamot or St. Vincent's Medical Center to receive care from SANE staff.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: PREA Medical and Mental Care Standards Participant Guide; in-service training rosters; training records; personnel records; * Interviews with: random sample of medical and mental health staff

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Agency policy DC-ADM 008 states that "1. 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. (28 C.F.R. §115.41[a])".</p> <p>Review of the sample (twelve 72 hr assessments and ten 30 day assessments) of Risk Assessment tools (PRAT) showed compliance with this provision. Additionally, interviews with 1 medical staff (1) and 3 counselors who conduct PRAT assessments revealed that each inmate is screened within 72 hours of intake at SCI Albion. 100% of inmates who were admitted at SCI Albion in the last 12 months were screened to determine their risk of victimization or abusiveness within 72 hours of arrival or less. When interviewed, 9 out of 10 inmates acknowledged that the screening process took place "right away". One inmate was not sure how long it took before he was administered PRAT. All inmates also reported follow up reassessments at a later time. Inmates reported that during the risk screening they were asked questions about prior sexual victimization, their sexual identity, prior incarceration experiences and whether they considered themselves in danger of sexual victimization while at SCI Albion.</p> <p>Review of PRAT showed that inmates are screened on the basis of their risk of sexual victimization and abusiveness, the instrument appeared to be an objective inventory. A variety of factors are considered as part of the screening, to include (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. In determination of risk of sexual abusiveness the following criteria are used: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, and include questions like "Have you ever sexually victimized anyone while incarcerated?", "Did any of your current or prior offenses involve sexually victimizing an adult victim?", "Have you ever victimized someone either physically or sexually before this incarceration?", etc.</p> <p>In accordance with the policy (Dc-ADM 008) "c. 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. (28 C.F.R. §115.41[f]) 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. (28 C.F.R. §115.41[g]) ". Interviews with 4 staff responsible for screening and random sample of inmates (10) showed adherence to this provision. 100 % of inmates admitted at SCI Albion in the last 12 months have been reassessed within 30 days of intake. Additionally, reassessments are conducted whenever</p>

relevant information becomes available (outcome of a PREA investigation) or based on a referral, request or an allegation of sexual abuse/harassment. The use of PRAT assessment is consistent with all inmates at SCI Albion and across the Agency. None of the inmates interviewed (21 total) reported disciplinary sanctions associated with refusal to participate in PRAT. Additionally, the 4 counselors charged with PRAT assessments and the PCM stated that inmates are not subjects to discipline for such refusals.

The Agency policy prohibits inmate discipline for refusal to cooperate with PRAT or disclose information. This is supported by the staff interviews, . PCM and screening counselors report that access to sensitive information derived from PRAT is controlled to the extent necessary to inform housing, programming and work assignments. This information is available on WebTAS and is used for unit staff to make offender management decisions. Furthermore, controls are in place as noted in the forms' instructions :

1. Complete the demographic section (name, DOC number, date, gender, race, date of birth, height, weight, build).
2. Administer or allow the Spanish-speaking inmate to respond to all questions not highlighted on the form.
3. Enter the best response for each staff response question.
4. Enter the numeric score associated with the response from the scoring key for victims and the scoring key for abusers.
5. Enter the total scores for the victims column and for the abusers column.
6. Enter all data from the form into the automated tool in WebTAS.
7. Enter high risk inmates into Security Concerns in the Unit Management System (DOCInfo).
8. Shred the paper copy of the PRAT form.
9. At no time should the PRAT be printed as a matter of record or dissemination for any reason.

Policy, Materials, Interviews and Other Evidence Reviewed:

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;
- * Documentation evidencing: PRAT; PRAT user guide; ICAR database; WEBTAS database; PREA psych checklist
- * Interviews with: Agency PREA Coordinator; PCM; Staff responsible for risk screening; random sample of inmates;

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DC-ADM 008 informs that "3.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. (28 C.F.R. §115.42[a]) The sensitive information collected through these tools shall be kept as confidential as possible so as not to be used to the inmate's detriment by staff or other inmates. (28 C.F.R. §115.41[i]).</p> <p>Review of WEBTAS database and interviews with SCI Albion PCM supports this instruction, as inmates with high scores on PRAT are indicated by the notation "Housing Concern". Based on this notation staff are able to make informed decisions related to work, educational and other programming. Institution staff make individualized determinations about how to ensure the safety of each inmate, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Additionally, housing assignments for transgender and intersex inmates are made on a case by case basis. Interviews with 21 inmates revealed that while some were not housed with the individuals they would prefer, they non-the-less felt safe from sexual abuse in their current housing assignments. Interview with one transgender inmate showed that he had no safety concerns regarding his housing or work assignments, nor was his ability to shower in privacy was infringed upon. He also recalled that he was asked about his own perception of safety at this institution and again reiterated hat he had no concerns.</p> <p>The DC-ADM 008 notes that "e. The purpose of the Gender Review Committee is to make individualized determinations about transgender or intersex inmates' housing and programming assignments to ensure their safety." These decisions include placements in female/male institutions and decisions on inmate programming with the goal to ensure safety, yet maintaining sound security practices and the inmate's own views on personal safety. Policy notes, and review of 2 samples of documentation supports that 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. (DC-ADM 008 "The PCM shall privately meet with the transgender or intersex inmate within five business days of notification and complete the Gender Review Committee (GRC) Checklist (Attachment 9-A). Following this assessment, the inmate shall be reassessed every six months to review any threats to safety experienced by the inmate. (28 C.F.R. §115.42[d]). This information is also confirmed by the institution counselors (4 were interviewed) who are charged with conducting the reassessments. The counselors noted that they conduct reassessments of transgender individuals at least once every six months.</p> <p>Tour of the facility revealed that all showers at SCI Albion are adequately separated from one another, allowing all inmates to shower separately. This is consistent with 115.42(f). Interviews with inmates revealed that they had no privacy related concerns when using the showers.</p> <p>Review of documentation, specifically inmate records and inmate housing assignment roster for the past 6 months, as well as interviews with 2 inmates and institution PCM revealed that</p>

gay, bisexual, transgender, or intersex inmates are not housed in any designated areas or facilities, intended for such housing based solely on their identification or status. There have not been any judicial findings or consent decrees at SCI Albion that would mandate housing contrary to these provisions.

