

PREA Facility Audit Report: Final

Name of Facility: SCI Rockview

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/27/2017

| Auditor Certification | |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input checked="" type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input checked="" type="checkbox"/> |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input checked="" type="checkbox"/> |
| Auditor Full Name as Signed: Paul A. Lockwood | Date of Signature: 04/27/2017 |

| AUDITOR INFORMATION | |
|-------------------------------------|-----------------------------|
| Auditor name: | Lockwood, Paul |
| Address: | |
| Email: | Paul.Lockwood@wisconsin.gov |
| Telephone number: | |
| Start Date of On-Site Audit: | 02/27/2017 |
| End Date of On-Site Audit: | 02/27/2017 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | SCI Rockview |
| Facility physical address: | 1 Rockview Place, Bellefonte, Pennsylvania - 16823 |
| Facility Phone | |
| 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 type="radio"/> Prison <input type="radio"/> Jail |

| Primary Contact | | | |
|-----------------------|-------------------|--------------------------|-------------------------|
| Name: | Timothy Miller | Title: | PREA Compliance Manager |
| Email Address: | timomiller@pa.gov | Telephone Number: | 814-355-4874 Ext 240 |

| Warden/Superintendent | | | |
|-----------------------|----------------|--------------------------|----------------|
| Name: | Mark C. Garman | Title: | Superintendent |
| Email Address: | mgarman@pa.gov | Telephone Number: | 814-355-4874 |

| Facility PREA Compliance Manager | | | |
|----------------------------------|------------|-----------------------|-------------------|
| Name: | Tim Miller | Email Address: | timomiller@pa.gov |

| Facility Health Service Administrator | | | |
|---------------------------------------|---------------------|--------------------------|---------------------------------------|
| Name: | William T. Williams | Title: | Corrections Health Care Administrator |
| Email Address: | wiwilliams@pa.gov | Telephone Number: | 814-355-4874 |

| Facility Characteristics | | | |
|--|---------------|---------------------|--|
| Designed facility capacity: | 2283 | | |
| Current population of facility: | 2354 | | |
| Age Range | Adults: 20-79 | Youthful Residents: | |
| Facility security level/inmate custody levels: | 2,3,4, and 5 | | |
| Number of staff currently employed at the facility who may have contact with inmates: | 656 | | |

| 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.

A Prison Rape Elimination Act Audit of the State Correctional Institution at Rockview was conducted from February 27 to February 28, 2017. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. PREA Auditor Paula Stoudt assisted with the onsite audit and interviews.

On the morning of February 27, the auditors met with the following persons: Superintendent- Mark Garman, his two Deputy Superintendents, CCPM/PREA Compliance Manager- Tim Miller, his assistant, PREA Coordinator David Radziewicz and PREA Investigative Lieutenant Selfridge. Introductions were made and an outline of the next two days agenda were discussed. The auditor would like to thank Superintendent Garman and his staff for their hospitality and willingness to assist the auditors through the auditing process.

The auditor would also like to recognize PREA Coordinator David Radziewicz and PREA Compliance Timothy Miller for all that they have done to prepare and maintain the facility, staff and inmates for not only the audit but for the in place PREA program at SCI Rockview.

After this meeting, the auditors were given a tour of all areas of the facility, including; all general population housing units, administrative segregation, forestry camp, forestry warehouse, forestry garage, water treatment plant, saw mill, storage buildings, nursery, CI Warehouse, Old Warehouse, Commissary, Boiler house, Chapel, kitchen, inmate dining hall, staff dining hall, educational/vocational buildings, intake, recreation, control rooms, and medical.

A total of 36 staff were interviewed with at least one staff member interviewed from each interview category, with the exception of the interviews related to educational staff who work with youthful inmates, line staff who supervise youthful inmates, and non-medical staff involved in cross-gender searches (these interview types were not applicable to this facility).

Staff interviews were conducted on all three shifts.

A total of 24 inmates were interviewed with at least one inmate interviewed from each interview category, with the exception of the interviews related to youthful inmates and inmates placed in segregated housing for risk of sexual victimization (these interview types were not applicable to this facility).

Telephone interviews were conducted with the SAFE/SANE staff at Mount Nittany Medical Center and the contract Limited English Proficiency Interpreter Service.

Throughout the pre-audit and onsite audit, productive communications was established and maintained with SCI Rockview staff, specifically PREA compliance Manager Timothy Miller.

