

PREA Facility Audit Report: Final

Name of Facility: SCI Frackville

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/18/2017

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: Maria Silao-Johnson	Date of Signature: 11/18/2017

AUDITOR INFORMATION	
Auditor name:	Silao-Johnson, Maria
Address:	
Email:	Maria.SilaoJohnson@wisconsin.gov
Telephone number:	
Start Date of On-Site Audit:	09/18/2017
End Date of On-Site Audit:	09/22/2017

FACILITY INFORMATION	
Facility name:	SCI Frackville
Facility physical address:	1111 Altamont Blvd, Frackville, Pennsylvania - 17931
Facility Phone	(570) 874-4516
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:	Kathy Brittain	Title:	Superintendent
Email Address:	kbrittain@pa.gov	Telephone Number:	(570) 874-4516 ext.

Warden/Superintendent			
Name:	Kathy Bittain	Title:	Superintendent
Email Address:	kbrittain@pa.gov	Telephone Number:	(5710) 874-4516 ext

Facility PREA Compliance Manager			
Name:	Kelly OKane	Email Address:	kokane@pa.gov

Facility Health Service Administrator			
Name:	Karen Holly	Title:	Corrections Health Care Administrator
Email Address:	kholly@pa.gov	Telephone Number:	(570) 874-4516 ext.

Facility Characteristics			
Designed facility capacity:	900		
Current population of facility:	0		
Age Range	Adults: 21-75	Youthful Residents:	
Facility security level/inmate custody levels:	CL 4 (house CL2-5)		
Number of staff currently employed at the facility who may have contact with inmates:	370		

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

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

Agency-Wide PREA Coordinator Information			
Name:	David 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.

Overview:

The Prison Rape Elimination Act (PREA) audit at SCI-Frackville was conducted from September 18, 2017, September 19, 2017 and September 22, 2017. Certified PREA auditors Maria Silao-Johnson (lead auditor) and Robin Diebold (assistant auditor) conducted the audit. The audit teams are members of a PREA audit consortium between the states of Wisconsin, Pennsylvania, Maryland, and Michigan. The duration period of the consortium is 2017 through 2019. On day one of the audit, the Auditor conducted an entrance meeting, toured all areas of the facility and began interviews of random and specialized staff and random inmates. On the remaining days, the audit team continued to interview additional specialized staff and random and special population inmates.

During 2016, SCI-Frackville had undergone and completed a PREA Audit. The Final PREA Audit Report, dated July 11, 2016 indicated the onsite audit took place June 13-14, 2016. The 2016 audit report reflected during the previous 12 months, there were 54 allegations of sexual abuse and/or sexual harassment that were received [page 18] and 54 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the facility [page 54].

The Auditor was able to access the Language Translation Telephone line to conduct interviews with LEP inmates. Interviews with LEP inmates and inmates with disabilities indicated they had access to PREA information and was provided PREA education at the facility either in the form of literature or by video. Staff interviewed reported they would use a staff member for translation if they found out an inmate wanted to report a PREA allegation and did not speak English well.

Agency policy (ADM 008, Section 2 PREA Procedures Manual) prohibits youthful inmates (under the age of 18) to be housed at SCI-Frackville. The audit team did not observe any youthful inmates housed at SCI-Frackville during the on-site review.

Agency policy (ADM 008, Section 3 PREA Procedures Manual) prohibits the use of the Grievance system to report sexual abuse by a staff member or inmate-on inmate sexual contact. However, if an inmate files a grievance related to sexual abuse, the Grievance officer shall reject the grievance and forward to the facility Security Office for tracking and investigation.

SCI-Frackville has 10 current investigators who have completed the required Specialized PREA investigation training. A review of training documentation indicated that these ten are trained in accordance with the PREA standards (115.34). The agency level investigators at the Office of Special Investigations and Intelligence (OSII) are charged with tracking and reviewing all PREA related investigations. They will also assist outside law enforcement with criminal investigations any referrals for prosecution.

SCI-Frackville has an active Sexual Abuse Incident Review team that meets regularly in response to each sexual abuse and sexual harassment allegation that was substantiated or unsubstantiated.

Investigative and Personnel files for staff and inmates were reviewed by the lead auditor on site. 21 (all) medical staff training files, 2 complete application packets for new volunteers (for the month of October 2017), 5 logs of inmate PREA education training (5 names selected from targeted inmate interviews), 15 PREA investigations reviewed (Randomly selected by investigation outcome), 2 of which pertained to issues voiced by inmates who submitted confidential correspondence to the Auditor, 2 complete Sexual Abuse Incident Reviews (selected by outcome), 5 electronic inmate PREA screening records (5 names selected from targeted inmate interviews) , and 10 (all) PREA investigator training files. 12 PREA investigations were pending during the time of the audit. SCI-Frackville reported 32 new hires occurred in the previous 12 months and all had criminal background checks completed by OSII (Office of Special Investigations and Intelligence). The auditor reviewed the confirmation emails of the completed checks from OSII.

The Auditor conducted an exit meeting with the facility administration and staff to discuss preliminary findings and the subsequent audit processes and timeframes. The audit team was treated with great hospitality during the visit by all the SCI-Frackville staff to include the agency staff from the central office PREA team. Staff and inmates were made readily available to the audit team at all times for formal and informal interviews. The audit team was provided unimpeded access to all parts of the facility during the on-site review.

Pre-Onsite Audit Phase:

On July 31, 2017, the Auditor sent the facility the PREA Audit Notice (in English and Spanish) to be posted in the facility by August 7, 2017, approximately 6 weeks prior to the audit team's arrival. At the request of the Auditor, audit notices were posted using colored or neon paper. On August 16, 2017, the Auditor received photographic evidence via email demonstrating the posting of these notices in the housing units in the facility, the main entrance of the facility, the attorney interview rooms, unit law library, commissary area, correctional industries laundry, inmate dining room, staff hallway, maintenance common area, medical and treatment waiting rooms, psychological observation areas, visiting room, and the administration area of the facility. The PREA Audit Notices mandated that letters to the Auditor would be handled as confidential correspondence with a few exceptions; the Auditor received three letters from inmates at the designed audit post office box. All three inmates were interviewed during the onsite review.

The SCI-Frackville staff provided the completed Pre-Audit Questionnaire (PAQ) along with supporting documents electronically utilizing the On-line Audit System (OAS) on September 5, 2017 preceding the on-site review portion of the audit. Pre-audit preparation by the Auditor included a thorough review of all documentation and materials submitted by the facility along with the data included in the completed Pre-Audit questionnaire. The documentation reviewed included agency policies, procedures, forms, PREA education materials, training curriculum, organizational charts, posters, brochures and other PREA related materials that were provided to demonstrate compliance with the PREA standards. This review prompted a series of question that were reduced to writing and submitted to the PREA Compliance Manager on September 7, 2017 in the form of an Issue Log to which responses were requested. Answers to the questions were submitted by the PREA Compliance Manager on September 11, 2017 the

week before the on-site portion of the audit and reviewed by the Auditor prior to the on-site review.

Approximately two weeks prior to the on-site portion of the audit, the Auditor requested the facility to compile listings of key administrative personnel, specialized staff, and special population inmates. The Auditor also requested the facility to identify a variety of files for review. The first day of the audit, the PREA Compliance Manager provided the listings of staff and inmates as well as the files requested by the Auditor.

On August 25, 2017 the Auditor conducted a telephone interview with the Sexual Abuse Resource Counseling Center (SARCC) staff that provide victim service advocacy to the inmates at SCI-Frackville. The SARCC staff indicated that they have provided on-site advocacy services for inmates that have alleged sexual abuse at SCI-Frackville and via telephone. The SARCC staff reported that there has been one incident of emotional support provided to an inmate in the past 12 months. There was one face to face meeting and then scheduled telephone calls. The inmate chose to cancel the communication with the SARCC staff as the inmate didn't want to participate if the provider wouldn't see him face to face. The Auditor also conducted a telephone interview with the Sexual Assault Forensic Examiner/Sexual Assault Nurse Examiner (SAFE/SANE) staff at the Reading Hospital Emergency Room prior to arriving at the facility. The SAFE/SANE staff confirmed they were the service providers for SCI-Frackville.

On-Site Audit Phase:

On Monday, September 18, 2017 the audit team arrived and conducted an entrance meeting with the facility administration at 8:00 a.m. After introductions and welcoming remarks by the Superintendent and the Auditor, the discussion focused on the audit schedule and an overview of the process. Questions were answered by the Auditor.

During the three days of the on-site audit, the audit team was provided with private rooms in the administrative, programming, and restricted housing areas of the facility from which to work and conduct confidential interviews. The audit team conducted all of the staff interviews in the security office area or administrative. Inmate interviews were conducted in the programming or the restricted housing areas. Requested inmate files were reviewed in the security office area, the requested staff files were reviewed in the human resources area.

On the first day of the audit after the entrance meeting, the audit team toured the physical plant escorted by the Superintendent, PREA Compliance Manager, and PREA Coordinator. Areas that were toured included Behavioral Management unit, outside recreational pens, Restricted Housing unit, Program Review Committee area, mental health area, medical health area, staff dining room, barber shop, commissary, maintenance, laundry room, computer room, kitchen, inmate dining room, housing units, outside recreation yard, gym, indoor weight room, chapel, new clothing issue area, visiting room, sally port, garage, warehouse, utility plant, and HVAC. The Auditor spoke informally with staff and inmates during the tour which covered all housing and common areas of the facility, day room areas, programming areas, and shower and toilet areas. Notices of the PREA audit (on colored/neon paper) were posted throughout the facility as required by the Auditor.

Site Review. During the on-site review of the physical plant, the Auditor observed, among other things, the facility configuration, location of cameras, staff supervision of inmates, housing unit layout including inmate cells and shower/toilet areas, placement of posters and PREA informational resources, security

monitoring, inmate movement procedures, inmate programming and inmate interaction with staff. SCI-Frackville reported there had been no substantial expansions or modifications to existing facilities. Staffing for security and medical staff are at maximum numbers. An active camera monitoring system Perimeter Intrusion Detection System (PIDS) reviewed monthly for adequate placement, maintenance, or replacement.

The Auditor noted that the inmate shower areas throughout the facility were single showers. On the housing units they were located at the end of each tier (upper/lower) closest to the front of the dayroom. The showers were single showers and had shower curtains to ensure privacy of the inmate taking a shower. The audit team was provided unimpeded access to all parts of the facility and all secure rooms and storage areas in the facility. The tour concluded after approximately 3.5 hours. The Auditor tested the language line to ensure it was operable. SCI-Frackville's PREA Compliance Manager is the facilitator for the language line use as an employee identification number is required for access to the service. The auditor noted on each housing unit locked boxes was available for inmates to submit their grievance/complaints. Designated staff to collect the complaints was responsible for ensuring confidentiality of the contents of the boxes.

Interviews. The audit team conducted formal personal interviews with SCI-Frackville staff and inmates totaling 84 individuals within three days on site. A sample of Inmates from each housing unit was selected in groups of four in alphabetical order to include one from the Behavioral Management Unit.

The audit team interviewed forty-four (44) total inmates, 21 of the inmate interviews were random and 23 were special population inmates (Disabled-1, LEP-2, Inmates who Disclosed Sexual Victimization during Risk Screening-1, Inmates who Reported Sexual Abuse-12, LGBTI inmates-7, Random inmates -21). Inmates were interviewed using the recommended Department of Justice (DOJ) protocol that question their knowledge of a variety of PREA protections generally and specifically their knowledge of reporting mechanisms available to inmates to report sexual abuse or harassment.

The three inmates who wrote to the designed audit post office box were interviewed. One was added to the special population inmate list and two were added to the random interview list. Two of the letters were in reference to sexual harassment comments and one was regarding a sexual abuse that occurred at another facility many years prior. Investigation records verified that the allegations were investigated and the inmates notified of the results.

The audit team interviewed forty-one (41) total facility staff members, 16 of the staff interviews were random and 25 were specialized staff (Administrative HR staff-1, Agency Head-1, Incident Review Team-1, Intake staff-1, Intermediate or Higher Level staff-1, Investigative staff-2, Medical and Mental Health staff-2, PREA Compliance Manager-1, PREA Coordinator-1, PREA Screening staff-1, Retaliation Monitoring staff-1, SAFE/SANE-1, Victim Services Coordinator-1, First Responders-4, Staff who Supervise Inmates in Restricted housing-1, Volunteers and Contractors who May Have Contact with Inmates-4, Superintendent-1).

Staff from each shift was interviewed.

- 1st Shift: 6:00 a.m. to 2:00 p.m.;
- 2nd Shift: 2:00 p.m. to 10:00 p.m.; and
- 3rd Shift 10:00 p.m. to 6:00 a.m.

Overall, the interviews with inmates indicated they are aware of and understand the PREA protections

and the agency's zero tolerance policy. Inmates receive written materials at intake (i.e. Inmate Handbooks, PREA handouts, PREA pamphlet for victim service advocacy, etc.) that provide detailed information about reporting options for sexual abuse and sexual harassment. Subsequent to intake, inmates are provided more comprehensive education on PREA that includes personal instruction in addition to watching a comprehensive PREA education video. PREA posters are placed in every inmate and staff common areas. Inmates were able to articulate to the audit team during formal and informal interviews how to report a PREA allegation. The Auditor's observation of staff interaction with residents was appropriate.

Interviews with staff indicated they received PREA training and could articulate to the audit team the meaning of the agency's zero tolerance policy. Staff understood their roles and responsibilities to prevent, report, and respond to sexual abuse and sexual harassment. A majority of the staff reported they were proud of the work they do.

The audit team appreciated the overwhelmingly positive attitude from the SCI-Frackville staff.

Post-Onsite Audit Phase: The Auditor conducted two interviews after the on-site review due to scheduling availability of the agency staff. On September 27, 2017 a telephone interview by the Auditor was conducted with an Agency Investigator. On September 29, 2017 a telephone interview by the Auditor was conducted with the Agency Head post on-site review. At the conclusion of the final interview, the Auditor ensured that the minimum amount of interviews included a random sample of staff from each shift, a random sample of staff/inmates from each housing unit, targeted staff that have specialized roles and responsibilities, and special population inmates using the interview protocols in the Audit Instrument.

AUDIT FINDINGS

Facility Characteristics:

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

SCI-Frackville is one of 26 facilities operated under the authority of the Pennsylvania Department of Corrections (PA DOC), dedicated in April 16, 1987. SCI-Frackville houses adult male inmates 18-75. The average inmate age is 38.

SCI-Frackville is located on 209 acres at 1111 Altamont Boulevard, Frackville, Pennsylvania. SCI-Frackville is a Maximum-security prison. The pre-audit questionnaire indicated that the average daily inmate count is 1150; the agency website reports the capacity is 1125. There were a total of 1185 inmates housed at the facility at the time of the on-site review. The facility has 435 full time employees.

SCI-Frackville has 6 housing units, 4 General Population units, a Restricted Housing unit and a Special Needs unit. The housing units consist of both cells and dormitory-style housing. One unit has an open bay with partitions that separate the beds into a block style. Most housing units are equipped with toilets in their cell and single showers located at the end of the tiers. Outdoor recreation space is adjacent to the housing area.

Ancillary/service spaces and buildings include a Program Review Committee area, mental health area, medical health area, staff dining room, barber shop, commissary, maintenance, laundry room, computer room, kitchen, inmate dining room, housing units, outside recreation yard, gym, indoor weight room, chapel, new clothing issue area, visiting room, sally port, garage, warehouse, utility plant, and HVAC. Inmates eligible for a facility job assignment may apply for work on-site.

SCI-Frackville has medical and mental health treatment services accessible to inmates for specialty care and all related support services. Inmate programs offered at SCI-Frackville includes Academic education (G.E.D), Vocational education (Business Practices, Custodian Maintenance, Electricity/Electronics systems technician, OSHA Safety Certification and Barber Program), and Apprenticeship Programs (i.e. automotive Mechanics, Electrician, Painter, Plumber, Baker, Cook and Machinist). Also offered are self-help programs, Sex Offenders, Re-Entry, Alcohol and other Drug (AOD), Offense Related, and Mental Health programs.

SAFE/SANE services are provided for SCI-Frackville inmates at the Reading Hospital Emergency Room. The SAFE/SANE staff is on site at the hospital or on-call and will respond as needed to the Emergency Room if it's afterhours.

AUDIT FINDINGS	
<p>Summary of Audit Findings:</p> <p>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.</p> <p>Auditor Note: No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.</p>	
Number of standards exceeded:	0
Number of standards met:	41
Number of standards not met:	0
<p>Not audited at the facility level:</p> <p>Audited at the agency-level, and not relevant to the facility-level audit because the facility has no independent responsibility for the operation of these standards.</p>	4
<p>Number of standards exceeded: 0</p> <p>Number of standards met: 45</p> <p>Number of standards not met; 0</p> <p>Number of standard not applicable 0</p>	

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
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. DC-ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. DC-ADM 008, Section 7 (PREA Procedures Manual) c. DC-ADM 008, PREA Procedures Manual Glossary of Terms 3. Documents <ol style="list-style-type: none"> a. Corrections Table of Organization (Agency) b. Correctional Classification Program Manager (CCPM) position description c. PA State Government Organization Chart SCI– Frackville d. PREA Resource Center (PRC) List of Certified Auditors e. Corrections Table of Organization (Agency Organization Chart) f. 2017 Inmate Handbook 4. Interviews with the following: <ol style="list-style-type: none"> a. PREA Coordinator b. PREA Compliance Manager <p>Findings (by subsection):</p> <p>Subsection (a):</p> <p>SCI-Frackville has a comprehensive policy on sexual abuse and sexual harassment contained in ADM 008, Section 2 (Sexual Abuse/Sexual Harassment Prevention and Training [page 1:1(A)]). The policy mandates zero tolerance toward all forms of sexual abuse and sexual harassment. The policy language mirrors PREA standard (115.11(a)). The policy contains definitions that are consistent with the PREA definitions in the Glossary of Terms that describe prohibited behaviors regarding sexual abuse and sexual harassment. ADM DC-ADM 008, Section 7 (PREA Procedures Manual) lists the discipline/sanctions related to sexual abuse, sexual harassment, and retaliation. The policy outlines the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>The Auditor reviewed the Inmate Handbook (page 7: H) and noted the zero tolerance policy for sexual abuse and sexual harassment. The Handbook addresses the following sections; 1) Sexual activity between a staff member and an inmate, 2) Zero tolerance policy, 3) Sexual abuse of an inmate by another inmate, 4) Sexual abuse of an inmate by a staff, 5) Sexual harassment, 6) Methods of reporting for inmates, friends, family, and general public, and 7) Free support service access.</p> <p>Subsection (b):</p> <p>Policy DC-ADM 008, Section 2 (PREA Procedures Manual [page 2-1: A]) documents the duties of the PREA Coordinator. The Corrections Table of Organization (Agency) verified that the PREA Compliance Division reports to the Director of the Bureau of Standards, Audits, and Accreditation. The PRC List of Certified Auditors reflects and lists David Radziewicz as a</p>

certified PREA Auditor. An interview with the PREA Coordinator confirmed Mr. Radziewicz is the sole agency PREA Coordinator. He has two assistants that aid him in these duties. He has sufficient time and authority to develop, implement and oversee agency efforts to comply with PREA. He is responsible for procedures, training policy revisions and is a participant of the Sexual Abuse investigations review at central office. There are 25 compliance managers at the institutions and 12 compliance managers in community corrections. They have meetings in May and August for training and policy revision updates. The institution compliance managers come to one and the community corrections compliance managers attend the other along with the contractors.