Policy, Materials, Interviews and Other Evidence Reviewed:

* Completed Pre-Audit Questionnaire submitted by SCI Albion

* Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;

* Documentation evidencing: PRAT user guide; Institutional Sexual Assault perpetrator and Sexual Assault victim databases; Gender Review Committee Checklist; WEBTAS database; inmate housing assignment roster

* Interviews with: PCM; Staff responsible for risk screening; random sample of transgender/intersex inmates;

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Agency Policy DC-ADM 008 instructs that "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. (28 C.F.R. §115.43[a]) (28 C.F.R. §115.68)." . Interview with the institution Superintendent revealed that RHU housing is the last option for inmates at risk of sexual victimization, indicating that no inmates were placed on that unit for such reasons within the last 12 months.</p> <p>The above notwithstanding, the Initial Response Checklist has a section that provides justification for appropriate temporary housing, including restrictive housing, for the alleged victim. The provisions for such placement are clearly articulated on the form. Consistent with the Policy provisions, there have been 0 inmates at SCI Albion who were at high risk of sexual victimization and subsequently placed in restrictive housing.</p> <p>In discussion with RHU supervisor, no inmates have been housed in RHU adherent to the provisions of this standard, however appropriate policy instructions are in place to provide programming, out of cell activities and privileges, education, and work assignments. To this extend DC-SDM 008 states that : "e. 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 access to these opportunities, the facility shall document in the Involuntary Administrative Custody Services Access Restriction Form (Attachment 2-C): (28 C.F.R. §115.43[b])</p> <p>(1) the opportunities that have been limited; (28 C.F.R. §115.43[b][1]) (2) the duration of the limitation; and (28 C.F.R. §115.43[b][2]) (3) the reasons for such limitations. (28 C.F.R. §115.43[b][3])"</p> <p>Furthermore, the policy provisions outline the need for evaluation of continued placement at least every 30 days. Interview with staff who supervise inmates in RHU supports the findings that no inmates are housed in RHU for any period of time, consistent with provisions of this standard. Interviews with inmates housed in RHU based on PREA safety issues were not conducted, as their placement in involuntary restrictive housing was for reasons other than the threat of sexual victimization.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; DC-ADM 802, Administrative Custody Procedures;</p>

* Documentation evidencing: involuntary AC for less than 24 hours while completing the assessment. (28 C.F.R. §115.43[a] (28 C.F.R. §115.68)." . The above notwithstanding, the Initial Response Checklist

* Interviews with: PCM; staff who supervise inmates in restrictive housing;

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Agency Policy allows for a variety of mechanisms to report sexual abuse, sexual harassment and retaliation in confinement setting. DC-ADM 008 states that "1. A report, complaint, or allegation of sexual abuse, sexual harassment and retaliation, as defined in the glossary of terms for this procedures manual, staff neglect or violation of responsibilities that may have contributed to such incidents can be reported by several means, as outlined below. (28 C.F.R. §115.51[a])". Tour observations revealed that PREA posters are available throughout the institution and provide instructions on reporting of incident sexual abuse and sexual harassment. Interview with the PCM revealed that the Agency website offers a third party reporting method as do the posters, providing contact information for Pennsylvania Coalition Against Rape, which is not associated with Pennsylvania Department of Corrections. The information from this reporting mechanism is forwarded to Central Office for further follow up. Inmates have the opportunity to remain anonymous through this process.</p> <p>When interviewed, staff reported that they are aware of a variety of ways inmates are able to make a report, such as report to staff, write to Central Office or have family members make reports for them. Random sample of staff (25 interviewed) and a volunteer also indicated that they always accept verbal or anonymous reports. Additionally staff noted that TipSubmit provides for an opportunity to make a private report.</p> <p>DC-ADM 008 requires that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Review of the PREA database over the past 12 months showed the methods by which an allegation was made. A variety of reporting methods, although primarily verbal or written reports to staff, is consistent with the policy provisions. Interviews with staff (random sample of 25) revealed that they have comprehensive knowledge of their reporting responsibility and are required to submit a prompt written report detailing the allegations. Review of DC-121s (random sample of 6 reports) supports these findings. Interviews with 21 inmates support the fact that they are made aware of the variety of methods that are available to report abuse and sexual harassment in confinement during the orientation, as well as through the handouts and posters visible throughout the institution. Inmates notes they are able to make verbal, written disclosures or have other inmates or friends and family make reports on their behalf.</p> <p>The Agency has established a process for staff, contractors and volunteers to report instances of sexual abuse privately. Posters provide a website www.tipsubmit.com which allows individuals to submit a report online privately. Staff, volunteers and contractors are informed of their reporting responsibility as part of the annual PREA training and refreshers and posters made available throughout the facility.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: Agency website; posters; brochures; PREA allegations database;

DC-121; investigative files; PREA lesson plans
 * Interviews with: Random sample of staff; random sample of inmates;

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The Agency does not have a grievance procedure for dealing with inmate grievances regarding sexual abuse. DC-ADM 008 states "6. 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>Institution PCM reports that he Security Office/PCM/designee shall be responsible for notifying the Shift Commander for any allegations requiring the implementation of checklist procedures as outlined in Section 4 of this procedures manual. (28 C.F.R. §115.52[a])". There have been no allegations of sexual abuse submitted through the grievance process in the last 12 months.</p> <p>Interview with PCM revealed that while the grievance process is not set up for reporting of allegations of sexual abuse and sexual harassment, in the instances such allegations are received through this channel, they are forwarded to the PCM and the Security Office for investigation.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Interviews with: PCM</p>