During the on-site visit, the auditor utilized a combination of on-site observations, informal and formal interviews with both staff and inmates as well a review of related documentation regarding PREA. Prior to the on-site visit, the facility completed the Pre-Audit Questionnaire (PAQ). This information was made available to the auditor through the On-Line Audit System (OAS). The auditor then reviewed the contents of the PAQ. The auditor received correspondence from eight inmates at SCI Rockview which was reviewed. It should be noted that five of the eight inmates sending correspondence were interviewed. Two inmates were no longer at SCI Rockview and one requested not to be interviewed. When the audit was completed, the auditor conducted an exit briefing on March 2, 2015. The auditor

gave an overview of the audit and thanked the staff for all their hard work and commitment to the Prison Rape Elimination Act.

AUDIT FINDINGS

Facility Characteristics:

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

Prior to World War I, Warden John Francies' exposure of the overcrowded conditions and the unhealthy environment at Western Penitentiary led to legislation for the development of a rural penitentiary. A special committee surveyed 33 sites before choosing 4,300 acres in Centre County, which were purchased at \$50 an acre. Additional acreage was obtained from adjacent state forestland.

Located six miles south of Bellefonte and six miles northeast of State College; this new prison had been originally conceived in 1878, when Huntingdon had been decided upon but the enabling legislation was not passed until 1911. The State Correctional Institution at Rockview was originally intended to be a maximum-security prison to replace Western Penitentiary. The expense was not to exceed \$1,250,000, and \$300,000 was provided for planning purposes.

Rockview is also the site of the administration of the death penalty, again reintroduced to Pennsylvania in 1978. The deputy warden building was completed in December 1914, and the first execution took place on February 23, 1915. The Commonwealth has executed 350 persons by means of electrocution.

On November 29, 1990, Governor Robert P. Casey signed into law Senate Bill 637 that replaced the electric chair with lethal injection as the state's method of executing convicted killers. The electric chair was removed and sent to the Pennsylvania Museum. The old institution hospital building has been renovated into an execution complex complete with the equipment necessary for lethal injection, rooms to accommodate various department and institution staff, news media witnesses, victims witness and other authorized individuals.

Number of Acres Inside Perimeter: 35.042 Number of Acres Outside Perimeter: 4,268.88 Number of Operational Structures (inside and outside of perimeter): 103 Number of Housing Units: 14 Housing units consist of both cells and dormitory-style housing. Special Features: Secure Residential Treatment Unit

Inmate Information:

Inmate Population: 2,354 (as of February 27, 2017) Inmate Length of Stay: 5-10 years.

Total Number of Full-Time Employees: 673

Academic and Vocational Education:

• Academic Education through GED level • Vocational Education: HVAC, Barber School, Business Education, Electricity/Residential Wiring, Masonry

All vocational classes including welding offer industry-recognized certifications specific to the trade skills taught in the program.

Inmate Programs:

Family/Relationship Self • Inside Out Dad's Parenting Program Sex Offenders • Sex Offender Moderate-High Intensity • Sex Offender Low Intensity • Sex Offender Booster Program • Sex Offender SNU Groups • Peer Tutor Groups

Re-Entry • Pre-Vocational Skills Class • MoneySmart Program

Alcohol and Other Drug (AOD) • Therapeutic Community • Outpatient Therapy Group • Dual Diagnosis • AA/NA/SOS Support Meetings

Offense Related • Thinking for a Change • Act 143 Victim Awareness • Violence Prevention • Batterer's Intervention

Mental Health Programs • MH Education • MH Peer Group • MH Community Re-Entry Group • Dual Diagnosis Group • MH SOP

Correctional Industries: The Pennsylvania Correctional Industries Wood Furniture Factory began operation at SCI Rockview in February 2008. It services many Pennsylvania state agencies, non-profit agencies and Pennsylvania subsidized agencies. The Pennsylvania Correctional Industries Freight Division at SCI Rockview began operation in October 2005. It moves PCI produced items and other state agencies' items to locations across the state and is also used to move emergency goods during PEMA events.

With the introduction of the Prison Rape Elimination Act in 2003 and the Standards established in 2012 by the National Prison Rape Elimination Commission, SCI Rockview has taken great steps to support the preventing, detecting and responding to sexual abuse and sexual harassment within the facility. This is evident in the housing unit physical plant adaptations that have taken place, camera additions and training programs for staff, contract volunteers and inmates.