Subsection (c):

Policy DC-ADM 008, Section 2 (PREA Procedures Manual [page 2-2: B) documents the duties of the PREA Compliance Manager. SCI-Frackville has designated Kelly O'Kane as the PREA Compliance Manager for the facility. Ms. O'Kane's title is Correctional Classification Program Manager. This position supervises a variety of inmate treatment, programs, classification and other support programming at the facility identified in her position description. The facility's organization chart reflects that she reports to the Deputy Superintendent for Centralized Services, who then reports to the Superintendent. An interview with the PREA Compliance Manager indicated she does have enough time to manage all her PREA related responsibilities which includes conducting PREA reviews and PREA audit preparations. She stated she is constantly talking to staff and inmates during her PREA unannounced rounds to assess the climate and the facilities compliance with PREA standards. She conducts in person training with staff and reviews SAIRs for trends, the number of sexual abuse/sexual harassment allegations, and watches out for PRAT (PREA Assessment Tool) responses that would indicate if an inmate was at Risk of Victimization or at Risk of Abusiveness.

Corrective Action: None

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. DC-ADM 008, Section 2 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. Memorandum of Understanding between the commonwealth of Pennsylvania and the county of Lackawanna, 14 pages b. Memorandum of Understanding between the commonwealth of Pennsylvania and the Columbia County, 14 pages c. Memorandum of Understanding between the commonwealth of Pennsylvania and the York County, 15 pages d. Berks county Jail System (2017 PREA audit report) e. Cambria County Prison (2015 PREA audit report) f. Chester County Prison (2015 PREA audit report) g. Clinton county Correctional Facility (2016 PREA audit report) h. Columbia County Prison (2017 PREA audit report) i. Lackawanna county Prison (2015 PREA audit report) j. Lawrence County Corrections (2016 PREA audit report) k. Lehigh County DOC (2016 PREA audit report) l. Luzerne County Correctional Facility (2017 PREA audit report) m. York County Prison (2016 PREA audit report) 4. Interviews with the following: <ol style="list-style-type: none"> a. Agency Contract Administrator <p>Findings (by subsection):</p> <p>Subsection (a):</p> <p>Agency policy [Contracting with Other Entities for Housing Inmates Page 2-4: 3A] provides that the Department shall include in any new contract or contract renewal for the housing of inmates to adopt and comply with PREA Standards. During the Pre-audit phase SCI-Frackville reported a total of 14 contracts for the confinement of inmates on or after 8/20/2012. The PREA Coordinator provided a the Auditor with the PREA audit reports for the contracted entities; Berks county Jail System (2017 PREA audit report), Cambria County Prison (2015 PREA audit report), Chester County Prison (2015 PREA audit report), Clinton county Correctional Facility (2016 PREA audit report), Columbia County Prison (2017 PREA audit report), Lackawanna county Prison (2015 PREA audit report), Lawrence County Corrections (2016 PREA audit report), Lehigh County DOC (2016 PREA audit report), Luzerne County Correctional Facility (2017 PREA audit report) and York County Prison (2016 PREA audit report). The agency continues to ensure PREA compliance is a priority. The contracted entities have completed their first PREA audit cycle and are into the second cycle of audits. Three county contracts (MOUs) were reviewed to ensure they met compliance in 2017, others are scheduled. A review of the past contracted entities by the Auditor verified all contracted</p>

entities have passed their PREA audits.

Subsection (b):

All MOUs contained the PREA language under the following section; "Section 15) Prison Rape Elimination Act Compliance (A) The county understands and agrees that it shall adopt and comply with all PREA regulations, including, but not limited to , the standards related to hiring and promotion as set forth in 28 C.F.R. 115.17. (B) The County acknowledges that the PREA standards apply to all county employees, subcontractors, or anyone working on behalf of the County, who work within the prison. (C) The county shall be responsible for and agrees to indemnify and hold harmless the Department and the Board from all losses, damages, expenses, claims, demands, suits, and actions brought by any party against the Department or the Board as result of the county's failure to comply with PREA requirements." Interview with Agency Contractor did not occur as the agency was previously audited.

Corrective Action: None

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. Facility Security 6.3.1, Section 15 (Correctional Officer Staffing System) 12 pages c. Facility Security 6.3.1, Section 19 (Managerial Visits/Inspections) 5 pages 3. Documents <ol style="list-style-type: none"> a. SCI-Frackville Mandated Post/Position List, 4 pages b. Memo, Position Worksheet for SCI-Frackville (Officer Post Assignments) 21 pages c. Memo, Staffing Survey Review (SCI-Frackville September 2017) FY 2016 & 2017 d. Housing Unit Administrative Log Books e. PIDS (Perimeter Intrusion Detection System) 4. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent b. PREA Compliance Manager c. PREA Coordinator d. Intermediate or Higher-level Facility Staff <p>Findings (by subsection):</p> <p>Subsection (a):</p> <p>Policy (Sexual Abuse/Sexual Harassment Prevention and Training [page 2-4:4(a-d)]) requires each facility to develop staffing plans for its facilities and address the 11 required elements of this standard. Departmental policy 6.3.1, Section 15 (Correctional Officer Staffing System [15-1: A]) demonstrates the calculation of the staffing patterns required. During the on-site review the auditor observed that the housing units were operating at optimum levels and there was additional staff on each housing unit. The auditor also reviewed the SCI-Frackville Mandated Post/Position List and a Position Worksheet for SCI-Frackville (Officer Post Assignments) which identified what officer post/positions were required to be manned to meet minimum staffing to ensure safe and secure operations at the facility. An interview with the Superintendent indicated that officer manpower is based on a survey taken every 3 years based on population. SCI-Frackville treatment staff (426) is at full compliment. There was a budget freeze but it did not affect the recruiting of officers or medical staff. In the areas where there was not enough staff, SCI-Frackville would try to get cameras. There's an annual review of the staffing plan and all of the 11 consideration requirements are addressed. An interview with the PREA Compliance Manager indicated that SCI-Frackville considers the following during staffing reviews: the physical plant and areas that should not have female staff (i.e. segregation unit). SCI-Frackville looks at the strip areas like the visiting room and property room to determine if they should be male only posts. SCI-Frackville looks at the big picture to see if there is a need to move big equipment to ensure that the line of sight for staff in a specific area is not obstructed. SCI-Frackville looks at the number of inmates in the area. SCI-Frackville will also review the PIDS (Perimeter Intrusion Detection System) plan and check if</p>

there is a need for additional metal detectors. SCI-Frackville takes a hard look at all the areas.

Subsection (b)

Policy 6.3.1, Section 15 (Correctional Officer Staffing System [15-1: A]) is specific to security staff and require any deviations from the required staffing plan to be documented. In the past 12 months, the facility reports there have been no deviations from the staffing plan. Overtime has been utilized to cover positions if they are vacant. During the on-site review, the Auditor observed the facility was exceeding the minimum staffing required. An interview with the Superintendent confirmed the security staff and medical staff positions were filled therefore no deviations from the staffing plan were recorded. She also reported that there are weekly status reports of vacations to ensure they are within their staff compliment cap. This was verified by the Auditor upon reviewing the overtime reports for the month of September 2017.

Subsection (c)

Policy (Sexual Abuse/Sexual Harassment Prevention and Training [page 2-1:1(e)]) lists the PREA Coordinator duties and identifies working with each facility on an annual basis regarding the staffing plan. During the onsite, the Auditor reviewed a memorandum "Staffing Survey Review (SCI-Frackville September 2017) FY 2016 & 2017" signed by the PCM, the PREA Coordinator and the Superintendent on January 1, 2017. An interview with the PREA Coordinator, he confirmed that he participated with the annual reviews of each facility on their staffing plan.

Subsection (d)

Policy Facility Security 6.3.1, Section 19 (Managerial Visits/Inspections [page 19-4:B-C]) requires intermediate and higher level personnel conduct and document unannounced rounds no less than once per month and must occur on all shifts. This policy also prohibits staff from alerting other staff of such rounds. Intermediate and higher level personnel includes the Facility Manager, the Deputies, Majors, Intelligence Captain, Security Lieutenant, Corrections Superintendent's Assistant, and the Corrections Classification Program Manager. During the pre-audit stage the Auditor reviewed documentation for three months and noted that rounds were conducted daily and on every shift by intermediate and higher level personnel. During the on-site review, the Auditor observed every housing unit's "Administrative Tour" book and confirmed that the rounds are being completed and the log books covered a period of January 1, 2017 to the current date. Informal interviews with the housing unit staff indicated that unannounced rounds were being conducted and interviews with the intermediate and higher level staff verified they conducted and documented unannounced rounds per policy. The sign in sheets are in the control areas. They can switch up their schedule so staffs don't know where they are. They also conduct rounds often enough that it doesn't stand out when they do.

Corrective Action: None

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedure Manual) 19# pages <p>Findings (by subsection):</p> <p>Subsection (a-c)</p> <p>Policy ADM 008, Section 2 (PREA Procedure Manual [page 2-7:8]) mandates that male youthful offenders shall be transferred to SCI-Pine Grove within 24 hours of reception by the Department. Female youthful offenders, under the age of 18 shall immediately be placed into the Youthful Inmate Unit at SCI-Muncy. During the Pre-audit stage SCI-Frackville reported that inmates under the age of 18 are not housed at the facility. During the onsite review the Auditor did not observe any inmates under the age of 18. Informal interviews with staff on each housing unit and the PREA coordinator confirmed no youthful inmate is housed at SCI-Frackville. No Youthful Inmates, Education and Program Staff who Work with Youthful Inmates, or Staff who Supervise Youthful Inmates were interviewed specific to this provision.</p> <p>Corrective Action: None</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedure Manual) 19 pages b. ADM 008, Section 9 (PREA Procedure Manual) 6 pages c. 6.3.1, Facility Security, Section 30 (Searches) 32 pages 3. Documents <ol style="list-style-type: none"> a. Memo, Announcing Female Presence on Housing Units, June 19, 2015 b. Contraband and Searches PowerPoint, 53 slides c. Staff Training Transcripts 4. Interviews with the following: <ol style="list-style-type: none"> a. Random Inmates b. Random Staff c. Transgender/Intersex inmates <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedure Manual [page 2-8:9]) mandates staff shall not conduct cross-gender strip searches except in exigent circumstances. Cavity searches shall only be conducted when performed by a physician. During the Pre-audit phase SCI-Frackville reported that zero cross gender strip or cross gender visual body cavity searches were conducted in the past 12 months. Interviews with 16 random staff and 21 inmates confirm that cross gender strip or cross gender visual cavity searches are not allowed nor being conducted at the facility. No non-medical staffs (involved in cross-gender strip or visual searches) were interviewed pursuant to this standard.</p> <p>Subsection (b) Policy 6.3.1 Facility Security, Section 30 (Searches [page 30-13: F (1) (b)]) ensures 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. During the on-site review Auditor noted there was no female security staff assigned to provide the sole supervision of any housing unit. As a result, a majority of the male security staff conducted pat-searches of male, transgender, and intersex inmates. Interviews with 21 random (male) inmates confirmed that cross-gender pat searches are conducted by male/female staff pat searching inmates, most often during mass movement (i.e. outdoor recreation and meals). Interviews with 16 random staff verified they are aware of the prohibition of cross-gender pat searches for transgender and intersex inmates. The staff also indicated that there has not been an instance of exigent circumstance in which staff of the opposite gender would be necessitated to conduct strip searches.</p>

Subsection (c)

Policy ADM 008, Section 2 (PREA Procedure Manual [page 2-7:9(a) (1)]) requires all searches to be documented on the Cross-Gender Search Validation Form. A copy shall be maintained by the security office. ADM 008, Section 2 (PREA Procedure Manual [page 2-7:9(c)]) requires no facility shall permit cross-gender pat down searches of female inmates, absent exigent circumstances. During the Pre-audit phase SCI-Frackville reported that female inmates are not housed at the facility. Once on site and after conducting the review of the facility, the Auditor was able to verify that female inmates were not housed at SCI-Frackville.

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedure Manual [page 2-9:9(d-e)]) mandate that inmates shall be able to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breast, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Policy also requires staff of the opposite gender to announce their presence when entering an inmate housing unit. Interviews with 21 random inmates and 16 random staff indicate that the cross gender announcements are occurring. Staff reported that if the sergeant didn't make the announcement, they would take the initiative and make the announcement. The Auditor reviewed a memorandum dated June 19, 2015 to SCI-Frackville Staff providing announcement guidelines when any female enters a housing unit/wing. During the on-site review the Auditor did observe that the security staff on each housing unit made the cross gender announcement in compliance with this subsection. There were two variations of the announcement; it was either "Female on the floor" or "Female on the Block." Interviews with the inmates indicated 15 out of 21 random inmates reported the announcements were consistently made. The remaining 6 inmates stated sometimes they heard it, sometimes they did not.

Subsection (e)

Policy ADM 008, Section 9 (PREA Procedure Manual [page 9-1: B (3)]) prohibits the search or physical examination of a transgender or intersex inmate for the sole purpose of determining the inmates' genital status. During the Pre-audit phase, SCI-Frackville reported zero such searches in the past 12 months. Interviews with 16 random staff indicate 3 out of 16 staff is aware of the policy. The remaining 3 staff was adamant it was the responsibility of medical staff only. Interviews with 7 transgender inmates confirmed they have not been strip searched for the sole purpose of determining their genital status.

Subsection (f)

Policy ADM 008, Section 2 (PREA Procedure Manual [page 2-10:A(9)(f)]) requires staff to be trained on how to conduct cross-gender pat searches, and in searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs in the Department. During the Pre-audit phase, SCI-Frackville reported 100 percent of security staff received training on conducting cross gender pat-down searches and searches of transgender and intersex inmates. Also provided was a power point with 53 slides, submitted as evidence of the training materials. Interviews with 16 random staff indicated they were all trained within the past 12 months. This was verified by the Auditor reviewing the 16 staff training transcripts.

Corrective Action: None

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. 6.3.1 Facility Security, Section 1, 2 & 3 (Reasonable Accommodations for Inmates with c. Disabilities Procedures Manual) 8 pages 3. Documents <ol style="list-style-type: none"> a. PROPIO LS LLC, invoice for services (telephone interpreting services) 6 pages b. PREA Resource in Braille c. PREA Informational Handout-Spanish d. PREA poster e. DOC Foreign Language Employee Directory 4. Interviews with the following: <ol style="list-style-type: none"> a. Inmates (disabled or limited English proficient) b. Random Staff c. Agency Head <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-5:5(a-b)]) requires 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. Policy 6.3.1 Facility Security, Section 1, 2 & 3 (Reasonable Accommodations for Inmates with Disabilities Procedures Manual [page 3-1:A-D]) ensures an inmate who is diagnosed as having a qualified disability will received accommodations so that he/she can properly communicate/participate in the Department's facilities. An inmate will not be denied services solely for reason of his/her disability. During the onsite review, the Auditor observed the PREA posters in all the staff/inmate common areas. An interview with the Agency Head indicated that the agency has a contract with a sign language interpreter as well as access to PREA resources in braille to ensure equal opportunity and participation for inmates with disabilities to prevent, detect, and respond to sexual abuse and sexual harassment. An interview with an inmate that was hearing impaired indicated that he had no problems reading the PREA information available in handouts, video with sub-titles, and PREA posters. He was able to explain via written note or hand gestures to the Auditor how he could report a sexual abuse or sexual harassment. He indicated in writing that he was aware of his rights pursuant to PREA.</p> <p>Subsection (b) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-5:5(c)]) requires the Department shall take reasonable steps to ensure meaningful access to all aspects of the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide qualified interpreters.</p>

The PCM shall ensure that only staff members or qualified contractors, who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary, provide translation for inmates. If a multi-lingual staff member is not available, then the current contracted translation service must be utilized. During the onsite review, the Auditor observed that SCI-Frackville has multiple staff members who speak multiple languages other than Spanish and English. The agency maintains a Foreign Language Employee Directory listing 240 staff members of which 83 staff spoke a language other than Spanish or English. SCI-Frackville utilizes PROPIO LS LCC for their language translation needs and a PREA Resource in Braille. The Auditor also observed PREA posters displayed throughout the facility in Spanish as well as English. There were also PREA handouts in English and Spanish which are distributed to inmates at intake. During the on-site review the Auditor observed PREA posters displayed throughout the facility in Spanish as well as English. There were also PREA handouts in English and Spanish which are distributed to inmates at intake. Interviews with 2 inmates who were Limited English Proficient, were conducted utilizing the language line, confirmed they were educated in PREA through the PREA video and literature. They also reported they were aware of which staff spoke Spanish and can communicate with them if needed.

Subsection (c)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-5:5(a-d)] prohibits relying on inmate interpreters, inmate readers, or other types of inmates assistants except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate's safety. During the Pre-audit phase, SCI-Frackville reported zero in the past 12 months has an inmate interpreter, reader, or other type of inmates assistant has been requested or needed for a PREA related issue. Interviews with staff indicated that they were aware of how to access interpretation services via other staff but have not had to use it. Interviews with 16 random staff and two LEP inmates reported they were not aware of instances when inmate interpreters were used to report an allegation of PREA.