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>SCI Albion provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. DC-ADM 008 states that "2. The PCM shall ensure that inmates are offered and provided with access to outside victim advocates for emotional supportive services related to sexual abuse which has occurred in a confinement setting. During non-working hours, the Shift Commander shall be responsible to ensure the aforementioned support services. Supportive services may be provided via a variety of methods including in person, during a non-monitored phone call, and/or in writing. The preferred service delivery method is in person in a confidential setting. (28 C.F.R. §115.53[a])".</p> <p>The institution has a signed an MOU with Crimes Victims Services of Erie County (CVC) who are available to the inmates on a weekly basis (standing appointments every Monday) or more frequently as needed. Contact information for CVC is made available via brochures and posters throughout the institution and was verified through tour observations. Random sample of 10 inmates were questioned about the services available to them and they indicated that they were aware of the support groups and the advocate from the rape crisis center. Two inmates who reported sexual abuse noted that they have had contact with the outside service providers for emotional support. All of the interviewed inmates (21) stated that they were aware of the limits of confidentiality associated with the services that were provided to them, however were not able to articulate the specific mandatory reporting rules. It should be noted, however, that the 2 inmates who reported sexual abuse stated that they were informed of what remains private and what does not at the time of the meeting but they could not recall at the time of the interview.</p> <p>SCI Albion provides accommodations and coordinates the on-site services provided by CVC staff. This was verified through a telephone interview and witnessed during the on-site portion of the audit. Interviews with 2 inmates revealed that they have received the services from CVC staff, which is a rape crisis center. Both of the interviewed inmates were satisfied with the quality and frequency of services provided.</p> <p>SCI Albion maintains copies of the MOU signed with CVC, which were reviewed as part of this audit.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: MOU with CVC; posters; brochures * Interviews with: CVC staff; random sample of inmates; inmates who reported sexual abuse;

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency provides a variety of methods to facilitate third-party reporting of inmate sexual abuse or sexual harassment. DC-ADM 008 states that "1. The Sexual Abuse Reporting Address is an option for the general public to report an allegation of sexual contact. The reporting address is: BCI/PREA Coordinator, 1800 Elmerton Avenue, Harrisburg, PA 17110. 2. A writer may choose to include his/her name and contact information, but it is not necessary in making a report; complaints can be made anonymously. Reports can also be submitted online at www.tipsubmit.com. (28 C.F.R. §115.54)"</p> <p>This information is made available to the inmates and the members of the public via posters throughout the institution, noting the www.tipsubmit.com website for private reporting. The agency website allows for public reports of instances of sexual abuse and sexual harassment, as well as contact information for the PREA Coordinator in the Central Office. The posters are available in both English and Spanish languages and additional information is provided to the inmates in the form of PREA handouts.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: Agency website; www.tipsubmit.com website; posters; brochures; handouts;

115.61	Staff and agency reporting duties
	<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 1485 450">Agency policy DC-DM 008 states that "1. 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> <ul data-bbox="252 456 1394 658" style="list-style-type: none"> 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 <p data-bbox="252 667 1453 745">NOTE: The incidents listed above may have occurred in any confinement facility, whether or not it is affiliated with the Department. (28 C.F.R. §115.61[a])</p> <p data-bbox="252 797 1485 1218">Interviews with random sample of 25 staff and during the institution tour confirmed that staff are familiar with their reporting responsibilities and demonstrate knowledge and understanding of reporting mechanism, follow through and documentation. Staff report that in the event sexual abuse or retaliation is disclosed to them , they are required to report the incident to the Shift Commander and file a written report. Institution staff understand, and the Agency Policy supports, provisions of this standard. During the interviews staff reported that they understand their responsibility to maintain element of confidentiality to the extent necessary to comply with the standard, meaning that only pertinent information is disclosed on the need to know basis. Dissemination of relevant information is consistent with the need to make informed decisions and protect treatment, housing, programing, security and investigative interests.</p> <p data-bbox="252 1270 1485 1648">Agency Policy supports the need to comply with provisions of this standard noting that "2. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse in accordance with Subsection C.1. above, to inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services. (28 C.F.R. §115.61[c])". Interviews with one medical and one mental health staff revealed that inmates are informed on limits of confidentiality surrounding the reporting requirements under this standard and, while one of the interviewed staff never experienced disclosures of sexual abuse or harassment, she was aware that they are required to report any knowledge, suspicion or any information on this matter.</p> <p data-bbox="252 1700 1485 2154">Interviews with the institution Superintendent and review of inmate records noting dates of birth and dates of admission revealed that there have been no youth housed at SCI Albion in the last 12 months. Allegations involving vulnerable adults as potential victims under a State or local vulnerable persons statute, the agency institution would report the allegation to the designated State or local services agency under applicable mandatory reporting laws and consistent with the Agency Policy 1.1.16 mandatory reporting guidelines ("5. If the alleged victim is under the age of 18, the Department shall refer the allegation to the designated State or local services agency under applicable mandatory reporting laws as outlined in Department policy 1.1.16, "Mandatory Reporting Guidelines." (28 C.F.R. §115.61[d])). Superintendent noted that instances which would require such reporting did not occur in the last 12 months at SCI Albion.</p>

Review of 6 random investigative reports and interviews with 4 random staff showed that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are being referred to the designated investigators at SCI Albion.

Policy, Materials, Interviews and Other Evidence Reviewed:

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;
- * Documentation evidencing:
- * Interviews with: Superintendent; Agency PREA Coordinator; random sample of staff;

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The Agency policy DC-ADM 008 informs that "Upon notification of a report of sexual abuse involving sexual contact, the Shift Commander/designated security staff shall initiate the Shift Commander Checklist (Attachment 4-A) and:</p> <ol style="list-style-type: none"> 1. ensure that the alleged victim and alleged abuser are separated. (28 C.F.R. §115.64[a][1]). Determine the least traumatizing placement for the alleged victim, which may be the same or different general population unit". <p>Staff responsibilities and the agency protection duties were discussed during the interviews with the Superintendent and a random sample of 4 staff. Responses show thorough understanding of the protection duties under this standard, including, but not limited to separation of the alleged victim and the perpetrator; change in housing assignments; institution transfer, and other options as deemed appropriate. Staff also reported that they have responsibility to take immediate actions to ensure safety of the alleged victims.</p> <p>Review of a random sample of 6 investigative records showed appropriate actions by the first responders, including separating the inmates and taking the necessary steps to ensure long term safety for the alleged victim. SCI Albion reports that there has been one instance in the last 12 month in which the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse. By reviewing records of the incident it became evident that protective actions were taken immediately, as indicated in the policy, and the inmate was transferred to another facility.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: investigative records * Interviews with: Superintendent; random sample of staff