Site lines of areas frequented by inmates are for the most part open, uncluttered and accessible. Those areas identified as vulnerable have been identified and supplemented with camera coverage. Officer stations are positioned in then living units to allow for clear lines of site and generally are on a raised platform to allow for maximum visibility.

Inmate showers have been reconfigured as necessary to allow for privacy to the extent that proper security practices can be maintained.

| AUDIT FINDINGS | |
|--|----|
| Summary of Audit Findings: | |
| The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance. | |
| Number of standards exceeded: | 0 |
| Number of standards met: | 39 |
| Number of standards not met: | 0 |
| Number of Standards Not Applicable: (The total number of standards that were audited at the agency level) | 6 |
| Standards Exceeded - 0 Standards Met - 41 Standards not met - 0 Standards not Applicable - 2 | |

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>115.11</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, interviews with the facility Superintendent and Deputy Superintendents, the Department PREA Coordinator, the facility PREA Compliance Manager, Specialized staff, staff first responders, Supervisory staff, Medical and Psychological service providers, facility PREA screeners, Programming staff, Human Resources Staff and inmates housed at SCI-Rockview.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. The auditor observed appropriate signage, observed rounds being conducted, logs documenting said rounds (to include unannounced PREA rounds), operational cameras as well as numerous sites where cameras are being added throughout the facility and heard and observed cross gender staff presence announcements being conducted.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard, including mandating a zero tolerance toward all forms of sexual abuse and sexual harassment. The policy outlines the agency’s approach to preventing, detecting and responding to such conduct. The facility Staff has taken a heads on approach, being proactive and developing several key strategies to address compliance levels. These include weekly, monthly meetings involving all keys disciplines evaluating training, monitoring and reporting as well as monitoring retaliation and Transgender housing issues. Through staff awareness, continued supervisory rounds and communication, camera usage and staff presence, SCI Rockview is able to detect events of sexual abuse and sexual harassment. Reporting procedures are sound and in place and inmate screenings and orientation conducted at several points during the inmate’s stay at Rockview ensure a solid level of understanding. Staff and inmates alike are well versed in the process and means of reporting sexual abuse and sexual harassment as well as retaliation. Through interviews with staff, evidence is present that staff know how to take a report and respond appropriately any occurrences of sexual abuse, sexual harassment or retaliation. Inmate interviews conducted indicate that the majority of inmates know where the PREA signage is located and how to reports incidences of sexual abuse of harassment. Inmate indicated that they were aware of disciplinary sanctions involved in prohibited behaviors and could define those prohibited behaviors.</p> <p>During an interview with the PREA Compliance Manager, he indicated that he did have sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards. The PREA Compliance Manager reports to the Deputy Superintendent of Centralized Services.</p> <p>COMPLIANCE DETERMINATION: Based on the evidence and observations during the facility tour to include; informal interviews of both staff and inmates, the presence of PREA signage as well as review of the facility camera systems and monitoring procedures, documentation review and formal interviews conducted with staff and inmates, it was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.12 | Contracting with other entities for the confinement of inmates |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
| | <p>This standard was audited on the AGENCY level. SCI-Rockview has no responsibility for this standard, separate from the agency’s responsibilities. There are no contracts that have been renewed or entered into since the last facility of the agency was audited on 08/21/15. There are three active MOUs with Montgomery County (2014), Cambria County (2015), and Chester County (2015) for the confinement of inmates. Page 7, Section 15 (A) states, “Pursuant to federal regulations promulgated under the authority the Prison Rape Elimination Act, 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.”</p> |