Corrective Action: None

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. DC-ADM 008, Section 1 (PREA Procedure Manual) 2 pages b. 1.1.4, Centralized Clearances Procedures Manual, Section 4 (Centralized Clearance Check Procedures) 3 pages c. 4.1.1, Human Resources and Labor Relations Procedures Manual , Section 3 (Employee Arrests – Felony, Misdemeanor, or Summary Offenses) 6 pages d. 4.1.1, Human Resources and Labor Relations Procedures Manual , Section 40 (Conducting Pre-Employment Background Investigations) e. 4.1.1, Human Resources and Labor Relations Procedures Manual, Section 41 (Employment of Job Applicants Having Prior Adverse contacts with Criminal Justice Agencies) f. Pennsylvania Department of Corrections Code of Ethics 3. Documents <ol style="list-style-type: none"> a. PREA Current Prior Employer Letter b. Position Vacancy Interest form c. Application for Employment form d Centralized Clearance Check Information Request Form 4. Interviews with the following: <ol style="list-style-type: none"> a. Administrative (Human Resources) Staff <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy 4.1.1, Human Resources and Labor Relations Procedures Manual, Section 41 (Employment of Job Applicants Having Prior Adverse contacts with Criminal Justice Agencies [page 41-1:A(1-3)]) mandates the Department will ensure that any job applicant who has had adverse contact with a criminal justice agency will be evaluated as to his/her suitability of employment: Consistent with PREA, the Department shall not hire or promote anyone who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. Also, consistent with the PREA, the Department will consider any incident of sexual harassment in determining whether to hire or promote anyone. During the onsite review, the Auditor evaluated 2 personal files of staff which included a PREA Current Prior Employer Letter, Position Vacancy Interest form, Application for Employment form and a Centralized Clearance Check Information Request Form. These forms document the application process which includes the application itself, a description of the position vacancy, a consent release waiver for any and all information as it relates to sexual abuse and sexual harassment from a prior employer, and a check list for a background</p>

clearance check. The Auditor determined the proper criminal record background checks were conducted and relevant PREA questions were asked in the application process. An interview with the HR confirmed that the forms were a mandatory part of the application process to be hired.

Subsection (b)

Policy 1.1.4, Centralized Clearances Procedures Manual, Section 4 (Centralized Clearance Check Procedures [page 4-3:C(1)]) mandates prior to the engagement of any contractors, the contractor and all of the contractor's employees and/or subcontractors that may have contact with inmates will be investigated. The agency has a very comprehensive hiring policy. The agency utilizes a variety of forms at the hiring stage to uncover any PREA related conduct for prospective applicants. Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 40 (Conducting Pre-Employment Background Investigations [page 40-1:1]) requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone; to include contractors or volunteers who may have contact with inmates. Hiring practice requires prospective employees to disclose PREA related conduct through the application and the prior employer letter that inquire about all the PREA conduct detailed in this standard. During the onsite review, the Auditor examined 2 complete employee application packets and 2 contractor application packets. The Auditor determined the agency is in compliance with this standard. An interview with Administrative (Human Resources) staff indicated that applicants are required to sign a consent release for a criminal background check as part of the application process for the department.

Subsection (c)

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 40 (Conducting Pre-Employment Background Investigations [page 40-1:A]) mandates Human Resource Offices will submit a background check request for all prospective new hires and rehires that have been separated for more than 60 days to the Office of special Investigations and Intelligence. SCI-Frackville requires prospective employees to disclose any prior institutional employers. Office of Special Investigations and Intelligence will conduct a full background investigation to include access to the Pennsylvania state police investigative files and a ten year driver's certified driving record. These records are retained for at least seven years in accordance with Pennsylvania Office of Administration Agency Records Detention and Disposition Schedule. When completed the facility Human Resources office is notified of the results. During the Pre-audit phase, SCI-Frackville reported 32 people hired in the past 12 months who may have contact with inmates who have had criminal background records checks completed. While onsite the Auditor reviewed two of the 32 files of newly hired and found the packet background check to be complete as it contained a PREA Current Prior Employer Letter, Position Vacancy Interest form, Application for Employment form and a Centralized Clearance Check Information Request Form. An interview with the Administrative (Human Resources) staff indicated that it's part of the application process. They also have to sign a consent release, they are asked about any arrests on the form. The initial background check is at the facility. Central office completes the background check via OSII investigators.

Subsection (d)

Policy 1.1.4 Centralized Clearances Procedures Manual, Section 4 (Centralized Clearance Check Procedures [page 4-3:C]) requires that prior to engagement of any contractors, the contractor and all of the contractor's employees and/or subcontractors that may have contact

with inmates will be investigated. [Page 4-3: B (7)] states the clearances for contract service providers, volunteers, and Pennsylvania Prison Society Official Visitors may be approved for up to 24 months. All other recurring visitors may be approved for a maximum of 12 months. During the Pre-audit phase, SCI-Frackville reported that 43 individuals in the past 12 months were hired who may have contact with inmates had criminal background checks completed. While on site the auditor reviewed 2 contractor personnel files and that corroborated the background checks are being completed as required by policy. An interview with the Administrative (Human Resources) staff indicated that the application process for contractors and staff are the same. All have to sign a consent release, voluntarily provide any criminal history, and affirm they are providing accurate and complete information.

Subsection (e)

Policy 1.1.4 Centralized Clearances Procedures Manual, Section 4 (Centralized Clearance Check Procedures [page 4-1: E (15)]) requires a criminal history check on all contractors every two years. SCI-Frackville participates in the use of three electronic background check systems NCIC (National Crime Information Center), CLEAN (Commonwealth Law Enforcement Agency Network) and JNET (Justice Network). Within 24 hours of a staff member's detainment or arrest an alert from the Pennsylvania state police will be filtered through to the employing correctional facility, in the event the employee fails to disclose any criminal misconduct. The agency participates in a real time background check notification process with NCIC/CLEAN/JNET on a 24 hours rotation for all staff. During the onsite review, the Auditor evaluated two contracting staff applications to confirm the completion of a criminal history check. An interview with the Administrative (Human Resources) staff verified that JNET (Justice Network) is a real time, active notification systems and the practice of the agency. The PREA standard requires that a criminal background records check for staff is completed at least every five years, this subsection exceeds this sub-section.

Subsection (f)

Agency application forms (Attachment 38-A through E) and Candidate Information form (pages 1-8) contains questions about previous misconduct described in paragraph (a) of this section. The agency also imposes upon employees a continuing affirmative duty to disclose any such conduct pursuant to the Pennsylvania Department of Corrections Code of Ethics #14 [page 7]. During the onsite review, the Auditor evaluated two staff application packets and noted the application form and the Employee Code of Ethics handbook (page 5, page 7, and page 10) required the applicant to disclose any previous misconduct. An interview with the Administrative (Human Resources) indicated that the application process for contractors and staff are the same. All staff is required to sign a consent release, voluntarily provide any criminal history, and affirm they are providing accurate and complete information.

Subsection (g)

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 40 (Conducting Pre-Employment Background Investigations (page 40-1: A (1) (d))) provides that material omission regarding PREA-related conduct, or the provision of materially false information is grounds for termination. During the onsite review, the Auditor reviewed 2 employee personnel files and noted that page 8 of the application form contains the "Oath and signature section" to be completed by the applicant. It states "I understand that any material omission or provision of materially false information will be ground for non-selection or discipline, up to and including termination of employment. An interview with the Administrative

(Human Resources) verified that this was the practice at SCI-Frackville.

Subsection (h)

Policy 4.1.1 Human Resources and Labor Relations Procedures Manual, Section 40 (Conducting Pre-Employment Background Investigations [page 40-1:A(3)(b)]) requires the agency 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 the employee has applied to work. During the onsite review, the Auditor evaluated 2 application packets and noted that they contained "Authorization to Obtain Information Waivers." This document once signed by the applicant authorizes the Department to release their Official Personnel Folder to the Department. An interview with the Human Resources staff corroborates this practice. She reported that it's all interrelated and it all follows staff. SCI-Frackville does receive these requests from other agencies on a regular basis and have complied per policy and practice.

Corrective Action: None

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. PIDS (Perimeter Intrusion Detection System) monthly meeting minutes from June 21, 2017 b. Camera Upgrade 4. Interviews with the following: <ol style="list-style-type: none"> a. Agency Head b. Superintendent <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-7:A(7)]) requires when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the Department shall consider the effect of the design, acquisition, expansion, or modification upon the Department’s ability to protect inmates from sexual abuse. During the Pre-audit phase, SCI-Frackville reported they have not acquired a new facility or made any expansion or modification to the physical plant since August 20, 2012. During the onsite review, the Auditor did not observe any new structures to the physical plant. Interviews with the Agency Head and Superintendent confirmed that SCI-Frackville has not acquired a new facility or made any expansion or modification to the existing facility.</p> <p>Subsection (b) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-7:7(b)]) requires the Department to consider how such technology may enhance their ability to protect inmates from sexual abuse. There are also biometric systems that indicate entrance and egress of staff and or inmates from the facility. SCI-Frackville conducts monthly PIDS (Perimeter Intrusion Detection System) meetings on the 3rd Wednesday of every month to ensure that video monitoring system, electronic surveillance system, or other monitoring technology are in operational order to enhance their ability to protect inmates from sexual abuse. During the on-site review the Auditor noted the new additions; cameras were installed in the Education hallway, the Weight room, the Visiting Room and the RHU/BMU (Restricted Housing Unit/Behavioral Management Unit) yard pens in 2017. Auditor also, reviewed purchase requests for additional cameras and cables. Interview with Agency Head indicate they factor everything, the safety and privacy needs of the inmates, a good line of sight for the cameras, look for blind spots, identify areas of issue and the use of technology to mitigate risk. An interview with the Superintendent verified that during a monthly PIDS (Perimeter Intrusion Detection System) meeting a running list of cameras installed and cameras they want installed is taken into consideration to ensure a safe and secure environment from sexual abuse and sexual harassment.</p>

	Corrective Action: None
--	-------------------------

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 4 (PREA Procedures Manual) 19 pages b. ADM 008, Section 5 (PREA Procedures Manual) 9 pages 3. Documents <ol style="list-style-type: none"> a. PSP (Pennsylvania State Police) MOU as of February 16, 2017 b. LOA Reading Hospital, PA dated May 26, 2015 c. LOA SARC (Sexual Assault Resource and Counseling Center) of Schuylkill County as of February 14, 2014 c. Attachment 4-E, Instructions for PREA Evidence Retention guide 4. Interviews with the following: <ol style="list-style-type: none"> a. Random Staff b. PREA Compliance Manager c. Inmates Who Reported a Sexual Abuse d. SAFE/SANE (Sexual Abuse Forensic Examiner/Sexual Abuse Nurse Examiner) <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 4 (PREA Procedures Manual [4-3:D(2)(d)(3)]) requires security staff to gather and/or preserve direct and circumstantial evidence including any physical or DNA evidence and shall follow a uniformed evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Attachment E provides evidence collection instructions for staff. During the Pre-Audit phase, SCI-Frackville reported that criminal investigations are conducted by the Pennsylvania State Police. SCI-Frackville conducts the administrative investigations into allegations of sexual abuse. During the onsite review, the Auditor noted that staffs have been provided first responder cards that contain the first responder protocol; these cards can be carried in the staff shirt pocket or in their ID badge holder for ready access should an incident occur in the facility. Interviews with 16 random staff demonstrated they were knowledgeable of the first responder evidence protocol and who is responsible for conducting PREA investigations.</p> <p>Subsection (b) Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1: A (5)]) mandates protocol established for evidentiary purposes shall be developmentally appropriate for youth, where applicable in accordance with this subsection of the standard. The uniform evidence protocol was developed from "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." During the Pre-audit phase SCI-Frackville reported they do not house youthful offenders under the age of 18. Informal interviews with the PREA Compliance Manager confirmed the absence of youthful offenders at SCI-Frackville.</p>

Subsection (c)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-3:2(d)]) requires all acute cases of sexual abuse (i.e. incident occurred within the last 96 hours) will have SAFE/SANE exams done at the hospital. Non-acute cases (i.e. more than 96 hours) will have the facility physician/PA/NP shall examine the alleged victim. During their Pre-audit phase, SCI-Frackville reported that two forensic medical exams were conducted in the past 12 months at the Reading Hospital ER pursuant to the Letter of Agreement between the hospital and SCI-Frackville. SCI-Frackville offers all inmates who experience sexual abuse access to forensic medical examinations and forensic interviews. The SAFE/SANE exam is provided without financial cost to the victim. Also during the Pre-audit phase, the Auditor's interview with the SAFE/SANE staff indicated that they had six trained staff to conduct the forensic examinations and if an incident occurred after hours, a SAFE/SANE would be on-call to respond to the hospital. The SAFE/SANE on call schedule is on a 48 hour rotation.

Subsection (d)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7:E]) mandates the Department works in collaboration with the Pennsylvania Coalition Against Rape and its member centers. The facility PCM with the PREA Coordinator/designee worked to establish mutual agreements with local rape crisis centers where all Department facilities are located. During the Pre-audit phase SCI-Frackville reported they had a LOA in place with the SARCC to provide victim advocacy services to inmates that are victims of sexual abuse. SARCC would provide a victim advocate to accompany a victim to the SAFE/SANE exam at the hospital. While onsite the Auditor noted that information for SARCC was listed in the PREA Handout and posted throughout the facility listing an address the inmates can write inquiries to. An interview with a victim services advocate with SARCC confirmed they have provided emotional support services to one SCI-Frackville inmate. These services are coordinated via the PREA Compliance Manager. Meetings have been scheduled with the advocate traveling to the prison or over the telephone as arranged by the PREA Compliance Manager. An interview with the PREA Compliance Manager confirmed she coordinated such meetings for inmates to meet with the advocate. Interviews with the Inmate who Reported Sexual Abuse indicated that some did not want access to a victim services advocate over the phone but face to face. Interviews with 12 inmates Who Reported a Sexual Abuse stated they were okay just talking to the mental health staff as needed. The 12 incidents occurred either many years before they arrived at SCI-Frackville or when they were on the streets.

Subsection (e)

Policy ADM 008, Section 4 (PREA Procedures Manual [4-7:E(4)]) mandates that an inmate shall be offered the opportunity to talk with a victim advocate upon receipt of an allegation and receive continued care when they have been a victim of facility sexual abuse, not matter if they reported the facility sexual abuse immediately or made a delayed disclosure. The Auditor reviewed the LOA SARCC and noted in Section 2 that SARCC will support the victim through the forensic medical examination process, investigatory interviews, provide emotional support, crisis intervention, information, and referrals. An interview with the PREA Compliance Manager indicated that SARCC services were utilized for an inmate who alleged sexual abuse. The initial meeting took place at the facility between the victim services advocate and the Inmate; the subsequent meeting was conducted over the telephone facilitated by the PREA Compliance Manager. The PREA Compliance Manager indicated that only two cases were sent to the hospital for SAFE/SANE and the victim services advocate from SARCC responded

to the hospital with the alleged victim. Interviews with 12 inmates Who Reported Sexual Abuse indicated that 8 refused, 3 spoke to psychology staff instead, and 1 spoke to a security supervisor but didn't feel as if the supervisor was listening to him.

Subsection (f)

SCI-Frackville and the Pennsylvania State Police have entered into a Memorandum of Understanding that complies with the requirements of this standard's subsections (a) through (e). During the Pre-audit phase, the Auditor reviewed the MOU and noted the Pennsylvania State Police agreed to comply with PREA standards 115.21, 115.22, 115.34, 115.71, and 115.73 specific to investigations of alleged sexual abuse at state correctional facilities. While on site the Auditor verified the Pennsylvania State Police conducted criminal investigations of sexual abuse allegations by reviewing 2 complete investigation files. Interviews with two investigators (one facility/one agency) confirmed this practice.

Corrective Action: None

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 5 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. PREA tracking system spreadsheet b. Agency website at: http://www.cor.pa.gov/General%20Information/PrisonRapeEliminationAct (PREA)/Pages/DOC-PREA-Statistics.aspx c. PSP (Pennsylvania State Police) MOU 4. Interviews with the following: <ol style="list-style-type: none"> a. Agency Head b. Investigative Staff <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1: A]) requires 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. During the Pre-audit phase, SCI-Frackville reported 84 allegations in the past 12 months. All 84 resulted in an administrative investigation or criminal investigations. At the time of the on-site review 72 were completed while 12 were still pending. Of the 72 completed investigations of sexual abuse and sexual harassment, one allegation of sexual harassment was substantiated.</p>

59 were unsubstantiated and 12 were unfounded.

While on site the Auditor reviewed two completed investigations. The Pennsylvania Department of Corrections public website records the number of sexual abuse and sexual harassment allegations. An interview with the Agency Head indicated that there were three ways for allegations of sexual abuse and sexual harassment to be investigated; 1) at the local level by the security office (institution/facility) for an administrative investigation, 2) at the agency level by the OSII (Office of Special Investigations and Intelligence), and the Pennsylvania State Police for criminal allegations. OSII (Office of Special Investigations and Intelligence) will also conduct investigations into criminal allegations.

Subsection (b-c)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1:A) ensures that an administrative and/or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. 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 OSII shall coordinate with the criminal investigator/DA's office to determine when to resume the administrative investigation so as to avoid interference with the criminal investigation. During the Pre-audit phase, the Auditor reviewed the PA DOC public website and noted that the PREA policy is posted as are the PREA statistics for 2014, 2015 and 2016. The PREA policy and the MOU between the Pennsylvania State Police and PA DOC describe investigative responsibilities of both agencies. Interviews with the facility and agency Investigative staff indicate a PREA tracking system spreadsheet is maintained by each facility to document the investigation process.