115.63	Reporting to other confinement facilities
	<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 1477 663">Agency Policy DC-DM 008 dictates that "a. An inmate may file a report of sexual abuse sustained while confined at another facility. (28 C.F.R. §115.63[a]) b. It is the Facility Manager/designee's responsibility to notify the head of the facility in which the reported abuse occurred. (28 C.F.R. §115.63[a]) 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-B). 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. (28 C.F.R. §115.63[b][c])".</p> <p data-bbox="252 712 1477 1003">SCI Albion reports that six allegations were received alleging that an inmate was abused while confined at another facility. Review of 2 records showed response consistent with the Agency Policy and provisions of this standard. Facility in which sexual abuse alleged to have occurred was notified within at least 72 hours of initial disclosure. Original disclosure and all pertinent information was documented in a form Attachment 3-B and was forwarded to the other facility. During the interview with the Superintendent, it was noted that all and any allegations received are forwarded to the appropriate facility "within a day" for follow up.</p> <p data-bbox="252 1052 1477 1344">The Superintendent reports that in the event of allegations received from other institutions of sexual abuse having occurred at SCI Albion, the same process is in place. Upon receipt of an allegation, it is promptly forwarded to the PCM and the PREA investigators for follow up. Verification of the documented cases- SCI Albion reports two in the last 12 months- showed that SCI Albion leadership ensures prompt investigative efforts upon receipt of the notification. Information was acted upon by the investigator within 24 hrs of receipt. Additionally, tracking of the inter-facility reporting is done through the PREA database.</p> <p data-bbox="252 1442 1477 1688">Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: * Interviews with: Superintendent; PCM</p>

115.64	Staff first responder 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 1465 575">Agency policy DC-ADM 008 and Local Policy DC-AD 008 outline the institution's response process for allegations of sexual assault and sexual harassment. DC-ADM 008 provides a broad guideline consistent with the provisions of this standard and the Local Policy informs of the necessary steps specific to SCI Albion. Additionally, many staff (8) who were interviewed as part of this audit were in possession of "pocket emergency response cards", an easy-access reference to specific response steps.</p> <p data-bbox="248 629 1441 831">In review of the instructions for first responders it was noted that the policy instructs that responding staff "b. immediately separate the alleged victim and alleged abuser; (28 C.F.R. §115.64[a][1])". This is consistent with the checklist provided in the Local Policy that govern response of staff at SCI Albion. Additional steps outlined in both, the Agency and the Local Policies, include the following:</p> <ul data-bbox="248 842 1474 1088" style="list-style-type: none"> -Preservation and protection of the crime scene until appropriate steps can be taken to collect any evidence; -If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and ensure that the abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. <p data-bbox="248 1142 1481 1601">Interviews with 2 staff whom acted as first responders showed knowledge and understanding of the policy provisions. Staff indicated that they immediately separated the alleged victim and the abuser, secured the cell in which the abuse was alleged to have taken place and notified the Shift Commander. Because of the time frame that did not allow for collection of usable evidence, the inmates were not informed of the need to refrain from drinking, eating, smoking or any other actions that may result in destruction of evidence. The non-security staff member stated that they informed security immediately and maintained separation between the alleged victim and the abuser. Information received was supported by the content of the inmate's interviews (2 interviews with inmates who reported sexual abuse), who noted that they were immediately separated from the alleged abuser and questioned about he details of the incident.</p> <p data-bbox="248 1655 1465 2029">SCI Albion reports that there have been 105 allegations of inmate sexual abuse in the last 12 months, when the first responder staff was a security staff member. Three of those were made within the time frame that allowed for collection of usable evidence. Additionally, in instances where the first staff responder was not a security staff member, the responder requested that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. There were 32 instances of such allegations. Review of documentation revealed that staff responded in accordance with the established policy and the in adherence to the provisions of this standard, as noted above. This was not verified through the interviews, but through review of a random sample of 6 investigative files.</p> <p data-bbox="248 2125 1026 2161">Policy, Materials, Interviews and Other Evidence Reviewed:</p>

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;
- * Documentation evidencing: pocket cards;
- * Interviews with: staff who acted as first responders; random sample of inmates who reported sexual abuse

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>SCI Albion has developed 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. It is documented in a Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual ALB 001. Policy states that "The purpose of this policy is to establish a consistent process for SCI Albion to track, document and monitor all reports of sexual abuse, sexual harassment and signs of retaliation following these reports".</p> <p>During his interview, the institution Superintendent indicated that the Local Policy serves as the coordinated response plan which went into effect on March 28, 2017. Staff were introduced to this policy as a way of providing guidance on the process and the resources available to staff to effect a coordinated response. Reviewing the content of the Policy revealed that the document is more than a means to a formal recording system of the allegations. While having many functions, it outlines, step by step, the actions to be taken in effort to provide a comprehensive response to allegations of sexual abuse and sexual harassment that is specific to this facility. Beginning with notifications to the Shift Commander, following with a multi-disciplinary approach in effort to coordinate actions between many departments, the Policy provides a variety of checklists and forms to be completed for a thorough response to an allegation.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual ALB 001 * Documentation evidencing: sample of investigative files; medical and mental health records * Interviews with: Superintendent; PCM

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion
	<p>The Agency's last PREA audit was held in March 2017, there have been no new collective bargaining agreements entered on after this date. Interview with the institution Superintendent supports this finding.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: Collective Bargaining agreements * Interviews with: Superintendent