| | |
|---------------|---|
| 115.13 | Supervision and monitoring |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.13</p> <p>Compliance Evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, SCI-Rockview Staffing Plan, Facility Procedure Manual Section 15 (Correctional officer Staffing System), Perimeter Intrusion Detection System (PIDS) meeting minutes, SCI Rockview Inmate Population Reports, PREA Administrative Tour Documentation Form and the Camera Plan and camera list.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Interviews were conducted with the facility Superintendent and Deputy Superintendents, the Department PREA Coordinator, and the facility PREA Compliance Manager and Supervisory Staff. The staff interviewed was asked specifically about the following criteria found in DC ADM 008. SCI Rockview maintains appropriate staffing and documents when deviations occur. The staffing plan addresses the inmate population, physical plant, programming, daily schedules, and staffing review procedures.</p> <p>The auditor reviewed the video monitoring systems in each living unit as well as Food Service, recreation, education and industries buildings. The average inmate population at SCI-Rockview was 2381 and this is the population that interviews with management staff indicated the staff plan was predicated. Staffing plans were reviewed to determine if deviations were documented and they were, although no deviations occurred during that past 12 months. Management was asked if the staffing plan was reviewed at least once a year. They indicated it was and staffing plan reviews were produced to verify.</p> <p>Interviews with Intermediate and higher level staff indicated that unannounced PREA rounds were made and documented on all three shifts, logs were reviewed to verify. Management staff assigned to make Unannounced PREA rounds stated that while on rounds they looked specifically for vulnerable areas not properly covered by cameras and ensure unit staff were aware of their environment and making appropriate rounds, especially on third shift.</p> <p>COMPLIANCE DETERMINATION: Based on the evidence (Policy DC ADM 008, SCI-Rockview Staffing Plan, Facility Procedure Manual Section 15 (Correctional officer Staffing System), Perimeter Intrusion Detection System (PIDS) meeting minutes, SCI Rockview Inmate Population Reports, PREA Administrative Tour Documentation Form, the Camera Plan and camera list) and observations during the facility tour to include; informal interviews of both staff and inmates, review of the facility camera systems and monitoring procedures, documentation review and formal interviews conducted with staff and inmates, it was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.14</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, Human Resources Staff at SCI-Rockview. A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour questions were asked by the auditor regarding the placement of youthful offender (offenders described as being under the age of eighteen).</p> <p>Observations: SCI-Rockview does not house youthful offender. NO youthful offenders have been housed at SCI Rockview in the past 12 months. However, review of DC ADM 008 and interviews with the PREA Compliance Manger indicate that the facility have policy in place in the event youthful offenders were housed there. Youthful offenders would not be placed within sight, sound or physical contact with adult inmates. Policy also addresses large muscle exercise requirements and direct supervision requirements.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the informal interviews of staff from all three shifts and documentation review DC ADM 008 and the documentation regarding the placement of youthful inmate offender (offenders described as being under the age of eighteen). SCI Rockview does not house any youthful offenders, therefore it is determined that SCI Rockview meets this standard.</p> |

| | |
|--------|---|
| 115.15 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.15</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008 and 6.3.1, Facility Security Procedures Manual Section 30 – Searches and Memo regarding Gender Specific posts dates July 15, 2015. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, Human Resources Staff at SCI-Rockview.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour questions were asked by the auditor to line staff regarding whether the facility conducts cross-gender strip or cross-gender visual body cavity searches of inmates.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. The auditor conducted interviews with the facility Superintendent and Deputy Superintendents, the Department PREA Coordinator, and the facility PREA Compliance Manager and Supervisory Staff, line staff and Health Services staff. The staff interviewed was asked whether the facility conducts cross-gender strip or cross-gender visual body cavity searches of inmates. The staff indicate that cross gender strip searches are not conducted except under exigent circumstances and no cross gender strip searches have been conducted in the past 12 months. No cross gender body cavity searches have been conducted in the past 12 months. Interviews with health services staff indicate that these type of searches would only be conducted by medical staff.</p> <p>SCI-Rockview does not house female offenders so cross gender pat searches of female inmates do not occur.</p> <p>A review of training material and the Cross Gender Search Validation Form as well as interviews with the PREA Compliance Manager indicate that these types of searches, if conducted, would be documented.</p> <p>A varied cross section of inmates, to include transgender, gay and bi-sexual inmates were interviewed and asked if they were able to shower, change clothes, and perform bodily functions and without non-medical staff of the opposite gender viewing them. Most inmates stated that they were with the exception of staff conducting general rounds (incidental viewing).</p> <p>Staff and inmates were asked about opposite gender announcements regarding presence on the unit. All staff and the majority of inmates stated that this does occur. Inmate interviews specifically three transgender inmates were asked if they thought at any time that staff had conducted a search of their person for the sole purpose of determining their genital status. None of the inmates interviewed indicate that they thought this had occurred. Staff members interviewed were aware of the policy prohibiting such behavior. Staff members are training annually on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs with update training every other year. Training records were reviewed to corroborate this information.</p> |

COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the informal interviews of staff from all three shifts and documentation review of DC ADM 008 and 6.3.1, Facility Security Procedures Manual Section 30 – Searches , it has been verified that cross-gender strip or cross-gender visual body cavity searches of inmates does not occur except in exigent circumstances and/or by trained medical staff. Therefore it is determined that SCI Rockview meets this standard.