Corrective Action: None

115.31	Employee training
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 1 (PREA Procedures Manual) b. ADM 008, Section 2 (PREA Procedures Manual) 19 pages c. ADM 008, Section 9 (PREA Procedures Manual) 6 pages d 5.1.1., Staff Development and Training. 3. Documents <ol style="list-style-type: none"> a. Staff training records 2016 and 2017 b. PREA curriculum and materials (lesson plan) c. PREA policy update training 2017 d. PREA form (Understanding and Acknowledgement) 4. Interviews with the following: <ol style="list-style-type: none"> a. Random Staff <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-14: E (1)]) ensures that all employees who have contact with inmates receive training on the 11 elements required by this subsection. During the Pre-audit phase the Auditor reviewed the staff training materials and lesson plans to verify all elements were addressed. SCI-Frackville has an active PREA training program for all employees. While onsite the Auditor examined the training records of the random staff that were interviewed. Interviews with the 16 random staff verified they were knowledgeable of PREA and their responsibilities. The PREA Compliance Manager and the Training Coordinator have done an excellent job training new staff at orientation, annual PREA updates by website, and instructor led training sessions utilizing a comprehensive curriculum.</p> <p>Subsection (b) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-15:E(1)(e)]) requires staff shall receive training in accordance with Department policy 5.1.1., Staff Development and Training. Such training shall be tailored to the gender of the inmates at the employee’s facility. Training materials contain gender specific materials. During the Pre-audit phase, SCI-Frackville reported that no staff has transferred from a female facility which would have precipitated additional training. While on site the Auditor noted that SCI-Frackville is gender specific to the male population.</p> <p>Subsection (c) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-14:E]) requires the PREA Compliance Manager in conjunction with the Training Coordinator at each facility to ensure that all employees who have contact with inmates receive PREA training. Newly hired staff members shall receive this training as part of basic training at the Training Academy. Further,</p>	

starting in 2016 the PREA training is provided annually to ensure consistent training. During the even years PREA essentials is trained to all staff, on the odd years PREA policy updates are trained. During the Pre-audit phase SCI-Frackville reported all staff has been trained in PREA. Additional training is provided as needed or requested. A PREA Training spreadsheet has been created to track all employees, volunteers and contractors. During the onsite review the Auditor checked the staff training records from 2016 and 2017. For the month of August 2017 there were 51 staff members PREA trained in policy updates to indicate that SCI-Frackville is providing PREA training to their staff.

Subsection (d)

Policy ADM 008, Section 1 (PREA Procedures Manual [page 1-1: A (2)]) requires a PREA Training and Understanding Verification Form for staff shall be kept in the employee's training file. This form shall be retained for at least one year after the employee's separation. During the onsite review the Auditor reviewed 16 training records to verify training for new staff as well as tenured staff. All employees who have completed the PREA trainings signed an understanding and acknowledgement form upon completion and these forms are maintained in the staff member's training file.

Corrective Action: None

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. Contractor/Volunteer training aid b. Contractor/Volunteer training roster for 11/2016 through 06/2017 c. PREA training and acknowledgement form 4. Interviews with the following: <ol style="list-style-type: none"> a. Volunteer or Contractors <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-17:E(2)9c]) requires all contractors and volunteers that have contact with inmates are trained on their responsibilities under PREA policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response. During the Pre-audit phase SCI-Frackville reported that 43 contractor/volunteers have been trained on PREA. The documentation was submitted to the Auditor to demonstrate compliance. While onsite the Auditor reviewed 43 PREA training records and training rosters for contractors and volunteers. Interviews with two Volunteers and 2 Contractors verified they were trained in PREA and participate in annual PREA updates.</p> <p>Subsection (b) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-17:E(1)]) requires that contractors/volunteers shall be trained during orientation sessions and annual training reflective of the level of contact that they have with inmates. While onsite the Auditor reviewed the Contractor/Volunteer training aids. Interviews with two Volunteers and two Contractors indicated they could articulate who they would report a PREA to and the facility's zero tolerance policy.</p> <p>Subsection (c) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-17:E(2)(c)(2)]) requires all contractors and volunteers to sign and acknowledgement form to confirm they understand the training they have received. During the onsite review the Auditor reviewed 43 contractor/volunteer training completion records and four PREA training and acknowledgement forms for the contractors/volunteers that were interviewed. Interviews with two contractors and two volunteers confirm they understand PREA and how to report incidents of PREA.</p> <p>Corrective Action: None</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. PREA Informational Handout (English and Spanish) b. Inmate PREA Education Verification Form c. CCTV (Closed Circuit TV) schedule noting every morning at 8:00 am, PREA video d. PREA posters (English and Spanish) e. PROPIO LS LLC, invoice for services (telephone interpreting services) 6 pages f. DOC Foreign Language Employee Directory g. PREA Resource Braille h. Inmate Handbook 4. Interviews with the following: <ol style="list-style-type: none"> a. Intake Staff b. Random Inmates <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-18:F(1)]) requires that inmates receive information at the time of intake explaining the zero tolerance policy, how to report incidents or suspicions of sexual abuse and sexual harassment or retaliation. During the Pre-audit phase SCI-Frackville reported 891 inmates received training in the past 12 months at intake. SCI-Frackville utilizes PREA Education Verification Form signed by the inmates at the conclusion of their training to document the provision of this training. During the onsite review the Auditor observed that PREA Informational Handout (English and Spanish) and the Inmate Handbook was readily available to inmates upon intake. PREA posters (English and Spanish) were located in every inmate/staff common area of the facility. Every morning at 8:00 am, the PREA video is shown on closed circuit TV channel with Spanish subtitles. An interview with Intake Staff verified that inmates receive a PREA handout (English and Spanish) and PREA education within 30 days upon arrival. Interviews of 21 Random Inmates indicated they received PREA education through different methods but most of their retained knowledge is from the PREA posters in every housing unit.</p> <p>Subsection (b) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-18:F(2)]) requires that within 30 days of reception, additional shall be provided to all inmates, including PV (Parole Violators). All inmates shall be provided comprehensive PREA education and training. SCI-Frackville utilizes the "PREA: What You Need to Know video." The video is provided daily on the facility's CCTV at 8:00 am. Versions are in English and Spanish. During the onsite review the Auditor checked 21 Inmate PREA verification forms to confirm the comprehensive</p>

education was occurring timely. An interview with the Intake Staff indicates that as soon as they see the new inmates they get the PREA handout and PREA pamphlet. Interviews with 21 random Inmates indicated they received their full PREA education within a couple of weeks from arrival.

Subsection (c)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-18:F(1)]) requires all inmates to receive PREA training. Inmates shall be shown a video regarding their rights; they shall 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 and to answer questions. During the onsite review the Auditor observed the TV schedule and noted the PREA video listed for an 8 am showing. An interview with Intake staff verify that PREA Education starts with the PREA video, then the zero tolerance policy, and a question and answer with the inmates by the staff.

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-18:F(1)]) requires that PREA information shall be provided in formats accessible to all inmates, including those who are Limited English proficient, deaf, visually impaired, or otherwise disabled as well as to inmates who have limited reading skills. During the onsite review the Auditor tested the language line for telephone interpreting services. SCI-Frackville has a listing of 12 bilingual staff, materials in English and Spanish throughout the facility and access to braille documentation. Informal interview with the PREA Compliance Manager indicated that the PREA Resource in Braille was produced by inmates at another facility.

Subsection (e)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-18: F (6)]) requires the facility to maintain documentation of the inmate participation in PREA training. Inmates must sign a verification form stating they have received and understand the training. The provision of PREA Inmate Education shall be documented in the ICAR (Inmate Cumulative Adjustment Records) electronic system utilized by SCI-Frackville to track PREA assessment completions and PREA training completions. During the onsite review the Auditor examined 16 inmate PREA education verification forms and the ICAR entries to corroborate that documentation was present and current. The PREA education verification forms were specific to the 21 random inmates interviewed. The interviews with 21 random inmates confirmed that the training is occurring as residents are able to articulate the meaning of zero tolerance and the report mechanisms available to them to report abuse or retaliation.

Subsection (f)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-18:F(1)]) requires that PREA information shall be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as to inmates who have limited reading skills. During the on-site review, the Auditor observed PREA posters throughout the facility in both English and Spanish. All housing units have signage with a phone number and address of entities to whom the inmate can report or contact for services. Informal interviews with staff and inmates on the housing units indicated that they were aware of the multiple ways to provide PREA information.

	Corrective Action: None
--	-------------------------

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 088, Section 5 (PREA Procedures Manual) 9 pages 3. Documents <ol style="list-style-type: none"> a. Training Records/logs of investigative staff b. PREA Investigator training transcripts 13 pages c. The National PREA Resources Center Investigators Training Modules as part of their training curriculum 4. Interviews with the following: <ol style="list-style-type: none"> a. Investigative Staff (Agency and facility) <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-15:E(2)]) requires that any staff designated to conduct sexual abuse investigations shall receive specialized training in conducting sexual abuse investigations in confinement settings. During the Pre-audit phase, SCI-Frackville reported they utilized The National PREA Resources Center Investigators Training Modules (1-5) as part of their training curriculum. During the onsite review the Auditor was provided with documentation of the ten staff that completed the specialized training investigative training as of 2014. The interviews with two investigative Staff indicated they completed the investigative training specialized in conducting sexual abuse investigations in confinement settings.</p> <p>Subsection (b) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-15: E (2) (a) (1) (a)]) requires that the specialized training include the topics detailed in this subsection. The National PREA Resources Center Investigators Training Modules is compliant with this requirement. The interviews with two investigative Staff confirmed they were trained in techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warning, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>Subsection (c) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-15: E (2) (a) (1) (c)]) requires the facility to maintain documentation that investigators have completed the required specialized training. During the Pre-audit phase SCI-Frackville submitted training Records and logs of investigative staff. While onsite the Auditor reviewed the PREA investigator training transcripts of the 10 investigative staff to confirm they completed the specialized training.</p>

Corrective Action: None

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 008, Section 4 (PREA Procedures Manual) 8 pages 3. Documents <ol style="list-style-type: none"> a. PREA Training PowerPoint for Specialized Medical-Mental Health staff b. PREA definition handout c. PREA Training for Specialized Medical-Mental Health staff participant guide d. PREA Training for Specialized Medical-Mental Health staff participant guide log e. LOA Reading Hospital, PA 4. Interviews with the following: <ol style="list-style-type: none"> a. Medical and Mental Health Staff <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-16:E(2)(b)]) requires any staff providing medical and mental health services, whether on full or part-time status, shall receive additional training on working with victims of sexual abuse and sexual harassment. During the Pre-audit phase SCI-Frackville reported 16 medical and mental health staff has received this training. While onsite the Auditor reviewed the 16 training records that corroborated compliance with this subsection and the Training materials (PREA Training for Specialized medical-Mental Health Staff, PREA definition handout, Staff participant guide, and staff participant guide log) provided to the Medical-Mental Health Staff. The interviews with the two Medical and Mental Health Staff confirmed that they received the PREA initial training to include crisis intervention and PREA initially at central office, and specialized training specific to their job profession at SCI-Frackville. The also reported that they attend mass PREA training annually.</p> <p>Subsection (b) Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-3:D(2)(d)(1)]) requires the alleged victim shall be immediately transported to an outside hospital to be examined by a medical professional who is skilled and experienced in the use of a rape kit for the collection or forensic evidence. During the Pre-audit phase SCI-Frackville reported medical staff does not conduct forensic examinations. The Auditor reviewed a letter of agreement between SCI-Frackville and the Emergency Room at the Reading Hospital corroborates this practice. Interviews with the two Medical and Mental Health Staff confirm that forensic examinations do not occur at SCI-Frackville.</p> <p>Subsection (c) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-16: E (2) (d)]) requires the</p>

facility to maintain documentation that medical and mental health staff have received the specialized training required by this standard. During the Pre-audit phase SCI-Frackville reported 16 medical and mental health staff has received this training. While onsite the Auditor reviewed the 16 training records that corroborated compliance with this subsection. The interviews with the two Medical and Mental Health Staff confirmed that they received the PREA initial training to include crisis intervention and PREA initially at central office, and specialized training specific to their job profession at SCI-Frackville. The also reported that they attend mass PREA training annually.

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-16: E (2) (b) (1)]) requires any staff providing medical/mental health services, whether on a full or part-time status, shall receive additional training on working with victims of sexual abuse and sexual harassment. For the purposes of this training requirement, medical staff shall include all licensed medical staff, as well as non-licensed contract medical staff such as dental assistants, Correctional Health Care administrators (CHCAs) and contracted provider staff. During the onsite review the Auditor noted that the Medical-Mental Health staff was all full time employees.

Corrective Action: None

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 008, section 9 (PREA Procedures Manual) 6 pages 3. Documents <ol style="list-style-type: none"> a. PA DOC PREA Risk Assessment Tool (PRAT) 22 questions b. PREA Risk Assessment Tool User Guide 20 pages 4. Interviews with the following: <ol style="list-style-type: none"> a. Random Inmates b. Staff Responsible for Risk Screening c. PREA Coordinator d. PREA Compliance Manager <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-10:B]) requires 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 at other inmates or sexual abusive toward other inmates. During the Pre-audit phase, SCI-Frackville submitted a PREA Risk Assessment Tool (PRAT) and a PREA Risk Assessment Tool User Guide for the Auditor’s review. While onsite the Auditor examined ten random initial PRAT screenings in the WEBTAS database to confirm compliance. An interview with a staff member responsible for Risk Screening corroborated that the screenings were being conducted upon intake to SCI-Frackville. She also stated that if an inmate arrived after hours on a Friday, she’d ensure the PREA Screening was completed Monday. The interviews with 21 random inmates indicated that they have all received a PREA screening since housed at the facility. Seven of the 21 inmates stated that they’ve been re-screened annually at their review by their counselor.</p> <p>Subsection (b) Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-10: B (5)]) requires all inmates shall be screened for Risk of Victimization and Abusiveness within the first 72 hours of reception to the Department or received into to another facility. During the Pre-audit phase, SCI-Frackville reported 693 inmates entering the facility in the past 12 months were screened. The Auditor reviewed 10 random inmate PRAT records and determined that the screenings were occurring within 72 hours and the reassessments were occurring between the 20 and 30 days from the initial. Interviews with the Staff Responsible for Risk Screening reported that the screenings were being conducted upon intake to SCI-Frackville or on Monday if they arrive at the facility over the weekend. The interviews with 21 random inmates indicated that they have all received a PREA screening since housed at the facility.</p>

Subsection (c)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-10: B (5)]) requires that the facility utilizes PREA Risk Assessment Tool (PRAT) which is an instrument based on the ten minimum criteria set by this substandard. During the Pre-audit phase, the Auditor reviewed the PREA Risk Assessment Tool (PRAT) and noted that the instrument appeared to be an objective inventory. There are 22 questions on the PRAT which asked, (1) Have you ever been convicted of a crime using force or threat of force? (2) Did your current offense involve either personal violence or any sexual act? (3) Is this the first time you have ever been incarcerated? (4) What is your age today? (5) Which of the following describes your sexual orientation? (6) Does the inmate appear to be – Heterosexual, Homosexual, Bisexual, or No Response? (7) Does the inmate appear to be Gender Non-Conforming? (8) Which of the following is how you describe your gender identity? (9) Have you ever been either physically victimized or sexually victimized before this incarceration? (10) Have you ever victimized someone either physically or sexually before this incarceration? (11) Have you ever been sexually victimized while incarcerated? (12) Have you ever sexually victimized anyone while incarcerated? (13) Did any of your current or prior offenses involve sexually victimizing a child victim? (14) Did any of your current or prior offenses involve sexually victimizing an adult victim? (15) Do you have a physical disability? (16) Do you have a mental disability? (17) Do you have a developmental disability? (18) Does the inmate appear to have a developmental disability? (19) Do you feel vulnerable to being sexually abused or assaulted while incarcerated? (20) Describe the build of the inmate. (21) Describe the presentation of the inmate. (22) Is the inmate detained solely for civil immigration purposes? An interview with the Staff Responsible for Risk Screening reported that the inmates transferring into the facility will meet with medical staff and have their initial PRAT screening. "Questions are asked and information is entered into the ICAR computer system. Any notes or paper copy is shredded. I don't see the information after that. I can only enter the information. Anything that comes up as questionable I contact the PREA Compliance Manager and let her know. I don't have access to the information once it's entered."

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-10: B (4 and 5)]) requires the PRAT screening to consider at a minimum the ten criteria set forth by this substandard. The PREA Risk Assessments shall be conducted utilizing the PRAT. The tool will be an objective instrument that shall consider, at a minimum the following criteria to assess inmates for risk for sexual victimization or abusiveness: a. whether the inmate has a mental, physical, or developmental disability; b. the age of the inmate; c. the physical build of the inmate; d. whether the inmate has previously been incarcerated; e. whether the inmate's criminal history is exclusively nonviolent; f. whether the inmate has prior convictions for sex offenses against a child or an adult; g. whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; h. whether the inmate has previously experienced sexual victimization; i. the inmate's own perception of vulnerability; j. whether the inmate is detained solely for civil immigration purposes. During the Pre-audit phase, the Auditor reviewed the PRAT and noted that it mirrored the ten criteria set forth by this standard. While onsite the Auditor confirmed that the initial screening is conducted upon the inmate's arrival to the facility, the reassessment screening is conducted within 20-30 days of the initial screening, and an annual screening will be completed with their counselor by reviewing 10

random inmate PRAT screenings. An interview with the Staff Responsible for Risk Screening verified that inmates transferring into the facility will meet with medical staff and have their initial screening within a day unless the inmate arrives afterhours on the weekend.

Subsection (e)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-11: B (4) (k)]) requires the PRAT initial assessment, which is conducted within 72 hours of reception, shall consider prior acts of abuse, prior convictions for violent offenses, and history of prior facility violence or sexual abuse, as known to the Department, in order to assess inmates for the risk of being sexually abusive. During the Pre-audit phase, the Auditor reviewed the PREA Risk Assessment Tool (PRAT) and the PREA Risk Assessment Toll User Guide. This can found on questions 13 and 14 of the risk assessment tool as reviewed by the Auditor. An interview with the Staff Responsible for Risk Screening indicated that question 13 (Did any of your current or prior offenses involve sexually victimizing a child victim?) and question 14 (Did any of your current or prior offenses involve sexually victimizing an adult victim?) addresses prior convictions of sex offenses as noted for this subsection.

Subsection (f)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-11: B (5) (c)]) requires that a reassessment shall be conducted between day 20 and 30 of every inmate's arrival in the system or receipt into another facility utilizing the PRAT. Additionally, the counselor shall reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility staff since the intake screening. During the Pre-audit phase, SCI-Frackville reported 653 inmate entering SCI-Frackville were reassessed within the timelines of this subsection. While onsite the Auditor reviewed 10 PRAT records to verify timeliness of the reassessments. An interview with the Staff Responsible for Risk Screening confirmed that the inmates will be reassessed within 30 days by a Mental Health counselor. The interviews with 21 random inmates indicated that most have participated in a PREA reassessment during their annual meeting with a Mental Health counselor.