115.67	Agency protection against retaliation
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Agency Policy DC-ADM 008 instructs that all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other inmates or staff . DC-ADM 008 also informs that if any individual, not affiliated with Pennsylvania DOC, who cooperates with the investigative efforts reports fear of retaliation, he/she will be subject to protection under the Policy. The Local Policy also designates which staff members or departments are charged with monitoring for retaliation; specific list staff charged with these duties are documented on a spreadsheet .</p> <p>Review of a random sample of 6 Retaliation and Monitoring forms (Attachment 2-B) showed a thorough and consistent effort at SCI Albion to ensure monitoring of the inmates who report allegations of sexual abuse and sexual harassment. Interviews with staff charged with such monitoring (counselors and administrative staff) revealed that they receive consistent notifications on the allegations that are being reported and are assigned monitoring duties. A tracking database is created to check on the progress of monitoring. It should be noted that contacts with inmates to assess instances of retaliation and ensure safety occur at the following intervals: 96 hrs, 15 days, 30 days, 60 days and 90 days and periodic checks. Additional monitoring past the 90 days mark is established in cases that warrant such follow up, however, in the last 12 months there have been no such cases.</p> <p>Interviews with the Superintendent and counselors shows that a variety of measures are put in place to ensure staff and inmate safety. These measures include alternative housing within SCI Albion, facility transfers for either the alleged abuser or the alleged victim, separation from staff and/or other inmates. Inmates who reported sexual victimization indicate their satisfaction with the institution response, as it relates to the separation from the alleged abusers. Three inmates were questioned on the institution efforts to ensure protection. On one occasion the inmate reported that "nothing has been done and the guy is still here", referring to the facility's failure to separate the alleged abuser from the victim. Review of the documentation particular to this case showed that his statement was not accurate, as the housing assignments clearly demonstrate immediate effort to move the alleged abuser to a different housing unit and eliminate any possibility of contact. Further review showed that opportunities for contact between the two inmates became possible only after the sexual harassment investigation was concluded as unfounded. Prior inquiry revealed that no inmates are housed in Restrictive Housing Unit in order to ensure their safety from sexual victimization. For this reason interviews with RHU inmates were not held.</p> <p>SCI Albion considers the following factors when monitoring for retaliation: the conduct and treatment of inmates or staff, inmate disciplinary reports, housing, or program changes, negative performance reviews or reassignments of staff (these factors are documented in the Attachment 2 B). While SCI Albion reports zero instances of retaliation against the staff or inmates who reported allegations of sexual abuse or sexual harassment, interviews with 2 staff who are charged with monitoring for retaliation show knowledge and understanding of measures to be taken if such instances were to occur, such as separation and/or disciplinary actions. Interview with the institution Superintendent also shows that staff or inmates who</p>

engage in retaliation are subject to disciplinary sanctions, up to and including termination in the event of retaliation by staff. Additionally, the Superintendent noted other options available, such as inmate relocation to other facilities, separation from the individual engaged in retaliation and counseling.

Review of email notifications provided to staff to ensure monitoring duties, documentation of monitoring and appropriate follow through by all involved staff reveals a concentrated and well organized effort that goes above and beyond the provisions of this standard to ensure inmate and staff safety.

Policy, Materials, Interviews and Other Evidence Reviewed:

- * Completed Pre-Audit Questionnaire submitted by SCI Albion

- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;

- * Documentation evidencing: Attachment 2-B; housing assignments; retaliation monitoring e-mail communications;

- * Interviews with: Superintendent; Designated Staff Member Charged with Monitoring Retaliation; Inmates who Reported a Sexual Abuse

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Agency Policy DC-ADM 008 prohibits placement of inmates who allege sexual abuse or sexual harassment in involuntary segregated housing, unless all other housing alternatives have been deemed unacceptable to effect safe separation between the alleged abuser and the alleged victim. The policy 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. (28 C.F.R. §115.43[a]) (28 C.F.R. §115.68) ".</p> <p>SCI Albion reports that there has been zero instances in the last 12 months in which other means of separation and housing alternative to involuntary segregation could not be facilitated. Review of random sample of documentation, such as investigative files (6), and housing assignments, supports this claim.</p> <p>Interviews with the institution Superintendent and Restrictive Housing Unit (RHU) staff showed that involuntary segregation has never been used as means of separation of alleged victims and abusers and house a potential victim of an allegation. Interview with one inmate in RHU who reported sexual abuse revealed that his placement in involuntary segregated status was not related to his disclosure of allegations of sexual abuse.</p> <p>It should be noted that while such placements have not occurred in the last 12 months, DC-ADM 008 lists provisions to address such cases should they occur. The policy notes the need for continuation for out-of-cell activities, programs, privileges, education, and work opportunities for inmates involuntarily housed in RHU due to allegations of sexual abuse consistent with standard 115.43.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: housing assignments; investigative files * Interviews with: Superintendent; Staff who Supervise Inmates in Segregated Housing; Inmates in Segregated Housing who reported allegations of sexual victimization

115.71	Criminal and administrative agency investigations
	<p data-bbox="248 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 1484 831">Agency Policy and Local Policy DC-ADM 008 outline approach for addressing administrative investigations of sexual abuse and sexual harassment in confinement. Interview with investigative staff supports the knowledge and adherence to the provisions of the policy by conducting investigations of all allegation, including third-party and anonymous reports. DC-ADM 008 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. (28 C.F.R. §115.22[a][d]) (28 C.F.R. §115.61[e]) (28 C.F.R. §115.71[a])". Interview with one investigative staff shows that all allegations of sexual abuse or sexual harassment at SCI Albion are investigated. Investigative approach includes separation of the involved parties; interviews with the alleged victims and the abuser; review of the incident location; consideration of any contributing factors (LGBTI, gang related, coercion, etc.); witness reports; evidence; and other variables particular to the specifics of the allegation.</p> <p data-bbox="248 887 1477 1346">Only individuals trained in investigating allegations of sexual abuse and sexual harassment in confinement are task with this responsibility. Lesson plans for this specialized training includes topics on gathering and preservation of direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interviews with alleged victims, suspected perpetrators, and witnesses; review of prior reports and complaints of sexual abuse involving the suspected perpetrator; information on compelled interviewing and Garrity rules; referral for outside law enforcement for prosecution, etc. These subjects were discussed with the investigative staff during the interview and it was reported that the training adequately covered all topics leaving the investigator with thorough knowledge for real life application. Additionally, review of six investigative files showed appropriate application of training which translates into a thorough investigative approach.</p> <p data-bbox="248 1402 1477 1771">Review of these investigative files showed that SCI Albion retains all reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years (the five-year requirement was only verified through policy provisions, as there are no investigative files that date this far). Investigative staff report that the departure of the alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation. Evidence shows that in one instance when the abuser is released or transferred to another facility, communications occurs with Central Office to ensure continuation of the investigative process.</p> <p data-bbox="248 1827 1461 2074">SCI Albion staff does not conduct investigations of criminal nature and refer those to Pennsylvania State Police (PSP). MOU signed with PSP shows that both agencies adhere to the mandates of the PREA standards pursuant to this section. Review of the record of six investigative files and interviews with the Superintendent and the investigative staff show that SCI Albion has developed a positive relationship with PSP, with both agencies staying informed on the progress of the investigations.</p> <p data-bbox="248 2130 1026 2163">Policy, Materials, Interviews and Other Evidence Reviewed:</p>