| | |
|---------------|---|
| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.16</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, DC ADM 006, Propio LLC. Language Service Contract, Language Services Associates (Sign Language contract). The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, Human Resources Staff, Health Services and Line Staff at SCI-Rockview.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour questions were asked by the auditor about procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. DC ADM 008 establishes a procedures for inmates with disabilities the opportunity to participate in all aspects of PREA, including the availability of language services (Spanish). It should be noted that the Propio Language Service was utilized to interview one inmate with Limited English proficiency. Other services offered are braille, written literature, video and sign language services. Interviews with inmates indicate that they are aware that these services exist and are available. SCI-Rockview does have the availability of bi-lingual staff members on first and second shift. When asked, the majority of inmates were aware that Agency policy prohibits the use inmate interpreters except in limited circumstances for the purpose of reporting incidences of sexual abuse or sexual harassment. There have been no cases of inmate interpreters being used in the past 12 months.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the informal interviews of staff from all three shifts and documentation review of DC ADM 008 DC ADM 006, Propio LLC. Language Service Contract, Language Services Associates (Sign Language contract). Formal interviews with the Superintendent and Deputy Superintendents, the Department PREA Coordinator, and the facility PREA Compliance Manager, Supervisory and Line staff, as well as inmates indicated that SCI Rockview had procedures in place and utilized said procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. SCI-Rockview meets this standard.</p> |

| | |
|--------|---|
| 115.17 | Hiring and promotion decisions |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.17</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008 1.4.1 Centralized Clearance Procedures Manual and attachment 4A, Pennsylvania DOC Application for Employment, 4.1.1. Human Resources and Labor Relations Procedures Manual Attachments A and C and Section 41 – Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff and Human Resources Staff at SCI-Rockview.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. A formal interview with the Human Resources staff at SCI-Rockview indicate that per DC ADM 008, the agency prohibits the hiring of any staff member , Limited term employee, volunteer, or contractor, who may have contact with inmates that has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution or 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 has been civilly or administratively adjudicated to have engaged in the activity. A review of documentation related to the hiring of staff was reviewed to corroborate this information. Initial background checks are completed on all new staff. Additional background checks are not conducted every five years. The agency utilizes J-NET to continuously monitor for employee arrests. The system operates in real-time. The system continuously scans for identifiers such as name, DOB, social security number, etc. and also will register hits based on fingerprints. Once a “hit” is received, this information acted upon by HR staff.</p> <p>There have been no new contracts entered into in that past 12 months.</p> <p>Interviews with Human Resources staff as well as policy mandate indicate that material omissions regarding misconduct or the provision of materially false information, shall be grounds for termination. Applicants must sign an oath of affirmation on the applications regarding their understanding of this mandate.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the informal interviews of staff from all three shifts and documentation review of DC ADM 008, 1.4.1 Centralized Clearance Procedures Manual and attachment 4A, Pennsylvania DOC Application for Employment, 4.1.1. Human Resources and Labor Relations Procedures Manual Attachments A and C and Section 41 – Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies. Formal interviews with the Superintendent and Deputy Superintendents, the Department PREA Coordinator, and the facility PREA Compliance Manager, and Human Resources indicate that SCI Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.18 | Upgrades to facilities and technologies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.18</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, Prison Intrusion Detection System (PIDS) Meeting minutes, PREA Monthly Report example. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, Human Resources Staff, Health Services and Line Staff at SCI-Rockview.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour questions were asked by the auditor about whether the facility has acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. The auditor conducted interviews with the facility Superintendent and Deputy Superintendents, the Department PREA Coordinator, and the facility PREA Compliance Manager and Supervisory Staff. The staff interviewed was asked about whether the facility has acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later. There are camera additions in to several areas and more cameras wired in but not yet operational but no major expansions or modifications since the last audit. The auditor was able to review the camera coverage from several officer stations and could determine that lines of sight not covered by physical staff presence were supplemented with camera coverage. Although additional camera are needed in several areas it is evident that the facility has done much to identify vulnerable areas and take necessary and appropriate steps to address them.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|--|
| 115.21 | Evidence protocol and forensic medical examinations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.21</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, Instructions for PREA evidence Retention and the Memorandum of Understanding with the Pennsylvania State Police. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, The PREA Investigative Lieutenant, Human Resources Staff and Line Staff at SCI-Rockview. A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour questions were asked by the auditor about the agency/facility's responsibility for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. An interview with the PREA Lieutenant indicated that SCI Rockview is responsible for all administrative PREA investigations. The auditor review several case files indicating that investigations were conducted on allegations of sexual abuse and sexual harassment. The Pennsylvania State Patrol conducts all criminal investigations regarding sexual abuse or sexual harassment at SCI Rockview. A memorandum of Understanding was reviewed which identified the Pennsylvania State Patrol as the primary investigating agency for PREA as it related to criminal charges. The auditor reviewed the protocol utilized for investigating these incidences and an interview with the Investigating Lieutenant verified that a uniform and consistent evidence protocol is followed. This is accomplished by following the Initial Response Checklist. Although all protocol is developmentally appropriate for youth, SCI Rockview does not house youthful offenders. Review of the protocol shows that it was adapted from the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents."</p> <p>According to the investigative Lieutenant, Health services staff and the inmates interviewed, Forensic medical exams are offered to all victims without financial cost. These forensic exams are conducted by SANE/SAFE nurses at Mount Nittany Medical Center. The auditor made contact with the nursing supervisor at Mount Nittany Medical Center and verified this information. The auditor was informed that there is always a SANE or SAFE nurse available to conduct these exams, however, if some reason there wasn't, a qualified medical practitioner would conduct the exam. A memorandum of Understanding exists for Mount Nittany Medical Center and was reviewed by the auditor. Records indicate that only one forensic medical exam was conducted in the past 12 months and that exam was conducted by a SANE/SAFE nurse.</p> <p>Inmates were asked if they knew whether or not they would have the availability of a victim advocate from a rape crisis center if needed. All inmates interviewed stated they would. Most could identify the advocacy program. This knowledge was gained from handouts given at PREA orientation and posters located throughout the facility. SCI Rockview has an agreement with the Centre County Women's Resource Center for providing advocacy services for inmates who are victim of sexual abuse. Inmates were also aware that, if requested, they could have a victim advocate through the forensic medical examination process and</p> |

investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, the Superintendents and the Deputy Superintendents, Supervisory staff, the PREA Investigative Lieutenant,, Health Services, Line Staff and inmates. Review of the Departments PREA Policy DC ADM 008, Instructions for PREA evidence Retention and the Memorandums of Understanding with the Pennsylvania State Police and Mount Nittany Medical Center and the Centre County Women's Resource Center were also considered. It was determined that SCI-Rockview meets this standard.

| | |
|--------|--|
| 115.22 | Policies to ensure referrals of allegations for investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.22</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, and Letters from The Pennsylvania State Police. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff and PREA Investigative Lieutenant and line staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour, questions were asked by the auditor if the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. In review of PREA investigation files and PREA Tracking System and interviewing with the PREA Investigating Lieutenant the auditor could verify that all investigations, administrative and criminal are completed. In the past 12 months. 118 allegations of sexual abuse and sexual harassment were received. All but one allegation was investigated administratively by SCI-Rockview. All 118 allegations were referred to the Pennsylvania State Patrol for criminal investigation. At the time of the audit, 106 investigations were completed and 12 investigations were on-going. A review of the Agency's website shows the referrals of PREA related allegations for criminal investigation. Several referrals for criminal investigation were reviewed by the auditor.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant as well as review of DC ADM 008 and supporting documentation from the Pennsylvania State Police It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|--|
| 115.31 | Employee training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.31</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, Basic Training Participant Guide, Lesson Plans, Refresher Training Material, PREA Training and Understanding Verification Forms and Staff Training Records. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant and line staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and During formal interviews, questions were asked by the auditor whether the agency trains all employees who may have contact with inmates on the agency's zero-tolerance policy for sexual abuse and sexual harassment.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. All training related documentation was reviewed including basic Training, Annual and refresher course formats. Line staff were interviewed and stated that they received annual training and were aware of the agency's zero tolerance policy for sexual abuse and sexual harassment. All staff members interviewed were aware of their responsibilities as it relates to prevention, detection, reporting and response. Most security staff interviewed carried a PREA card in their pocket outlining basic response procedures. Interviews indicated that all staff were fully aware of the inmates rights to be free of sexual abuse and harassment and retaliation for reporting such instances, the dynamics, common reactions of victims. Training includes how to avoid inappropriate relationships with inmates and staff could give examples when asked. Staff also indicated that they were training in communicating with all inmates including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates in a professional manner. Staff were also familiar with mandatory reporting laws. Because SCI Rockview only houses male adult inmates, all training offered is tailored to that specific gender. No staff have transferred in from facilities that house female inmates. Interviews with staff and a review of training documentation indicate that all staff receive refresher training very other year. All staff are required to sign a Training and Understanding Verification Form at the completion of all training.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, the Superintendents and the Deputy Superintendents and Supervisory staff, the PREA Investigative Lieutenant and line staff, as well as review of DC ADM 008, Basic Training Participant Guide, Lesson Plans, Refresher Training Material, PREA Training and Understanding Verification Forms and Staff Training Records. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.32 | Volunteer and contractor training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.32</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008 and Volunteer and Contractor training documents. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant and line staff.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. A contract employee was interviewed (Health Care). This employee indicated that she was trained in her responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Records indicate that 140 volunteers and contractors received PREA training. The training program varies according to the services provided and amount of inmate contact. The contract employee interviewed indicated that her training included the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Training records were reviewed indicating that SCI-Rockview maintains records of all volunteers and contractors trained on PREA.