Subsection (g)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-11:B(5)(g)]) requires that an inmate's risk level shall be reassessed by the PREA Compliance Manager, utilizing the PRAT, when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of victimization or abusiveness. An interview with the Staff Responsible for Risk Screening report that they perform the initial PRAT upon an inmate's transfer into the facility, then they are seen within 30 days by a Mental Health counselor, and atleast annually after that for their annual review with the Mental Health counselor, any other time, it will be the PREA Compliance Manager that will reassess the inmate. The interviews with 21 random Inmates indicate that they have participated in the PRAT as part of their annual review.

Subsection (h)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-11:B(5)(h)]) mandates that inmates shall not be disciplined for refusing to answer, or for not disclosing complete information in response to the questions regarding prior victimization, disabilities, their perception of vulnerability, or their sexual orientation. An interview with Staff Responsible for Risk Screening confirmed this is the practice at SCI-Frackville. Inmate participation is optional

but she will talk to them about why the information is important.

Subsection (i)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-10: B]) requires the facility to ensure that PRAT assessments are confidential and only disclosed to staff with the need to know. The sensitive information collected through the PRAT shall be kept as confidential as possible as to not be used to the inmate's detriment by staff or others inmates. During the Pre-audit phase SCI-Frackville reported that all information attained in the PRAT is in electronic format and only staff with a need to know can access this data. SCI-Frackville utilizes the ICAR (Inmate Cumulative Adjustment Records) system for their automated record system. ICAR has role-based security protocols that help facility administration ensure that information is only accessed by those with a need to know and who have been given appropriate authorization and access. An interview with the PREA Coordinator indicated that ICAR is an electronic database where medical/mental health, counselors, and unit managers can input the information. Once it is entered only the PREA Compliance Managers can access it. If the PRAT is written on paper, it will be shredded after the information is inputted into ICAR. An interview with PREA Compliance Manager indicated that the nurse will conduct the initial screening on a hard copy, the nurse will enter the information into the computer system (ICARS) and the paper copy at the time will get shredded. Only the PREA Compliance Manager and the Administrative Officer will be able to review the PRAT. Any ROA (Risk of Abusiveness) or ROV (Risk of Victimization) will have the caption "Housing Concerns via PRAT." This will indicate to the housing unit managers that the inmate is either ROV/ROA and will need to be housed accordingly. An interview with Staff Responsible for Risk Screening confirmed that the PREA Compliance Manager had access to the actual information that was on the PRAT.

Corrective Action: None

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 008, Section 9 (PREA Procedures Manual) 6 pages 3. Documents <ol style="list-style-type: none"> a. PRAT (PREA Risk Assessment Tool) 3 pages b. PREA Risk Tracking Memo and Instructions, 8 pages c. Attachment 2-E, PRAT (PREA Risk Assessment Tool) 3 pages d. Attachment 9-A & 9-B, GRC (Gender Review Committee) checklist e. Attachment 9-B, GRC (Gender Review Committee) Review Assessment checklist 4. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent b. PREA Compliance manager c. Staff Responsible for Risk Screening d. Medical and Mental Health Staff e. Gay/Lesbian/Bisexual Inmates <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-10: B (3)]) requires the information received through the administration of the PRAT (Assessment Tool and Instructions) 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. During the onsite review, the Auditor observed that inmates with high scores on the PRAT are identified by the notation "Housing Concern." This identifier will allow management to make informed decisions. An interview with PREA Compliance Manager indicates that medical staff conducts the initial PREA screening for an inmate upon transfer to SCI-Frackville. If during the PRAT an inmate scores as a ROV or ROA, the PREA Compliance Manager will get a phone call or an email notification. An interview with the Staff Responsible for Risk Screening confirmed that the PRAT is used for housing, bed placement, work, education, and program assignments.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-13: B (5) (I)]) requires that the Department shall make individualized determinations about how to ensure the safety of each inmate. Inmates are assessed with 72 hours of arrival, within 30 days of their initial assessment they are reassessed. Every inmate is reassessed at the annual review conducted by his/her counselor using the PRAT. An inmate's risk level shall be reassessed by the PREA Compliance Manager, using the PRAT, due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of victimization or abusiveness.</p>

An interview with the Staff Responsible for Risk Screening reported they look at appropriate placement for vulnerable inmates because it's about keeping the inmates safe.

Subsection (c)

Policy ADM 008, Section 9 (PREA Procedures Manual [page 9-3: A (B) (5)]) requires in deciding whether to assign a transgender or intersex inmate to a facility that is consistent with his/her gender identity, and in making other housing and programming assignments, the Department shall consider, on a case-by-case basis, whether a placement would ensure the health and safety of all impacted inmates and whether placement could potentially present management or security concerns. An interview with the PREA Compliance Manager confirmed they are encouraged to spread them out through the facility on a case by case basis. The GRC (Gender Review Committee) allows LGBT inmates to make requests on housing and programming assignments based on their perceptions. Interviews with 7 lesbian, gay, bisexual and transgender inmates confirm that inmates are not placed in specific housing units based on their identification. They are disbursed throughout the facility.

Subsection (d)

Policy ADM 008, Section 9 (PREA Procedures Manual [page 9-3: B (4) (b)]) requires the PREA Compliance Manager shall privately meet with the transgender or intersex inmate within five business days of notification and complete the GRC (Gender Review Committee) Checklist. Following this assessment, the inmate shall be reassessed every six months to review any threats to safety experienced by the inmate. During the Pre-audit phase, the Auditor examined the GRC checklist and noted it takes into consideration the inmate's gender at birth, gender identification, medical considerations, legal considerations, and safety/security concerns. These are the minimum considerations when making housing decisions for transgender and intersex inmates. The GRC is comprised of the PREA Compliance Manager, Licensed Psychology Manager/designee, Corrections Health Care Administrator/designee, Deputy Superintendent of Centralized Services, and Deputy Superintendent of Facility Management/designee. The transgender or intersex inmate is invited to participate but is not required to attend. An interview with the PREA Compliance Manager indicated that every 6 months they are reviewed. An interview with the Staff Responsible for Risk Screening indicated that she does not participate in the GRC. Her primary function is the initial PRAT when the inmate first transfers into the facility to conduct the initial assessment.

Subsection (e)

Policy ADM 008, Section 9 (PREA Procedures Manual [page 9-3: D (5)]) requires a transgender or intersex inmate's own views, with respect to his/her own safety shall be given serious consideration. During the onsite review the Auditor examined the PREA Risk Tracking Memo and the GRC checklists. An interview with the PREA Compliance Manager indicated that through the GRC (Gender Review Committee) Checklist and process, the inmate has the opportunity to participate in the process. An interview with the Staff Responsible for Risk Screening indicated that a transgender or intersex inmate's own views, with respect to his/her own safety shall be given serious consideration. The interviews with 7 lesbian, gay, bisexual and transgender inmates confirm that most participate in the reassessment process.

Subsection (f)

Policy ADM 008, Section 9 (PREA Procedures Manual [page 9-6: G]) mandates transgender and intersex inmates shall be given the opportunity to shower separately and privately from

other inmates. During the on-site review the Auditor observed that all showers in the facility were single showers with a privacy curtain. Interviews with the PREA Compliance Manager, the Staff Responsible for Risk Screening and the 7 lesbian, gay, bisexual, transgender, or intersex inmates verify they all have single shower areas that are private from other inmates.

Subsection (g)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-13: C]) requires the Department shall not place LGBTI inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless placement is in a dedicated facility, unit or wing established in connection with a consent decree, legal settlement, or legal judgement for the purpose of protecting such inmates. During the on-site review the Auditor noted that LGBT inmates were disbursed throughout the facility. Interviews with the PREA Compliance Manager, the Staff Responsible for Risk Screening, and the 7 LGTB inmates confirmed they are housed throughout the facility and there is not one housing unit dedicated to housing LGBTI.

Corrective Action: None

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 008, Section 3 (PREA Procedures Manual) 6 pages c. ADM 008, Section 4 (PREA Procedures Manual) 8 pages d. ADM 802, Section 1 (Administrative Custody Procedures Manual) 5 pages 3. Documents <ol style="list-style-type: none"> a. Initial Response Checklist 4. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent b. Staff Who Supervise Inmates in Segregated Housing <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 2 (PREA Procedures Manual [page2-6:A(6)]) require 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 separations 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. During the Pre-audit phase SCI-Frackville reported that there were zero inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months. While onsite the Auditor reviewed all four sections of the Initial Response Checklist and noted it provides justification for appropriate temporary housing, including restrictive housing, for the alleged victim. An interview with the Superintendent confirmed that as a last resort an inmate would be placed in AC as a last resort and no more than 24 hours. They also have the option of housing the inmate at a nearby facility but they have not had to utilize any of these options. She confirmed that zero inmates were placed into AC as a means of protection.</p> <p>Subsection (b) ADM 802, Section 1 (Administrative Custody Procedures Manual [page 1-2:A(5)]) require 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 inmates to the extent possible. If the facility restricts access to these opportunities, the facility shall document the opportunities that have been limited, the duration of the limitation and the reasons for such limitations. An interview with the Staff who Supervise Inmates in Segregated Housing indicated that he was aware of this policy but as of yet, have not had an inmate assigned to involuntary AC for the purpose of protection from sexual</p>

victimization within the past 12 months. There has never been an alleged PREA victim in segregation however, if there was a point in the future where it happened, they would be able to keep their treatment and programming privileges. There were no inmates in Segregated Housing (for risk of sexual victimization/who alleged to have suffered sexual abuse) to interview.

Subsection (c)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-7:A(6)(f)]) state the facility may assign inmates to involuntary AC only until an alternative means of separation from likely abusers can be arranged and such assignment shall not ordinarily exceed 30 days. During the Pre-audit phase SCI-Frackville reported zero inmates at risk of sexual victimization were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement within the past 12 months. While onsite the Auditor noted that there were zero inmates placed in to AC who were at high risk of sexual victimization and subsequently placed into restricted housing. An interview with the Superintendent confirmed there has not been an inmate at risk for sexual victimization in segregation, however if it were to happen, it would not be for longer than 24 hours. Currently there are other placement options instead of segregation (i.e. another housing unit, another facility, or a different part of the facility). An interview with the Staff Who Supervise Inmates in Segregated Housing corroborated that they were aware of the policy but has not had an Inmate at risk of sexual victimization that was assigned to involuntary segregated housing. There were no inmates in Segregated Housing (for risk of sexual victimization/who alleged to have suffered sexual abuse) to interview.

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-7:A(6)(d)]) requires if an involuntary AC housing assignment is made, the shift Commander shall clearly document the basis for the staff member's concern for the inmate's safety, the other alternative means of separation that were explored and the reason why no alternative means of separation can be arranged. During the Pre-audit phase SCI-Frackville reported that there were zero inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months therefore there were no case files to review for this subsection. It should be noted that al

Subsection (e)

ADM 802, Section 1 (Administrative Custody Procedures Manual [page 1-2:A(7)]) require at least every 30 days, the Program Review Committee (PRC) shall ensure each such inmates is reviewed to determine whether there is a continuing need for separation from the general population and it shall be documented. During the Pre-audit phase SCI-Frackville reported that there were zero inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months. An interview with the Staff Who Supervise Inmates in Segregated Housing corroborated that they were aware of the standard and have not had an inmate at risk of sexual victimization were assigned to involuntary segregated housing. There were no inmates in Segregated Housing (for risk of sexual victimization/who alleged to have suffered sexual abuse) to interview.

Corrective Action: None

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 3 (PREA Procedures Manual) 6 pages b. 11.5.1, Section 1 (Records office Operations Procedures Manual) 14 pages 3. Documents <ol style="list-style-type: none"> a. PREA posters b. DC-121 Report of Incident c. DC-135A Inmate Request form 4. Interviews with the following: <ol style="list-style-type: none"> a. PREA Compliance manager b. Random Staff c. Random Inmates d. Inmates Who Reported Sexual Abuse <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-1:A(4)]) provides inmates with multiple methods to privately report sexual abuse and sexual harassment, or retaliation, staff neglect or violation of responsibilities that may have contributed to such incidents. There are three methods available in the facility: 1) writing to any staff member; 2) verbally informing any staff member; 3) write to the Sexual Abuse Reporting address. Inmates can write to staff using the DC-135A – Inmate Request form. Once an allegation is brought to the attention of a staff member, a DOC-121 – Report of Incident is generated to initiate an investigation. During the onsite review the Auditor observed PREA posters throughout the facility providing staff, inmates and visitors with a mechanism to report sexual abuse or sexual harassment or retaliation for reporting a PREA. The interviews with 16 random staff reported that they understood and could articulate the reporting mechanisms for inmates. They indicated that they were knowledgeable with the various methods for inmates to report an allegation of sexual abuse and sexual harassment, or retaliation, staff neglect or violation of responsibilities that may have contributed to such incidents. Most of the staff mentioned a 1-800 PREA number that at one time existed. The interviews with 21 random inmates indicated they understood their reporting options as a result of PREA education, posters, and signage. They also indicated that at one time there was a state PREA hotline that is no longer operational. The Auditor investigated the collective belief between the staff and inmates of a 1-800 number or PREA “Hotline” that existed. Through communication with the PREA Coordinator it was discovered the 1-800 number or PREA “Hotline” as it is referred to, have been out of service since 2014. The telephone number that currently exists for inmates to call is to the Pennsylvania State Police for reporting excessive police force or any criminal complaint but not for PREA allegations. The voicemail actually directs the caller to an address to write to report a PREA allegation. This is the same address that is listed for inmates to write on the</p>

PREA posters in the housing units, the Inmate Handbook, and the PREA handouts.

Subsection (b)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-1:B]) provides inmates with multiple methods to report sexual abuse and sexual harassment, or retaliation, staff neglect or violation of responsibilities that may have contributed to such incidents to a public or private entity or office that is not part of the agency. There are three methods available: 1) write to the Sexual Abuse Reporting Address; 2) have a family or friend report the allegations on behalf of the inmate by writing Pennsylvania coalition Against Rape; 3) can also place a report via the departmental website. All reports received by the Sexual Abuse Reporting Address, established for the anonymous reporting of sexual abuse or sexual harassment to the Pennsylvania State Police, the letter shall be scanned and emailed to the Department's PREA Notification email address for tracking purposes and dissemination to the appropriate facility. The PREA Compliance Division is responsible to check the email box daily (business days only) for follow up and referral purposes and this information shall be maintained within the investigative file. During the onsite review the Auditor observed PREA posters throughout the facility identifying the reporting methods for inmates, staff and the public. An interview with the PREA Compliance Manager indicated that there is an abuse hotline that provides the caller with an address to report their PREA allegation. Or they can write to central office directly. All allegations will be investigated regardless of how they are received. The interviews with the 21 random Inmates indicated that at one time a PREA reporting telephone number was in service however the reporting address is the most current route of communication to report a PREA allegation.

Policy 11.5.1, Section 1 (Records office Operations Procedures Manual [page 1-14: O]) mandates the Department does not accept or house inmates that are detained solely for civil immigration purposes. SCI-Frackville does not accept or house inmates detained solely for civil immigration purposes per policy.

Subsection (c)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-1:A(3)]) requires staff shall accept and document reports made verbally, in writing, anonymously, and from third parties and promptly forward to the facility's designated investigators. During the on-site the Auditor reviewed a sample of incident reports containing allegations of sexual abuse and sexual harassment. The interviews with 16 random staff indicated they are aware of the requirement to accept reports alleging sexual abuse and sexual harassment. The interviews with the 21 random inmates indicated they are aware of these reporting options because of the PREA posters in the housing units that they see every day.

Subsection (d)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-4: C (5)]) provides staff with an option to privately report an allegation of sexual abuse, sexual harassment, or retaliation. They may write the Sexual Abuse Reporting Address anonymously. Reports can also be submitted online at www.tipssubmit.com. During the onsite review through informal interviews with housing unit staff and inmates, all were aware of the PREA posters and their options of reporting. The interviews with 16 random Staff indicated they were aware of this option through trainings and signage posted throughout the facility. Most staff stated they would report it directly to their shift commander, the PREA Captain or the PCM.

	Corrective Action: None
--	-------------------------

115.52	Exhaustion of administrative remedies
	<p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 991 360">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="252 416 1289 745" style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 3 (PREA Procedures Manual) 6 pages b. ADM 804, Section 1 (Inmate Grievance System Procedures Manual) 2 pages 3. Documents <ol style="list-style-type: none"> a. DC-804 Grievance Rejection form 4. Interviews with the following: <ol style="list-style-type: none"> a. PREA Compliance Manager <p data-bbox="252 797 580 831">Findings (by subsection):</p> <p data-bbox="252 887 469 920">Subsection (a-g)</p> <p data-bbox="252 931 1477 1939">Agency policy does not allow the use of the inmate grievance system to report sexual abuse or sexual harassment. ADM 804, Section 1 (Inmate Grievance System Procedures Manual [page 1-2: A (6)]) states a grievance regarding an allegation of sexual nature (abuse/harassment) against a staff member or inmate-on-inmate sexual abuse will not be addressed through the Inmate Grievance System. These allegations are taken seriously by the Department and must and will be investigated to make sure that inmates are safe in the facilities. If a grievance is filed against a staff member regarding an allegation of sexual nature (abuse/harassment) or inmate-on-inmate sexual abuse, the grievance will be immediately forwarded to the Security Department as well as the PREA compliance Manager in accordance with Department policy to start an investigation and will not be addressed through the Inmate Grievance System. Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-2:B(6)]) states that 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 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/designee for tracking and investigation. The inmate shall be notified of this action. During the onsite review the Auditor noted that each housing unit had grievance boxes with locking mechanisms attached where an inmate may deposit a grievance but not withdraw one. The Auditor also examined a DC-804 Grievance Rejection form which contained 14 reasons for a rejection. Reason 1(a) is listed as allegations of a sexual nature against a staff member and/or inmate on inmate sexual contact. An informal interview with the PREA Compliance Manager confirmed that although if the grievance is rejected. All allegations of sexual abuse or sexual harassment are referred to the Security Office for investigation.</p> <p data-bbox="252 1995 560 2029">Corrective Action: None</p>

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 4 (PREA Procedures Manual) 8 pages b. 11.5.1, Section 1 (Records Office Operations Procedures Manual) 14 pages 3. Documents <ol style="list-style-type: none"> a. PREA posters b. Attachment 2-H, PREA handout (Spanish and English) c. SARCC LOA (Sexual Assault Resource Counseling Center - Letter of Agreement) 4. Interviews with the following: <ol style="list-style-type: none"> a. Random Inmates b. Inmates Who Reported Sexual Abuse c. PREA Compliance Manager <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7:E(2)]) requires 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 phones call, and/or in writing. The preferred service delivery method is in person in a confidential setting. During the Pre-audit phase, SCI-Frackville reported that inmates receive this information upon intake where they receive a PREA handout listing the contact information and during inmate orientation where they receive PREA education. While on-site the Auditor observed that the SARCC (Sexual Assault Resource Counseling Center) handouts were accessible to inmates with reporting information as were the PREA Handouts (Spanish and English) that inmates receive during Intake. The interviews with the 12 Inmates, Who Reported Sexual Abuse indicated they have utilized these reporting methods and the ones that have not, are aware of their reporting options. The Interviews with 21 Random Inmates indicated they think they can get these services through the Mental Health staff.</p> <p>Subsection (b) Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7:E(3)]) requires the PREA Compliance Manager to 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. During the Pre-audit phase SCI-Frackville submitted a Rape Crisis Offering form for review and a copy of the Sexual Assault Resource Counseling Center - Letter of Agreement. The form is an acknowledgement of emergency medical treatment and crisis intervention services available to the inmate. It also</p>

states that the facility will inform the inmate prior to providing access to outside confidential support services, of the extent to which such communicating will be monitored. While onsite the Auditor reviewed two random samples of the completed form signed and dated by the inmate and PREA Compliance Manager/designee for the month of August. The interviews with the 21 random inmates indicated they weren't sure what the mandatory reporting laws were about. The interviews with the 12 Inmates Who Reported Sexual Abuse indicated that there was at least one meeting with a victim services advocate (face to face) and the others were facilitated through a non-monitored phone call scheduled by the PCM.