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;
- * Documentation evidencing: MOU with PSP; sample of investigative files; training records of investigators; lesson plans
- * Interviews with: Superintendent ; Agency PREA Coordinator, PCM, Investigative staff; random sample of staff.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Agency imposes a standard no higher than preponderance of the evidence in determining whether allegations sexual abuse and sexual harassment are substantiated. DC-ADM 008 states that" 9. 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. (28 C.F.R. §115.72)" Interview with one investigative staff and documentation of the administrative findings support this provision, indicating that the burden of proof of "more likely than not" is used to deem allegations as substantiated or unfounded.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: sample of investigative files * Interviews with: Investigative staff

115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Agency policy requires that inmates who made allegation of sexual abuse, sexual harassment or retaliation are informed of the outcome of the investigation. DC-ADM 008 states "k. The PCM shall inform the alleged victim(s) as to whether the investigation is found to be substantiated, unsubstantiated, or unfounded. (28 C.F.R. §115.73[a]) All notifications shall be made and documented in accordance with Section 8 of this procedures manual. ". SCI Albion notifies the inmates whether the findings are substantiated, unsubstantiated or unfounded and require a written confirmation from the inmate, by signing inmate verification forms. Agency policy mandates that all notifications to the inmates are documented and review of six investigative files shows that they are. The investigative staff reports 105 investigations of sexual abuse/sexual harassment which took place at SCI Albion. In each instance the alleged victim was notified of the outcome. Superintendent of the institution also noted this to be his expectation.</p> <p>DC-ADM 008 states that "3. Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the PCM shall subsequently inform the inmate when any of the following occurs: (28 C.F.R. §115.73[c])</p> <ul style="list-style-type: none"> a. the staff member is no longer posted within the inmate's unit; (28 C.F.R. §115.73[c][1]) b. the staff member is no longer employed at the facility; (28 C.F.R. §115.73[c][2]) c. the Department learns that the staff member has been criminally charged related to sexual abuse within the facility; or (28 C.F.R. §115.73[c][3]) d. the Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility. (28 C.F.R. §115.73[c][4]) <p>Review of six inmate notification forms showed the staffing update section, which has been properly completed in the reviewed files of allegations of staffs sexual abuse/sexual harassment. Interviews with 2 inmates who reported sexual abuse showed that they were notified of the outcomes as well as removal of staff from the housing unit. This is also consistent with the inmate's signature on the form.</p> <p>With respect to inmate-on-inmate allegations, DC-ADM 008 reads: "4. Following an inmate's allegation that he/she has been sexually abused by another inmate, the PCM shall subsequently inform the alleged victim whenever: (28 C.F.R. §115.73[d])</p> <ul style="list-style-type: none"> a. the Department learns that the alleged abuser has been criminally charged related to sexual abuse within the facility; or (28 C.F.R. §115.73[d][1]) b. the Department learns that the abuser has been convicted on a charge related to sexual abuse within the facility. (§28 C.F.R. §115.73[d][2]) <p>There have been no such instances at SCI Albion within the last 12 months.</p> <p>It is determined that SCI Albion exceeds the requirement of this standard, in that it requires inmate signed verification of the investigative outcomes, as well signed verification of any staffing changes or criminal actions that ensued. Two inmates who reported allegations of sexual harassment stated during the interview that the notification was provided to them.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p>

- * Completed Pre-Audit Questionnaire submitted by SCI Albion
- * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;
- * Documentation evidencing: sample of investigative files; inmate verification forms;
- * Interviews with: Superintendent; PCM; investigative staff; random sample of inmates who reported allegations;

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Agency policy DC-ADM 008 Section 7 instructs that "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. (28 C.F.R. §115.76[a])."</p> <p>While there have not been any instances when staff violated this policy at SCI-Albion in the last 12 months, the Human Resources and Labor Relations Policy 4.1.1 states that "In accordance with the Prison Rape Elimination Act of 2003, Standard §115.76 (b), termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse". Additionally, the policy reads that "In accordance with the Prison Rape Elimination Act of 1993, Standard §115.76 (c), disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories" and DC-ADM 008 further states that "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. (28 C.F.R. §115.76[d])".</p> <p>Compliance with this standard was verified through the policy provisions. Interview with HR staff and Investigative staff showed that there have never been an instance of staff discipline related to violation of PREA. Review of random sample of six investigative files revealed no substantiated staff-on-inmate cases of sexual abuse or sexual harassment.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Policy 4.1.1 Human Resources and Labor Relations Bulletin *Interview with HR staff; investigative staff</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DC-ADM 008 indicates that "Contractors and volunteers are subject to the following:</p> <ol 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 (28 C.F.R. §115.77[b]); 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. (28 C.F.R. §115.77[a]) <p>Interview with the institution Superintendent and review of the random sample of six investigative files revealed that there have not been any instances in which a contractor or a volunteer engaged in sexual abuse or harassment and therefore none had been prohibited from contact with inmates or reported to law enforcement agencies during the previous 12 month audit cycle. In the event of any such misconduct, the institution has appropriate policies in place, as noted above, and would take appropriate remedial measures and prohibit further contact of contractors or vendors with inmates.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Interviews with Superintendent

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DC-ADM 008 notes that "1. Inmates shall be subject to disciplinary sanctions pursuant to the formal disciplinary process, following an administrative finding that the inmate engaged in inmate on inmate sexual abuse or following a criminal finding of guilt for inmate on inmate sexual abuse. (28 C.F.R. §115.78[a]).</p> <p>The policy further notes that "2. Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. (28 C.F.R. §115.78[b]).</p> <p>3. The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed. (28 C.F.R. §115.78[c])</p> <p>4. When an inmate is found guilty of a Class 1 Misconduct related to sexual abuse, the Unit Manager shall refer the inmate to the Sex Offender Treatment Program for evaluation to determine whether or not the inmate is appropriate for the program, and if the inmate will be required to complete the program as part of the sanctions or as a condition to access programming or other benefits. (28 C.F.R. §115.78[d])</p> <p>5. The facility may discipline an inmate for sexual contact with staff only if it is substantiated that the staff member did not consent to such contact. (28 C.F.R. §115.78[e])</p> <p>6. For the purpose of disciplinary action, a report of sexual abuse made in good faith, based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. (28 C.F.R. §115.78[f])</p> <p>7. 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. (28 C.F.R. §115.78[g])</p> <p>SCI Albion prohibits all sexual activity between inmates. Review of the random sample of records showed that there have been no substantiated cases of inmate sexual abuse or sexual harassment at SCI Albion in the last 12 months. Institution Superintendent reports a wide range of sanction that may be imposed for such misconduct, noting that sanctions would be proportionate to the violations which occurred.</p> <p>One mental health staff member was interviewed and reported that while the policy provisions mandate appropriate referrals for treatment for the perpetrators of the misconduct, she is not aware of any instances of substantiated cases where such referrals would have been made. This is supported by the review of random sample of six investigative files, indicating that there have been no substantiated allegations at SCI Albion in the past 12 months.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed: * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act</p>

(PREA) Procedures Manual; DC-ADM 801, Inmate Discipline Procedures Manual;

* Documentation evidencing: Investigative reports; Misconduct records

* Interviews with: Superintendent; mental health staff

115.81	Medical and mental health screenings; history of sexual abuse
	<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 573">Upon disclosure of instances of sexual victimization during a risk assessment screening (PRAT) all inmates are offered a follow up meeting with medical/mental healthcare provider. During the interview of one inmate who reported victimization during PRAT assessment, the inmate indicated that he was offered a meeting with clinical staff, which he accepted. The meeting took place within a week. At SCI Albion 100 inmates made such disclosures in the past 12 months.</p> <p data-bbox="252 624 1481 960">Agency policy DC-ADM 008 indicates that "If the screening pursuant to PREA standard 115.41 indicates that a prison or jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow up meeting with a medical or mental health practitioner within 14 days of the intake screening or sooner, if clinically indicated". This information is documented in the medical incident injury report, as well as DC-121. Interviews with one inmate who disclosed sexual victimization during PRAT and review of corresponding documentation is consistent with the policy requirement and adhere to this standard.</p> <p data-bbox="252 1012 1485 1258">Inmates who are known to have perpetrated sexual abuse are offered a follow up with medical/mental health providers. Such follow up is offered within 14 days of disclosure. Review of the documentation showed that the actual follow up took place within 3 days of referral. Interview with a mental health provider revealed that a recent reminder went out to staff to document the instances when inmates refuse the offered care. She also stated that psych staff area ware of this requirement and provide such care routinely.</p> <p data-bbox="252 1310 1481 1601">Information related to instances of sexual abuse and victimization is shared with other institution staff, but is limited to those who make informed decisions on programming, housing and work placements (DC-ADM 008). Information system used to track offender details and movement is populated with "Housing concern" statement for those with high scores on PRAT. This allows designated staff to consult a tracking database to determine the specifics of the housing concern. SCI Albion maintains an "Institution Sexual Predators" and "Potential Sexual Assault Victims" databases for such purposes.</p> <p data-bbox="252 1653 1469 1854">Interviews with medical and mental health staff revealed that a consent form is signed by the inmates which addresses the limits of confidentiality. A separate consent form is completed before reporting about prior sexual victimization outside of an institutional setting. They are documented in Attachments 2-K and 8-A. Review of a sample of these forms (3) proves to be consistent with the provisions of the standard.</p> <p data-bbox="252 1906 1024 1939">Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul data-bbox="252 1951 1474 2157" style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: PRAT screenings; documentation of notifications to other facilities; ICAR database; mental health informed consent verifications; informed consent-

disclosure of victimization forms; sample of medical and mental health records; DC-121
* Interviews with: Medical and Mental Health staff; staff responsible for risk screening; random sample of inmates who disclosed sexual victimization during risk screening

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Review of two investigative files of inmates who required medical attention showed that the inmates received unimpeded access to medical and mental health care, which is consistent with the language in DC-ADM 008. One inmate who reported sexual abuse was interviewed and indicated that he was transported to an outside healthcare provider for SANE care within 45 minutes of the disclosure. Inmate also reported examples of care provided to him: blood draws, medication and follow up care. SCI Albion medical staff report in an interview that they follow a uniform response protocol and make appropriate determinations on the nature and scope of services to be provided to the inmates. Review of medical files showed that appropriate documentation is maintained on the institution level and is supplemented by the documentation provided by the hospital staff.</p> <p>Uniform response protocol, which is outlined in the Local Policy DC-ADM 008 is strictly followed, as supported by the information derived from interviews with staff who acted as first responders and is supported by the review of a sample of six files. Interviewed staff stated that one of the steps taken by them as first responders was notification to medical. In the absence of medical staff on site, the Shift Commander makes a determination on the scope of medical services to be provided and makes appropriate accommodations for the inmate to be transported to an outside healthcare provider. (DC-ADM 008 "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. (28 C.F.R. §115.82[b])").</p> <p>Policy 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. (28 C.F.R. §115.83[g]) (28 C.F.R. §115.21[c]) (28 C.F.R. §115.82[d])</p> <p>d. All facilities shall provide alleged victims with medical and mental health services consistent with the community level of care. (28 C.F.R. §115.83[c]).</p> <p>Interviews with one medical staff and one inmate who reported sexual abuse as well as review of medical files revealed that inmates were offered access to STD prophylaxis either at the outside healthcare facility or at SCHI Albion, this was provided without any financial cost to the inmate.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; Local Policy DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: Shift Commander checklist; Psych checklist; emergency response cards; medical incident/injury reports; * Interviews with: Medical and Mental Health staff; staff who acted as first responders; inmates who reported sexual abuse;