Subsection (c)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7: E]) require the Department works in collaboration with the Pennsylvania Coalition Against Rape (PCAR) and its member centers. During the Pre-audit phase SCI-Frackville reported that the facility PREA Compliance Manager, in conjunction with the statewide PREA Coordinator/designee has worked to establish mutual agreements with local rape crisis centers where all Department facilities are located. SCI-Frackville has a Letter of Agreement with the Sexual Assault Resource and Counseling Center of Schuylkill County. The Auditor conducted a telephone interview with a staff member at the SARCC who confirmed the agreement to provide the services required by this standard and the Letter of Agreement.

Corrective Action: None

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 3 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. PREA poster (English and Spanish) b. Inmate Handbook, 34 pages c. Agency website at: http://www.cor.pa.gov/general%20Information/PrisonRapeEliminationAct (PREA) /Pages/default.aspx <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-4: D]) ensures 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. 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. During the Pre-audit phase, SCI-Frackville reported that PREA posters were in every common area for staff, inmates, and the public to view. They also submitted a copy of the Inmate Handbook which contained reporting options for the inmates. While on-site review the Auditor observed that the PREA posters were available throughout the facility to include the Lobby and Visiting Room. The Auditor also accessed the agency website which contains information on how to report sexual abuse or sexual harassment on behalf on an inmate.</p> <p>Corrective Action: None</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 3 (PREA Procedures Manual) 6 pages 3. Documents <ol style="list-style-type: none"> a. DC-121 Employee Report of Incident form b. DC-484, Mental health Informed Consent Document c. List of 2017 Investigations provided by PCM, updated May 2017 4. Interviews with the following: <ol style="list-style-type: none"> a. Random Staff b. Medical and Mental Health Staff c. Superintendent d. PREA Coordinator <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-3:C(1)]) requires staff to report immediately any knowledge, suspicion or information received regarding an incident of sexual abuse or sexual harassment, retaliation against inmates or staff who reported such an incident and/or staff neglect violation of responsibilities that may have contributed to an incident or retaliation. The incidents may have occurred in any confinement facility, whether or not it is affiliated with the Department. During the on-site review the Auditor observed a sample of employee incident reports regarding allegations of sexual abuse or sexual harassment of inmates. The interviews with the 16 Random Staff indicated that they are aware of their responsibility to immediately report allegations of sexual abuse or sexual harassment regardless of how they are notified.</p> <p>Subsection (b) Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-3:C(4)]) requires that apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse allegation to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decision, where sexual abuse with an inmate is reported. The interviews with the 16 Random Staff reported they would immediately contact the on duty Shift Commander or the PREA lieutenant, or the PREA Compliance Manager but they would not share the information other than with staff that has a need to know for treatment, investigation, and security or other management decisions.</p> <p>Subsection (c) Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-3:C(2)]) requires that unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse, to inform inmates of the practitioner's duty to report,</p>

and the limitation of confidentiality, at the initiation of services. The interviews with the two Medical and Mental Health staff indicated that prior to conducting the interview, the psychologist shall explain that, if indicated for the inmate's protection, information disclosed shall be shared only on a need to know basis with indicated staff (i.e., Security Office, PCM, Unit Manager, Counselor, Sexual Abuse Review Team, Pennsylvania State Police, etc.) The psychologist shall then have the inmate sign DC-484. Staff reported they understand their responsibility and the confidentiality requirements for inmate medical and mental health information pursuant to this policy.

Subsection (d)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-1: A (5)]) requires 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. Policy ADM 008, Section 2 (PREA Procedure Manual [page 2-7:8]) mandates that male youthful offenders shall be transferred to SCI-Pine Grove within 24 hours of reception by the Department. Female youthful offenders, under the age of 18 shall immediately be placed into the Youthful Inmate Unit at SCI-Muncy. During the Pre-audit stage SCI-Frackville reported that inmates under the age of 18 are not housed at the facility. While on site the Auditor reviewed the ages of the inmates housed at SCI-Frackville to verify that youthful inmates are not at SCI-Frackville, this information was located on the PA DOC public website. The interviews with the Superintendent and the PREA Coordinator confirmed this population is not housed at SCI-Frackville.

Subsection (e)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-1:A(3)]) require staff to accept and document reports made verbally, in writing, anonymously, and from third parties and promptly forward to the facility's designed investigators. During the on-site review the Auditor examined a sample of investigations and noted the investigative captain was informed of each allegation as documented. Interview with the Superintendent confirmed this is the practice.

Corrective Action: None

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 008, Section 4 (PREA Procedures Manual) 8 pages 3. Documents <ol style="list-style-type: none"> a. Attachment 4-A, Shift Commander Checklist 4. Interviews with the following: <ol style="list-style-type: none"> a. Agency Head b. Superintendent c. Random Staff <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-1:B]) requires that when Department staff learn that an inmate is subject to a substantial risk of imminent sexual abuse, appropriate and immediate action shall be taken to protect that inmate. During the Pre-audit phase, SCI- Frackville reported that there have been no instances of this in the past 12 months. While on-site the Auditor examined sample of Attachment 4-A from actual incidents and noted the practice followed policy. An interview with the Agency Head verified that they would separate the alleged victim and alleged perpetrator immediately. (Administrative Segregation for any alleged victim would be the very last resort). DOC utilizes an extraordinary occurrence reports (EOR) that are reviewed by the deputy. They would not segregate the victim. Another option is to move the alleged victim to another housing unit. Most PA prisons have an East or West section in a prison population of approximately 2500. We could separate by East or West. They also have the ability to transport them to another facility within the same region. They would remove the alleged perpetrator immediately or move the alleged victim to an alternate housing unit or prison. An interview with the Superintendent indicated that there were many other options available and using segregation would be the last resort. The interviews with the and 16 Random Staff verified that segregation would be the last resort.</p> <p>Corrective Action: None</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 3 (PREA Procedures Manual) 6 pages 3. Documents <ol style="list-style-type: none"> a. Attachment 3-B, Notification of Sexual Abuse Allegation to Another Facility form b. Investigation packet initiated by notification of a sexual abuse at another facility, 29 pages 4. Interviews with the following: <ol style="list-style-type: none"> a. Agency Head b. Superintendent <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 3 (PREA Procedures Manual [page3-4: E (1)]) ensures an inmate may file a report of sexual abuse sustained while confined at another facility. It is the Facility Manager/designee’s responsibility to notify the head of the facility in which the reported abuse occurred. During the Pre-audit phase, SCI-Frackville reported 5 allegations were received in the past 12 months that an inmate was abused while confined at another facility. These allegations were documented and were investigated. While onsite the auditor reviewed a sample of the notification forms completed for the allegations. The information provided in the form was the dates, times, location of incident, the alleged abuser, alleged victim, whether it was a verbal or written notification, and actions taken upon notification of an incident. The PREA Compliance Manager at both sites is responsible for coordinating the information process. The Security Office at the location of the incident will conduct the investigation. The inmate receives information regarding the investigative outcome in a confidential and timely manner.</p> <p>Subsection (b) Policy ADM 008, Section 3 (PREA Procedures Manual [page3-4:E(1)]) requires that notification must be provided as soon as possible, but no later than 72 hours after receipt of information and documented on an Attachment 3-B, Notification of Sexual Abuse Allegation to Another Facility form. During the onsite review the Auditor examined three out of five emails allegations between Facility Managers and Notification of Sexual Abuse Allegation to Another Facility form to determine compliance with this subsection; notifications were completed within 72 hours.</p> <p>Subsection (c) Policy ADM 008, Section 3 (PREA Procedures Manual [page3-4: E (1)]) requires a Notification of Sexual Abuse Allegation to Another facility be maintained by the PREA Compliance Manager in an annual file for audit verification purposes. While on site the Auditor examined three email allegations and Notification of Sexual Abuse Allegation to Another Facility form</p>

dates to ensure timelines are appropriate and compliant to policy.

Subsection (d)

Policy ADM 008, Section 3 (PREA Procedures Manual [page3-5: E (2)]) requires that allegations from another facility/agency is investigated in accordance with PREA standards and are the responsibility of the facility where the alleged abuse occurred. During the Pre-audit phase, SCI-Frackville reported 9 allegations of sexual abuse were received from other facilities. While on site the Auditor examined an investigation packet initiated upon notification from another facility. The incident occurred two years prior. The facility processed the investigation noting the date of incident complying with policy and this subsection. The interviews with the Agency Head and Superintendent indicated that there would be an acknowledgement receipt of complaint from the Facility Manager. A tracking number would be issued and an investigation initiated. The initial investigation would be conducted at the institution level if it's an administrative investigation. If it's out of state, it would be assigned to OSII (Office of Special Investigations and Intelligence) for investigation.

Corrective Action: None

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 4 (PREA Procedures Manual) 8 pages 3. Documents <ol style="list-style-type: none"> a. Frist Responder Card b. PREA Basic Training Lesson Plan, PA DOC Training Academy, February 2017 c. PREA Essentials (Refresher Training) updated January 21, 2016 d. PREA training roster for SCI-Frackville 2016 indicating 364 staff members trained 4. Interviews with the following: <ol style="list-style-type: none"> a. Security Staff and non-Security Staff First Responders b. Inmates Who Reported Sexual Abuse c. Random Staff <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-1: A]) details the first responder duties required by this standard upon learning that an inmate was sexually abused. During the Pre-Audit phase, SCI-Frackville reported 50 allegations of sexual abuse in the past 12 months. All 50 allegations were reported several days after the alleged sexual abuse incident. The time frames were outside the time period (96 hours) that would have allowed for the collection of physical evidence. The Auditor examined the following documents and noted they addressed the first responder training and duties; PREA Essentials (Refresher Training [page 6 & 7]) and PREA Basic Training Lesson Plan [page 6 of 12 Immediate Response Procedures]. While on site the Auditor noted that the 2016 PREA training roster for all SCI-Frackville staff indicated that 365 staff members completed PREA training. The facility has provided staff with first responder cards that can easily be accessible in their pockets or their ID badge holders when responding to an incident. The interviews with the four Security Staff and non-Security Staff First Responders indicate an understanding of their first responder duties and an ability to articulate them to the Auditor. The staff indicated they would separate the inmates, secure the scene, and contact medical. The interviews with the 12 Inmates who Reported Sexual Abuse indicated they reported the incidents between two weeks to approximately 3 years after the incident occurred.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-1: A (2)]) distinguishes the first responder duties for security staff versus non-security staff. Security Staff are required to notify the Shift Commander, immediately separate the alleged victim and alleged abuser, secure any reported crime scene until appropriate steps can be taken to collect evidence, and if abuse occurred within the last 96 hours that still allows for the collection of physical evidence, request the alleged victim and ensure that the alleged abuser not take any actions</p>

that could destroy physical evidence, including as appropriate washing brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Non-Security Staff are required to immediately notify the Shift Commander, if the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence. The interviews with the four Security Staff and non-Security Staff First Responders indicated they would immediately contact the shift commander, separate the inmates, secure the scene, contact medical, tell inmates not to wash, eat, drink, or use the bathroom. The interviews with the 16 Random Staff indicated that they were trained in PREA within the past 12 months whether it was their annual refresher training or web based PREA training.

Corrective Action: None

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, PREA Manual, FRA (SCI-Frackville Coordinated Response Plan) 6 pages, effective April 1, 2016 3. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, PREA FRA (SCI-Frackville Coordinated Response Plan) details SCI-Frackville’s coordinated response plan for actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators and facility leadership. The Auditor reviewed the plan and noted that in addition to actions take in response to an incident of sexual abuse, there are also sections pertaining to data collection, Sexual Abuse and Sexual Harassment Prevention and Training, Reporting Sexual Abuse and Sexual Harassment, Inmate Discipline Related to Sexual Abuse and Sexual Harassment, Notification of Inmates, and Working with Transgender/Intersex Inmates. An interview with the Superintendent confirmed the Coordinated Response Plan is discussed and trained with staff. There’s special training for medical and psychological staff.</p> <p>Corrective Action: None</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Documents <ol style="list-style-type: none"> a. Suspension Pending Investigation Memo & Procedures, dated January 13, 2015 b. H-1 Act 195 Interest Arbitration Award 2014 b. SEIU Local 668 c. FOSCEP MOU d. AFSCME Master Agreement e. PSSU Agreement f. PDA Agreement g. CIVEA Agreement h. SEIU HCPA Agreement i. AFSCME 1st Level Supervisors of H1 MOU 4. Interviews with the following: <ol style="list-style-type: none"> a. Agency Head <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>During the Pre-audit phase SCI Frackville submitted collective bargaining agreements with eight different unions. The Auditor reviewed the 8 union agreements and verified none of these collective bargaining agreements contain language that limit the ability to remove an alleged staff sexual abuser from contact with any inmates pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted. In addition, the collective bargaining agreements are silent regarding suspensions pending investigation. When the contract is silent on issues, policy then governs. It should also be noted that Act 195 Interest Arbitration Award [page 3:5] states "Article 33, Section 20 shall be amended to provide that the Commonwealth shall have no requirement to furnish 24 hours advance written notification of inmate or patient charges in accordance with Section 20, when an allegation falls within the purview of the Prison Rape Elimination Act of 2003." The previous language in Article 33 Section 20 required 24 hours advance written notification of inmate charges against an employee at least 24 hours prior to commencement of proceedings. An interview with the Agency Head indicated that through binding arbitration, the agency is permitted to remove alleged staff sexual abusers from contact with any inmate pending an investigation for a determination of whether and to what extent discipline is warranted, suspension of 30 days to termination.</p> <p>Corrective Action: None</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 008, Section 3 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. Attachment 2-B, Retaliation Monitoring Form 4. Interviews with the following: <ol style="list-style-type: none"> a. Agency Head b. Superintendent c. Staff Member charged with Monitoring Retaliation d. Inmates Who Reported Sexual Abuse <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-5:F(1) and (2)]) mandates the Department shall 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. 1) Retaliatory action is prohibited against an inmate, staff member, or other individual who reports sexual abuse, sexual harassment, or provides information during an investigation. Any individual, who seek to deter an inmate or other individual from reporting sexual activity, or who in any manner, harasses or intimidates any person who reports the alleged contact is subject to discipline. 2) The Deputy Superintendent for Centralized Services shall meet with any staff that requires retaliation monitoring due to report of sexual abuse or sexual harassment, or because of an expressed fear of retaliation due to cooperation with an investigation of inmate sexual abuse or sexual harassment, per PREA Standard and in accordance with Section 3 of this procedures manual. Contact shall be made with the identified staff for at least 90 days and documented on the Department Retaliation Monitoring form. During the Pre-audit phase SCI-Frackville reported 12 designated staff members charged with monitoring retaliation, (4) Unit Managers, (7) Counselors, and (1) Psychologist.</p> <p>Subsection (b) Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-6:F(3)and (4)]) requires the Department shall employ multiple protection measures, such as housing changes or transfer for inmate victims or abuser, removal of alleged staff or inmate abusers from contact with victim. The Department shall also make available emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment, or for cooperating with investigators. For at least 90 days following a report of sexual abuse, the Department shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse or sexual harassment, and of inmates who were reported to have suffered sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by</p>

inmates or staff and shall act promptly to remedy such retaliation. Items the Department shall monitor include: a. disciplinary reports; b. housing reports; c. program changes; d. negative performance reviews; and e. reassignments of staff. While onsite the Auditor examined two random samples of the Retaliation Monitoring forms to confirm compliance with this subsection. An interview with the Agency Head indicated that he is proactive and vocalizes the zero tolerance policy (sexual abuse, sexual harassment, and retaliation for reporting). An interview with the Superintendent indicated that retaliation monitoring is up to 90 days. SCI-Frackville has added an administrative officer position to the PREA Compliance Manager staff that is responsible for maintaining a tracking form to ensure that the Mental Health staff is meeting with the alleged victims within their appropriate timeframes. An interview with the Staff Member charged with Monitoring Retaliation reported that she would initiate the contact with the inmate and report her findings in writing to the PREA Compliance Manager. She'd watch the inmate on the block and talk to the inmate and listen to their concern. The timeline to meet with the inmate is broken up into 30, 60, and 90 day increments. The interviews with the 12 Inmates Who Reported Sexual Abuse indicated that 11 of them did receive retaliation monitoring for a short period and 1 refused. 4 of the inmates indicated they received retaliation monitoring services but felt it didn't do enough for them (i.e. special transfers to a unit or facility of their choice or they requested single cell status and it was denied).

Subsection (c)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-5: F (4)]) requires the Department shall continue monitoring beyond 90 days if the initial monitoring indicates a continuing need. During the Pre-audit phase, SCI-Frackville reported zero times in the past 12 months an incident of retaliation occurred. The Auditor reviewed two random samples of the Retaliation Monitoring forms utilized to record retaliation monitoring past 90 days to confirm compliance with this subsection. Interview with Staff Member charged with Monitoring Retaliation indicated she would watch the interaction between the staff and inmates to gauge their behaviors. Interview with the Superintendent indicated that she would ensure the retaliation monitoring was conducted.