115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>DC-ADM 008 informs that "The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have allegedly been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. (28 C.F.R. §115.83[a])". Documentation gathered from PRAT and ICAR database shows compliance with this provision. Sample of six entries was reviewed noting that all inmates were offered appropriate mental health care. Interviews with one mental health practitioner and one psych staff informed that the treatment contains follow up services, as necessary and referrals to outside providers.</p> <p>Review of four medical records shows that the inmates receive services which include follow-up services, including testing for STD, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody; specifically, meeting with CVC staff and clinical/medical staff at the institution. The services provided are consistent with the community level of care and many of the services are provided by the community healthcare providers.</p> <p>The policy notes that "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. (§115.83[g])(§115.21[c])(§115.82[d]).</p> <p>d. All facilities shall provide alleged victims with medical and mental health services consistent with the community level of care. (§115.83[c]) (DC-ADM 008). Medical staff report that services associated with care derived from allegations of sexual abuse is free of charge to the inmates. One interviewed inmate also reported that he was not charged for medical care. Review of four medical files showed compliance with this provision.</p> <p>While DC-ADM 008 supports the requirement 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, there have been no substantiated cases of sexual abuse or sexual harassment at SCI Albion since the last audit cycle. Compliance is verified through reliance on the Agency policy.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: ICAR database; random sample of medical and mental health files; * Interviews with: Medical and Mental Health staff; sample of inmates who reported sexual abuse;

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Sexual Abuse Incident Review (SAIR) is completed at the conclusion of each substantiated and unsubstantiated investigation. This is supported by the agency policy DC-ADM 008 stating in part that "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. (28 C.F.R. §115.86[a]) The review shall occur within 15 working days of the receipt of the notification from OSII that the investigation was deemed satisfactory. (28 C.F.R. §115.86[b])". Review of six investigatory files supports this findings.</p> <p>SCI Albion exceeds the mandate of the standard and ensures that the reviews are completed within 15 days of the receipt of the notification on conclusion of the investigation. (115.86(b)).</p> <p>Composition of the Sexual Abuse Incident Review Team is adherent to the standard 115.86 (c) and includes upper-level management officials allowing for input from line supervisors, investigators, and medical or mental health practitioners. DC-ADM 008 outlines that members and whom the team will be chaired by and include "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: (28 C.F.R. §115.86[c])</p> <ol style="list-style-type: none"> 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 (CHCA)/designee; e. Security Office representative; and f. Major of Unit Management or Major of the Guard. <p>Interviews with the institution superintendent, PCM and one member of the SAIR team revealed that during the review process the following factors are considered:</p> <ol style="list-style-type: none"> a. consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (28 C.F.R. §115.86[d][1]) b. 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 was motivated or otherwise caused by other group dynamics at the facility; (28 C.F.R. §115.86[d][2]) c. examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (28 C.F.R. §115.86[d][3]) d. assess the adequacy of staffing levels in that area during different shifts; (28 C.F.R. §115.86[d][4]) e. assess whether monitoring technology should be deployed or augmented to supplement

supervision by staff; (28 C.F.R. §115.86[d][5])

f. consider information such as housing assignment, measures taken as a result of the allegation, need for follow-up for the inmate victim, etc.; and

g. gather information that can help to sensitize staff to possible clues and situations that are present before such incidents may occur. The aim is to help all staff become more proficient at detecting preventable incidents before they occur.

Review of six samples of SAIR documentation supports the policy and interviews with the institution leadership revealed adherence to this practice on a consistent basis. SAIR documents its findings in accordance with DC-ADM 008 and prepares a report for submission to the institution superintendent and PREA Compliance manager. This was verified through the review of SAIR documentation and interviews with PCM and the Superintendent, as well as one other staff who routinely participates in the incident review process. (115.86(d)). One of the reviewed files showed an SAIR recommendation to provide alternative housing for one of the involved inmates to provide long term separation from the accuser. Review of the housing assignment roster showed that such move was made based on the recommendation. This supports compliance with standard 115.86(e).

Policy, Materials, Interviews and Other Evidence Reviewed:

* Completed Pre-Audit Questionnaire submitted by SCI Albion

* Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual;

* Documentation evidencing: SAIR documentation

* Interviews with: Superintendent; PCM; SAIR team member;

115.87	Data collection
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.88	Data review for corrective action
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>During the course of the on-site visit to SCI Albion this auditor had access to any and all areas of the facility (115.401(h)). Appropriate documentation was provided by the facility and any follow up requests from the auditor were fully satisfied by the SCI Albion staff before and during the on-site audit phase. Appropriate access to medical, investigative, clinical files, and other requested files was afforded, including electronically stored information (115.401(i)). Facility administrative team ensured appropriate accommodations in order to conduct private interviews with staff and inmates (115.86(m)). Notice of the audit was provided to the inmates within at least 6 weeks of the on-site visit, allowing inmates to confidentially communicate with the auditor (115.86(n)). This is supported by the correspondence received by the auditor from the inmates at SCI Albion and review of the provisions of confidential correspondence handling.</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <ul style="list-style-type: none"> * Completed Pre-Audit Questionnaire submitted by SCI Albion * Pennsylvania Department of Corrections Policies: DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual; * Documentation evidencing: Notice of Audit; correspondence received from the inmates

115.403	Audit contents and findings
	Auditor Overall Determination: Audited at Agency Level
	Auditor Discussion

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 (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".)	na

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	yes

	monitoring, to protect inmates against sexual abuse?	
	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 consideration the number and placement of supervisory staff 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 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

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

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

	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

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

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

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.)	yes

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.)	yes

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.)	na
	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	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (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?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts 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?	yes

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?	yes
	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.)	yes

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

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

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

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