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-2: A (2) (c)]) requires periodic status checks of inmates by the corrections counselor in compliance with this subsection. During the onsite the Auditor reviewed two samples of the Retaliation Monitoring Forms and noted that the retaliation status checks were conducted within 15 days, 30 days, 60 days, and 90 day increments. An interview with the Staff Member charged with Monitoring Retaliation reported that the 90 days is the regular amount of time for monitoring, however she would continue to monitor past the 90 days if it was needed. She has not had to monitor past the 90 days.

Subsection (e)

Policy ADM 008, Section 3 (PREA Procedures Manual [page 3-6:F(7)(5)]) ensures that if any other individual who cooperates with an investigation expresses fear of retaliation, the Department shall take appropriate measures to protect that individual against retaliation. Interview with the Agency Head indicated that he spoke to the new cadet classes and starts off the first day of the Correctional Academy. He speaks to them of ethical behavior, their duty to observe and they can report to him via email as well as his Assistant Secretary (if there's fear of retaliation). Interview with the Superintendent indicated that SCI-Frackville has added an

Administrative Officer to assist the PCM in maintaining a tracking form to ensure that the Mental Health Staff is meeting with the victim within the appropriate timeframes.

Corrective Action: None

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages 3. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent b. Staff Who Supervise Inmates in Segregated Housing <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-6:A(6)]) requires that inmates at a high risk for sexual victimization or inmates who have allegedly suffered sexual abuse shall not be placed involuntarily in Administrative Confinement (AC) as a means of protection unless an assessment of all available alternative 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 like 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. During the Pre-audit phase, SCI-Frackville reported zero inmates in the past 12 months who have alleged sexual abuse were placed into isolation. While on site the Auditor did not observe an inmate in voluntarily in AC as a means of protection or at a high risk of victimization. An interview with the Superintendent indicated that other options besides segregated housing were available. SCI-Frackville has not used segregated housing as a means of protection for any inmate at a high risk for sexual victimization as there are facilities close enough to move an inmate. There are also multiple housing units in which an inmate can be placed. An interview with the Staff who Supervise Inmates in Segregated Housing reported they have not had any alleged inmate victim of sexual abuse placed in Segregated Housing, ever. He was able to confirm that should it happen they would still have access to all their treatment, programming, and education needs.</p> <p>Corrective Action: None</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 1 (PREA Procedures Manual) b. ADM 008, Section 5 (PREA Procedures Manual) 9 pages 3. Documents <ol style="list-style-type: none"> a. Investigation reports b. Training Curriculum c. Training Record d. Four investigations for the month of August 2017 4. Interviews with the following: <ol style="list-style-type: none"> a. Investigative Staff (facility and agency) b. Inmates Who Reported Sexual Abuse c. Superintendent d. PREA Coordinator e. PREA Compliance Manager <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1:A(1)]) requires every report, complaint, or allegation of sexual abuse and sexual harassment, including third party and anonymous reports, shall be investigated promptly, thoroughly, and objectively. SCI-Frackville conducts administrative investigations. If a 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 OSII (Office of Special Investigations and Intelligence) shall coordinate with the criminal investigator/District Attorney's Office (as applicable) to determine when to assume administrative investigation so as to avoid interference with the criminal investigation. Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-4:5(b) (3)]) requires for Sexual Abuse, the investigative Summary shall be completed within 30 days of assignment and prepared in the format provided by the OSII. Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-5:6(b) (1)]) requires for Sexual Harassment, the Investigative Summary shall be completed within 60 days of assignment and prepared in the format provide by OSII. While on site the Auditor reviewed two complete investigations to confirm they were prompt, thorough, and objective. The documentation provided in the investigations contained the initial report of allegation, the witness statements, the report summary noting the evidence collected the reviewing authority approvals to move the investigation forward with a conclusion and the notification document of the investigation completion. The interviews with the 2 Investigators (facility/agency) indicated they would start investigations within 24 hours if not immediately upon receipt. They also stated that anonymous and third party reports would receive the same attention as the other reported allegations.</p>

Subsection (b)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1:A(2)]) requires that where sexual abuse is alleged, the Department shall use investigators who have received specialized training in sexual abuse investigations pursuant to PREA as required by standard 115.34. While on site the Auditor reviewed the training transcripts of the PREA Investigators and the Specialized Training curriculum. Of the 10 investigators, 3 received their training in 2014, (1) in 2015, (4) in 2016, and (2) in 2017. The Specialized Training was two days in length and entailed the required provisions of this subsection. The interviews with the 10 Investigators verified they received the specialized training and could articulate the key components of the course related to investigations in a confinement setting.

Subsection (c)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1:A(3)]) requires Investigators shall gather and/or preserve evidence direct and circumstantial evidence, including any available physical, DNA, and electronic monitoring data; interview alleged victims, suspected abusers, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected abusers. The interviews with the 10 Investigators indicated the first steps to initiating an investigation is the time of the incident and the Shift Commander's Checklist. Timing will determine the need for a SANE/SAFE and notifications. The Security Office will assign an investigator and the number. Depending on the allegation, it could be sent to Pennsylvania State Police. The investigators have 30 days to complete the investigation. They review the incident reports (confiscate receipts, request slips), any video footage, phone call records, Kiosks, emails, consult with the unit manager or counselor, determine if there are witnesses, and conduct the interviews. If the Pennsylvania State Police take the investigation due to a possible criminal violation, the OSII and SCI-Frackville takes on the roll as liaisons for law enforcement and the District Attorney.

Subsection (d)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1:A(7)]) requires when the quality of evidence appears to support criminal prosecution, the Department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. While on site the Auditor reviewed the 4 complete investigative files from the month of August and noted none were referred out for prosecution of sexual abuse. The interviews with the 2 Investigators (facility/agency) indicated the Pennsylvania State Police will consult with prosecutors.

Subsection (e)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-1: A (8)]) requires the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff. The Department shall NOT require an inmate who alleges unwanted or forced sexual abuse to submit to a polygraph examination or other truth telling device as condition of proceeding with the investigation of such an allegation. The interviews with the 2 Investigators (facility/agency) indicated that the credibility of a victim, suspect, or witness is assessed on the evidence and objective facts. Also, under no circumstances would they require an inmate who alleges sexual abuse to submit to a polygraph examination or a truth telling device as a condition for proceeding with an investigation. The interviews with the 12 Inmates who Reported Sexual Abuse confirmed they

were not required or asked to take a polygraph test as a condition for proceeding with an investigation.

Subsection (f)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-4:C(5)(a)(7)]) requires investigator to make an effort to determine whether staff actions or failures to act contributed to the abuse, specifically as it applies to administrative investigations. Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-5: C (5) (b) (3) (a)]) requires for administrative investigations, the report shall include a description of the physical and testimonial evidence, the reasoning behind the credibility assessments, and investigative facts and findings. During the Pre-audit phase, SCI-Frackville reported there were zero substantiated allegations referred for prosecution during this rating period. While onsite the Auditor reviewed one random administrative investigation file (inmate alleged staff made inappropriate sexual comments to him). The investigation was complete from the initial reporting, the interviews of staffs and inmates, to the finding of unsubstantiated to the retaliation monitoring. The interviews with the 2 Investigators (facility/agency) indicated they would look at the policy and determine if staff followed policy. They would also include written statements, video, credibility assessments, and conclusions.

Subsection (g)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-5:C(5)(b)(3)(b)]) requires for criminal investigations, the report shall include a thorough description of the physical, testimonial, legal documents, and attach copies of all documentary evidence where feasible. While on site the Auditor examined two complete investigation files and noted it contained a synopsis, summary of findings, alleged victim statement, alleged abuser statement, witness statements, reviewed documentation/video, conclusion, and recommendations. The interviews with the 2 Investigators (facility/agency) indicated that the documentation collected by the DOC can be used as evidence. The Pennsylvania State Police use their own format for investigations. The process with interviews and evidence are the same.

Subsection (h)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-7: D (1) (I)]) requires if the case has not already been referred for criminal prosecution, OSII shall refer substantiated allegations of conduct that appear to be criminal for prosecution in the county where the abuse occurred. During the Pre-audit phase, SCI-Frackville reported zero substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012. While on site the Auditor reviewed two complete investigation files a sample of investigations between August 2016 and September 2017 and noted of the 72 files, only one was substantiated and it was a sexual harassment investigation. The interviews with the 2 Investigators (facility/agency) confirmed that only 1 investigation was substantiated for verbal sexual harassment.

Subsection (i)

ADM 008, Section 1 (PREA Procedures Manual [C (2)]) requires the Department shall retain all criminal and administrative agency investigative reports for as long as the alleged abuser is incarcerated or employed plus five additional years. Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-6:C(6)(b)(8)]) requires all investigative information shall be retained by the facility Security Office in a secure location for as long as the alleged abuser is

incarcerated or employed by the Department plus five years. During the on-site review the Auditor noted that investigation files were secured within the Security Office. Informal discussions with the PREA investigator indicated that the investigation files were maintained past 20 years. This exceeds standards for this subsection.

Subsection (j)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-2: A (10)]) requires the departure of the alleged victim or abuser from the employment or control of the facility or Department shall not provide a basis for terminating an investigation. The interviews with the 2 Investigators (facility/agency) indicated that the investigation would continue until its conclusion regardless of whether the staff resigned or the inmate released.

Subsection (l)

Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-8:D(3)]) requires when a complaint is investigated by the Pennsylvania State Police or other outside law enforcement agency, the facility Security Office shall be responsible for the following: a. ensure follow-up communication with the investigating agency for updates to the investigative process; b. request a copy of the investigative information to be included in the Department Investigative file; and c. request notification of the outcome of the investigation in order to notify the inmate. While onsite the Auditor reviewed 7 investigation files and noted that emails were utilized to maintain communication between agencies.

An interview with the Superintendent indicated that the State Police barracks has a Corporal that maintains communication with the SCI-Frackville security office for investigations. An interview with the PREA coordinator confirmed that the security office is responsible for to contact the Pennsylvania State Police liaison and there are 2 troopers tied to the institution. An interview with the PREA Compliance Manager verified that if the state police investigate or if OSII investigates, SCI-Frackville will receive an email of where they are in their investigation. The interviews with the 2 Investigators (facility/agency) reported that contact with the Pennsylvania State Police is initiated within 24 hours.

Corrective Action: None

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 5 (PREA Procedures Manual) 9 pages 3. Documentation <ol style="list-style-type: none"> a. Four Investigation files from the Month of August 3. Interviews with the following: <ol style="list-style-type: none"> a. Investigative Staff <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 5 (PREA Procedures Manual [page 5-2: A (9)]) requires in an 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. While onsite, the Auditor examined a random sample of 4 investigations from the month of August and noted that the Investigative summaries were based on a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The interviews with the 2 Investigators (facility/agency) indicated they utilized the statements from the alleged victim, alleged abuser, witnesses, and examined evidence to reach a conclusion and make recommendations.</p> <p>Corrective Action: None</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 1 (PREA Procedures Manual) b. ADM 008, Section 5 (PREA Procedures Manual) 9 pages c. ADM 008, Section 8 (PREA Procedures Manual) 2 pages 3. Documents <ol style="list-style-type: none"> a. Attachment 8-A, PREA Investigation Inmate Notification form 4. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent b. Investigative Staff c. Inmates Who Reported Sexual Abuse <p>Findings (by subsection):</p> <p>Subsection (a) ADM 008, Section 5 (PREA Procedures Manual [page 5-6: D (1) (k)]) requires that the PREA Compliance Manager shall inform the alleged victim(s) as to whether the investigation is found to be substantiated, unsubstantiated, or unfounded. All notification shall be made and documented. During the Pre-audit phase, SCI-Frackville reported 50 criminal and/or administrative investigations of sexual abuse were completed in the past 12 months. All 50 were notified, verbally or in writing of the results of the investigation. The Auditor reviewed 5 out of the 50 random samples of the inmate notification forms to determine compliance with this subsection. An interview with the Superintendent verified that it was the PREA Compliance Manager that informed the inmates of the investigation outcome. The interviews with the 2 Investigative (facility/agency) staff indicate that the PREA Compliance Manager is responsible to make notification to the inmate and to have the inmate acknowledge the notification by signing Attachment 8-A, PREA Investigation Inmate Notification form. Interviews with the 12 Inmates Who Reported Sexual Abuse indicated that if they were given an official notification, they didn't know about it. They do admit to having the PREA Compliance Manager making contact with them to talk about it.</p> <p>Subsection (b) ADM 008, Section 8 (PREA Procedures Manual [page 8-1:A(2)]) requires if another agency conducts the investigation, the PREA Compliance Manager shall request the relevant information from the investigative agency in order to inform the inmates within 10 business days of receipt of this information. During the Pre-audit phase, SCI-Frackville reported zero investigations of alleged inmate sexual abuse were completed by an outside agency in the past 12 months. The Auditor reviewed 5 out of the 50 random samples of the inmate notification forms and noted that only one allegation was substantiated and it was for sexual harassment (verbal).</p>

Subsection (c)

ADM 008, Section 8 (PREA Procedures Manual [page 8-1:A(3)]) requires following an inmate's allegations that a staff member has committed sexual abuse against the inmate, the PREA Compliance Manager shall subsequently inform the inmates of the following; 1) the staff member is no longer posted within the inmate's unit; 2) the staff member is no longer employed at the facility; 3) the Department learns that the staff member has been criminally charged related to sexual abuse within the facility; 4) the Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility. The Auditor examined a random sample of 4 PREA Investigation Inmate Notification forms out of 50 and noted that under "Section 3. Staffing Update," There are boxes to indicate whether the staff member transferred to another post/facility, temporarily restricted from this facility, permanently restricted from this facility, no longer employed by DOC, or other. Of the 4 PREA Investigation Inmate Notification forms, 2 of the forms indicate that the inmates refused to sign acknowledging the investigation results. The Interviews with the 12 Inmates who Reported Sexual Abuse indicated they were aware of the notification form but not specifically the information on the form. Some stated they refused to sign the form because they did not agree with the conclusion.

Subsection (d)

ADM 008, Section 8 (PREA Procedures Manual [page 8-1: A (4)]) requires that following an inmate's allegation that he/she has been sexually abused by another inmates, the PREA Compliance Manager shall subsequently inform the alleged victim whenever 1) the Department learns that the alleged abuser has been criminally charged related to sexual abuse within the facility or 2) the Department learns that the abuser has been convicted on a charge related to sexual abuse within the facility. The Auditor examined a random sample of 5 PREA Investigation Inmate Notification forms out of 50 and observed that all were signed by the inmate acknowledging the investigation results. The interviews with the 12 Inmates who Reported Sexual Abuse indicated they were aware of the notification form but not specifically the information on the form.

Subsection (e)

ADM 008, Section 8 (PREA Procedures Manual [page 8-1:B(1)and (2)]) requires the PREA Compliance Manager shall document all notifications of the PREA Investigation – Inmate Notification Form which shall be placed in the appropriate investigation file maintained in the facility Security Office. All notifications must occur, even in instances wherever an inmate has been transferred to another facility within the department. During the Pre-audit phase SCI-Frackville reported 50 notifications to inmates were provided under this standard and documented. The Auditor examined a random sample of 5 PREA Investigation Inmate Notification forms out of 50 and observed that they were signed by the inmate acknowledging the investigation results.

Corrective Action: None

115.76	Disciplinary sanctions for staff
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 7 (PREA Procedures Manual) 3 pages b. 4.1.1., Human Resources and Labor Relations <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 7 (PREA Procedures Manual [page 7-1:A(1)]) requires any employee who violates the Department’s zero tolerance policy by engaging in, failing to report, or knowing condoning sexual abuse or sexual harassment of an inmate shall be subjected to appropriate disciplinary or administrative action up to and including termination. During the Pre-audit phase, SCI-Frackville responded in the affirmative that staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. At the time of this audit, no SCI-Frackville staff has been subject to disciplinary or administrative action up to and including termination for violating this policy.</p> <p>Subsection (b) Policy 4.1.1., Human Resources and Labor Relations (Section 7(F) (10)) requires that in regards to inmate sexual abuse by a staff member, termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. During the Pre-audit phase, SCI-Frackville reported that zero staff in the past 12 months has violated agency sexual abuse or sexual harassment policies.</p> <p>Subsection (c) Policy 4.1.1., Human Resources and Labor Relations (Section 7(F) (11)) requires 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. During the Pre-audit phase, SCI-Frackville reported that zero staff from the facility has been disciplined, short of termination for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse). The Auditor reviewed investigative files and noted there was one sexual harassment allegation that was substantiated however, it was inmate vs. inmate, not staff related.</p> <p>Subsection (d) Policy ADM 008, Section 7 (PREA Procedures Manual [page 7-1:A(2)]) requires 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</p>	

relevant licensing bodies. During the Pre-audit phase, SCI-Frackville reported that zero staff in the past 12 months from the facility has been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies. The Auditor reviewed investigative files and noted there was one sexual harassment allegation that was substantiated however, it was inmate vs. inmate, not staff related.

Corrective Action: None

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 7 (PREA Procedures Manual) 3 pages 3. Interviews <ol style="list-style-type: none"> a. Superintendent <p>Findings (by subsection):</p> <p>Subsection (a) ADM 008, Section 7 (PREA Procedures Manual [page 7-1:B(3)]) requires any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates, and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. During the Pre-audit phase, SCI-Frackville reported zero contractors or volunteers in the past 12 months were reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.</p> <p>Subsection (b) Policy ADM 008, Section 7 (PREA Procedures Manual [page 7-1:B(2)]) requires if a contractor or volunteer violates this procedure, other than by engaging in sexual abuse, the facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with inmates. Also ADM 008, Section 7 (PREA Procedures Manual [page 7-3: B (1)]) requires 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. An interview with the Superintendent confirmed that any violation of the agency sexual abuse or sexual harassment policy by a contractor or volunteer would prompt the facility to cease the relationship between a contractor or volunteer from all inmates.</p> <p>Corrective Action: None</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 7 (PREA Procedures Manual) 3 pages 3. Documents <ol style="list-style-type: none"> a. Attachment 1-A, Inmate Misconducts/Rule Violations b. Inmate investigations 3. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent b. Medical and Mental Health Staff <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 7 (PREA Procedures Manual [page7-1:C(1)]) requires 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 in a criminal finding of guilt for inmate on inmate sexual abuse. During the Pre-audit phase, SCI-Frackville reported zero administrative or criminal findings of inmate on inmate sexual abuse in the past 12 months. The Auditor reviewed 72 sample investigations and noted the majority of the allegations, 54 out of 72 investigations were allegations against staff. The results were either unfounded or unsubstantiated.</p> <p>Subsection (b) Policy ADM 008, Section 7 (PREA Procedures Manual [page7-1:C(2)]) requires sanctions shall be commensurate with the nature of circumstances of the abuse committed, the inmates' s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The Auditor reviewed 72 sample investigations and noted the majority of the allegations, 54 out of 72 investigations were allegations against staff. The results were either unfounded or unsubstantiated. An interview with the Superintendent verified that any disciplinary sanctions imposed on an inmate following an administrative or criminal finding that he/she engaged in inmate-on- inmate sexual abuse would be proportionate to the nature of circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.</p> <p>Subsection (c) Policy ADM 008, Section 7 (PREA Procedures Manual [page7-1:C(3)]) requires 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. The Auditor reviewed 72 sample investigations and noted the majority of the allegations, 54 out of 72 investigations were allegations against staff. The results were either unfounded or unsubstantiated. An interview with the Superintendent verified that an inmate with a serious</p>

mental illness will meet face to face with Psychological services if any there are any contraindications to segregated housing or if a segregation reduction is necessary.

Subsection (d)

Policy ADM 008, Section 7 (PREA Procedures Manual [page7-1: C (4)]) requires when an inmate is found guilty of 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. The interviews with the 2 Medical and Mental Health Staff confirm SCI-Frackville offers therapy, counseling, or other intervention services designed to address and correct the underlying reasons or motivations of sexual abuse for the offender. It is voluntary, not a condition of access to programming or other benefits.

Subsection (e)

Policy ADM 008, Section 7 (PREA Procedures Manual [page7-2: C (5)]) ensures 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. During the Pre-audit phase, SCI-Frackville reported zero substantiated occurrences of staff on inmate sexual abuse during this rating period. The Auditor reviewed 72 sexual abuse or sexual harassment investigations from August 2016 through September 2017 and noted the only substantiated investigation was a sexual harassment between two inmates.

Subsection (f)

Policy ADM 008, Section 7 (PREA Procedures Manual [page7-2:C(6)]) ensures 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. While onsite informal interviews between the Auditor and the Superintendent indicated that no inmate has been disciplined for falsely reporting an allegation of sexual abuse or sexual harassment made in good faith.

Subsection (g)

Policy ADM 008, Section 7 (PREA Procedures Manual [page7-2: C (7)]) requires that the Department prohibits all sexual activity between inmates and may discipline inmates for such activity. The Department shall not deem such activity to constitute sexual abuse if the Department, through the investigative process, determines that the activity is not coerced or forced. The Auditor reviewed the Inmate Misconduct/Rule Violations and noted 6 different violations of a sexual nature; rape, involuntary deviate sexual intercourse, engaging in sexual acts with others or sodomy, sexual Harassment, indecent exposure, kissing or inappropriate physical contact.

Corrective Action: None

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages 3. Documents <ol style="list-style-type: none"> a. Mental Health Informed Consent form b. Mental Health Referral forms 3. Interviews with the following: <ol style="list-style-type: none"> a. Inmates Who Disclose Sexual Victimization During Risk Screening b. Staff Responsible for Risk Screening c. Medical and Mental Health Staff <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10: D (2)]) requires 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. During the Pre-audit phase SCI-Frackville reported 100 percent of inmates who disclosed prior victimization during screening, were offered a follow up meeting with a medical or mental health provider in the past 12 months. During the onsite review the Auditor reviewed documentation of a reported sexual abuse incident that occurred 13 years prior to the inmate disclosure. Within 24 hours, the inmate who reported met with mental health staff and signed an informed consent document. A Suicide Risk checklist was completed, a post sexual assault interview was conducted, services made available to the inmate at no cost (mental health evaluation and rape crisis services) request form was completed, and a mental health contact note in the inmate’s file. An interview with an Inmate Who Disclose Sexual Victimization during Risk Screening indicated that he reported an incident of sexual abuse that occurred three years prior, he was referred to mental health and spoke with a counselor. An interview with the Staff Responsible for Risk Screening verified that Mental Health services would conduct a follow up meeting with the inmate and provide counseling services as needed.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10: D (3)]) requires if the screening pursuant to PREA standard 115.41 indicates that a prison or jail inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening or sooner, if clinically indicated. In addition, when information becomes available relating to perpetration of inmate on inmate sexual abuse history, a mental health evaluation shall be conducted on these</p>

abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. During the Pre-audit phase SCI-Frackville reported 100 percent of inmates who have previously perpetrated sexual abuse, as indicated during screening who were offered a follow up meeting with a mental health provider in the past 12 months. While onsite the Auditor reviewed 2 random samples of inmate documentation who were offered a follow-up meeting with a medical or mental health practitioner. The Mental Health Informed Consent form and the Mental Health Referral forms were present for both inmates. The interviews with the Staff Responsible for Risk Screening confirmed that a follow up meeting would normally occur within a week by a counselor.

Subsection (d)

Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10: D (4)]) Requires any information related to sexual victimization or abusiveness occurring in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans, security and management decisions, including housing, bed placement, work, education, and program assignments, or otherwise required by Federal, State, or local law. While onsite the Auditor observed SCI-Frackville utilizes the ICAR to track offender details and movement and any inmate with an ROV or ROA designation is populated as a "Housing concern" statement. This allows designated staff to consult a tracking database to determine the specifics of the housing concern.

Subsection (e)

Policy ADM 008, Section 2 (PREA Procedures Manual [page2-10:D(5)]) requires medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institution setting, unless the inmate is under the age of 18. If the inmate refuses to sign, it shall be noted and signed by a witness and maintained in the medical record. The Auditor reviewed a sample of 2 Mental Health Informed Consent forms and Mental Health Referral forms to verify practice follows policy. The Interviews with 2 Medical and Mental Health Staff confirmed their adherence to this policy and practice.

Corrective Action: None

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 4 (PREA Procedures Manual) 8 pages 3. Documents <ol style="list-style-type: none"> a. Medical Reports b. Mental Health Referral form c. Emergency Room Transfer form d. Post Sexual Assault Interview form e. Mental Health Informed Consent Document f. Mental Health Services and/ or Rape Crisis Services form g. Suicide Risk Indicators checklist 4. Interviews with the following: <ol style="list-style-type: none"> a. Medical and Mental Health Staff b. Inmates Who Reported Sexual Abuse c. Staff First Responders <p>Findings (by subsection):</p> <p>Subsection (a)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2;D(a)]) requires alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope with which are determined by medical and mental health practitioners according to their professional judgment. The Auditor reviewed 4 investigative files of inmates selected by reporting method. 2 were through the grievance and 2 were verbal reports to staff. The documentation was of sexual abuse allegations which precipitated a medical transport to the hospital for an evaluation. Forms specific to medical and mental health staff (i.e. Medical Reports, Mental Health Referral, Emergency Room Transfer, Post Sexual Assault Interview, Mental Health Informed Consent, Mental Health Services and/ or Rape Crisis Services form, and Suicide Risk Indicators checklist) was utilized to track and document the alleged inmate victim's process for allegations of sexual abuse. The Interviews with 2 Medical and Mental Health Staff confirmed that victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services, as quickly as possible, within 96 hours they'll go out to the hospital for SAFE/SANE. The interviews with the 12 Inmates Who Reported Sexual Abuse verified that they were seen by medical and then by mental health staff. Some inmates indicated they still talk to Mental Health staff.</p> <p>Subsection (b)</p> <p>Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2;D(b)]) requires 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</p>

and shall immediately notify the appropriate medical and mental health practitioners. The interviews with the 4 Staff First Responders all reported they would separate and isolate the alleged victim from the alleged abuser, contact the shift commander, tell both the victim and abuser not to wash, urinate, defecate, eat or drink, notify medical, secure the immediate area of the crime scene, protect any evidence and keep the victim safe. The Auditor noted that some of the staff did consult their First Responder pocket guides and they were all able to articulate the correct responses.

Subsection (c)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2; D (d)]) requires all facilities shall provide alleged victims with medical and mental health services consistent with community level of care. The Interviews with the 12 Inmates Who Reported Sexual Abuse indicated that a majority of them don't remember about the emergency contraception but they do remember the sexually transmitted infection prophylaxis. One inmate stated he asked for an STI directly. The interviews with the 2 Medical and Mental Health Staff confirmed that inmates are offered information about emergency contraception and sexually transmitted infection prophylaxis.

Subsection (d)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2;D(c)]) requires treatment services shall be provide 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. The auditor examined the Medical Services and Mental Health Services and/ or Rape Crisis Services form that contains language that states "Medical treatment and crisis intervention services will be provide without financial cost to you."

Corrective Action: None

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 2 (PREA Procedures Manual) 19 pages b. ADM 008, Section 4 (PREA Procedures Manual) 8 pages 3. Documents <ol style="list-style-type: none"> a. Mental Health Services and/ or Rape Crisis Services form b. DC-121, Incident Report c. DC-457, Medical Incident/ Injury Report d. PA DOC Public website 4. Interviews with the following: <ol style="list-style-type: none"> a. Medical and Mental Health Staff b. Inmates Who Reported Sexual Abuse <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 4 (PREA Procedures Manual [page4-7: F (1)]) requires 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. The Auditor reviewed a sample documentation of an alleged sexual abuse that occurred 35 years prior at another facility, selected specifically for its length of time. The forms reviewed were Mental Health Services and/ or Rape Crisis Services form, Incident Report (DC-121), and Medical Incident/ Injury Report (DC-475). The Alleged victim reported during his rescreening that he was sexually abused many years prior and was requesting access to a mental health evaluation and rape crisis services.</p> <p>Subsection (b) Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7:F(3)]) requires the evaluation and treatment of alleged victims shall include, as appropriate, follow up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, to other facilities, or their release from custody. The Auditor examined 4 medical files based on how they were reported, 2 were by grievance and 2 were verbal reports. The files confirmed that referrals and follow up services were conducted. The interviews with the 2 Medical and Mental Health Staff verified that it's their practice to ensure that follow up continues up to 90 days with inmates about mental health needs. The inmates are assess for any physical injury and are treated by medical. Medical staff will preserve evidence if they can, but the inmates are sent to a SAFE/SANE immediately if it's within the 96 hours' time frame. If it's past 96 hours, they'll handle on site with mental health. The interviews with the 12 Inmates Who Reported Sexual Abuse reported that they received medical and mental health care. A majority stated they continued with counseling services from mental health.</p>

Subsection (c)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7: F (4)]) requires all facilities shall provide alleged victims with medical and mental health services consistent with the community level of care. The Auditor examined 4 medical files based on how they were reported, 2 were by grievance and 2 were verbal reports. The files confirmed that referrals and follow up services were conducted as the files contained Mental Health Informed Consent forms, Mental Health Referral Forms, and access to emergency medical treatment and crisis intervention services forms. The Interviews with the 2 Medical and Mental Health staff confirm that they provide service above the community level of care.

Subsection (d)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-8: F (5)]) requires that alleged inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. During the Pre-audit phase SCI-Frackville reported they do not house adult female inmates. The Auditor reviewed the PA DOC public website and confirmed that SCI-Frackville has an adult male inmate population. No female inmates were interviewed for this subsection.

Subsection (e)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-5: F (2) (g) (2)]) requires that if pregnancy results from the sexual abuse, the alleged victims shall receive timely and comprehensive information about and timely access to all awful pregnancy-related medical services. During the Pre-audit phase SCI-Frackville reported they do not house adult female inmates. The Auditor reviewed the PA DOC public website and confirmed that SCI-Frackville has an adult male inmate population. No female inmates were interviewed for this subsection.

Subsection (f)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-7: F (7)]) requires alleged inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infectious as medically appropriate. The Auditor reviewed inmate medical progress notes, selected for having been tested for STI. The inmate had a sexually transmitted infections test after allegations of sexual abuse. The interviews with the 12 inmates Who Reported Sexual Abuse corroborate that the sexually transmitted infections testing is available to them. Of the 12 Inmates Who Reported Sexual Abuse, 10 did not accept the test but 2 did accept the test for sexually transmitted infections.

Subsection (g)

Policy ADM 008, Section 4 (PREA Procedures Manual [page 4-2:D(1)(c)]) ensures that 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. The interviews with the 12 Inmates Who Reported Sexual Abuse indicated that 11 inmates were not charged, but one inmate was charged five dollars for an HIV and AIDS testing as the incident he cited was to have occurred 17 years prior.

Subsection (h)

Policy ADM 008, Section 2 (PREA Procedures Manual [page 2-13:D(3)]) ensures when information becomes available relating to perpetration of inmate on inmate sexual abuse history, a mental health evaluation shall be conducted on these abusers within 60 days of

learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. During the Pre-audit phase, SCI-Frackville that inmate on inmate abusers were offered mental health evaluations but all refused. The interviews with the 2 Medical and Mental Health Staff verified that the PREA assessment tool will indicate when the inmate is at risk of abusing. Mental Health staff will meet with the inmate as soon as they can schedule it with a counselor, usually within days. There is also an access afterhours for any inmates at risk.

Corrective Action: None

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. State Correctional Institution SCI-Frackville Pre-Audit Questionnaire (PAQ) 2. Policy <ol style="list-style-type: none"> a. ADM 008, Section 6 (PREA Procedures Manual) 6 pages 3. Documents <ol style="list-style-type: none"> a. Attachment 6-A, PREA Sexual Abuse Incident Review, 4 pages b. Attachment 6-B, PREA Sexual Abuse Incident Review Plan of Action, 2 pages c. 2 complete SAIR packets 3. Interviews with the following: <ol style="list-style-type: none"> a. Superintendent b. PREA Compliance Manager c. Incident Review Team <p>Findings (by subsection):</p> <p>Subsection (a) Policy ADM 008, Section 6 (PREA Procedures Manual [page 6-1:A(1)]) requires 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 OSII. No review will be conducted if the allegation has been determined to be unfounded. During the Pre-audit phase, SCI-Frackville reported 32 criminal and/or administrative investigations of alleged sexual abuse were completed at the facility, excluding only unfounded incidents in the past 12 months. While onsite the Auditor reviewed 2 SAIR reports selected as the most recent SAIR conducted at SCI-Frackville.</p> <p>Subsection (b) Policy ADM 008, Section 6 (PREA Procedures Manual [page 6-1: A (1)]) requires the review shall occur within 15 working days of the receipt of the notification from OSII that he investigation was deemed satisfactory. During the Pre-audit phase, SCI-Frackville reported 32 criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a Sexual Abuse Incident Review. The Auditor examined 2 SAIR reports and verified them to be timely. This shorter timeline of 15 working days for an SAIR exceeds the standard in this subsection which is 30 days at the conclusion of a criminal/administrative sexual abuse investigation.</p> <p>Subsection (c) Policy ADM 008, Section 6 (PREA Procedures Manual [page 6-1: B (1)]) requires the PREA Compliance Manager to chair the SAIR Committee. The PREA Compliance Manager 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 Deputy Superintendent for Centralized Services, Deputy Superintendent for Facilities</p>

Management, Licensed Psychology Manager, Corrections Health Care Administrator, Security Office representative and the Major of Unit Management or Major of the Guard. The Auditor reviewed 2 SAIR reports and noted that on Attachment 6-A [page 1 of 4], the positions and names of staff participating in the PREA SAIR are listed. An interview with the Superintendent confirmed that the SAIR met regularly and does include upper-level management officials as well as line supervisors, investigators, medical and mental health staff.

Subsection (d)

Policy ADM 008, Section 6 (PREA Procedures Manual [page 6-1: B (3)]) Identifies the six required considerations to be in compliance with this subsection. The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager. An interview with the Superintendent indicated that their goal is predication. What was the incident reporting and findings. Substantiated housing assignment is there a power difference, do they have a vulnerable character, and are they correctly coded? Can they be managed in a single cell or double cell? SCI-Frackville looks at their medical concerns, security issues, how staff responded to the incident, is there need for improvement and also to ensure that retaliation monitoring occurs. An interview with the PREA Compliance Manager indicated that each department section identifies what they will do for future allegations. Central office will review the SAIR, its two tiered policing. Once the SAIR goes to central office, it will be returned to SCI-Frackville with any recommendations for improvement action requirements. The inmates will be monitored long after the SAIR has been completed. An interview with the Incident Review Team member indicated that SAIR is conducted for every allegation of sexual abuse that has been substantiated or unsubstantiated. SAIR considers race and gender, the location, staff, and camera (video).

Subsection (e)

Policy ADM 008, Section 6 (PREA Procedures Manual [page 6-4: B (3)]) requires that the facility implement the recommendations for improvement or shall document its reasons for not doing so. During the on-site review the PREA Compliance Manager reported that when the SAIR comes back after central office completes their review, it may sometimes come back with a recommended list of changes. The Auditor examined 2 PREA SAIR Plan of Action forms (Attachment 6-B) noting deficiencies and a plan of action for each deficiency.

Corrective Action: None

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
	Evidence Reviewed (documents, interviews, site review):
	Findings (by subsection):
	<p>Subsection (h) The auditor had access to and observed all areas of the audited facility. The auditor and assistant auditor were given full access to all areas of SCI-Frackville and out buildings.</p> <p>Subsection (i) The auditor was permitted to request and receive copies of any relevant documents (including electronically stored information). The auditor received all documents requested during the Pre-audit phase, the on-site review phase, to include after departure from the facility.</p> <p>Subsection (m) The auditor was permitted to conduct private interviews with inmates. The auditor conducted private interviews with all inmates during the formal interview phase. During the on-site review of the physical plant informal interviews were conducted with inmates throughout the facility during the tour.</p> <p>Subsection (n) Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. Audit notices were posted exactly six weeks prior to auditor arrival. PREA Compliance Manager provided photos of the posted audit notices on the date they were due. PREA Compliance Manager also ensured the notices were on bright paper as to stand out from the regular posted information on bulletin boards and hallway walls.</p> <p>Corrective Action: None</p>

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".)	yes

115.13 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video	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.)	na

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

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

115.21 (d)	Evidence protocol and forensic medical examinations	
	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?	no

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

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

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

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

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

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

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

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

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

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	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