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, the Superintendents and the Deputy Superintendents, Supervisory staff, the PREA Investigative Lieutenant and line staff, as well as review of DC ADM 008 and Volunteer and Contractor training documents . It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.33 | Inmate education |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.33</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, PREA Posters, PREA hand-outs and 11.21.1 Reception and Classification Procedures Manual. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, line staff and inmates.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor if inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. Inmate interviewed stated that they were familiar with the agency's zero tolerance policy as it relates to sexual abuse and harassment. All interviewed stated that they received this information at intake orientation. A total of 878 inmates have been received at SCI Rockview in the past 12 months and all (100%) received this information. At total 799 inmates received stayed longer than 30 days and received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents. Documentation reviewed indicates that these were all completed within 30 days of intake. Inmates interviewed stated that this information was presented generally within 48 hours. As of 12/03/2014 all inmates housed at SCI Rockview had been educated on PREA. All incoming transfers receive education upon intake.</p> <p>Inmates with Limited English Proficiency have means to become educated on PREA through Spanish posters and handouts. Also interpreter services are available. The service was called to ensure operability and the Secondary Auditor conducted and interview with an inmate with limited English proficiency. Inmates with hearing impairment are also given means for education through written form. Braille is also available for inmates who are visually impaired. Videos are available for inmate with limited reading skills.</p> <p>All inmates complete an education verification form once the education has been completed. An entry is also made in the inmate's Electronic file.</p> <p>PREA information is available for inmates in the handbook, posters and handouts (both English and Spanish) and the PREA video is played on CCTV throughout the facility</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant and line staff, as well as review of DC ADM 008 and 11.21.1 Reception and Classification Procedures Manual. . It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.34 | Specialized training: Investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.34</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008 Section 2E 1-4, Investigator Training Power Points Presentation. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. The agency policy requires all PREA investigators to receive specialized training. An interview with the PREA Lieutenant, as well as review of training documentation reveals that the investigator did in fact attend specialized training. A total of three staff attended specialized training for the purpose of investigating PREA allegations. Training files for all three investigators were reviewed.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant as well as review of DC ADM 008. Section 2E 1-4, Investigator Training Power Points Presentation. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.35</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008 Section 2 B1 a-d, Training Power Point for Medical and Mental Health staff, Definition hand-out, PREA Medical and Mental Care Standards Participant Guide. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, and Medical and Mental Health staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor if the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. The auditor interviewed medical and mental health staff and inquired about the training they received in regards to PREA. Both stated that they received additional and specialized training as it relates to sexual abuse and sexual harassment in confinement. The health care provider stated during her interview that the training consisted of all the basic PREA information plus additional information on evidence collection and preservation and a portion on referrals to Psychological Services. The Psychological Services staff member stated that her training had more to do with the victim services portion. A review of training material indicates that this is the case. There are currently 82 medical and mental health care practitioners working at SCI-Rockview and training records indicate all have received PREA training. No forensic exams are conducted on site, so this training is not done at SCI Rockview.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant and line staff, as well as review of Policy DC ADM 008 Section 2 B1 a-d, Training Power Point for Medical and Mental Health staff, Definition hand-out, PREA Medical and Mental Care Standards Participant Guide. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|---|
| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.41</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008 Section 2 B 1-5, The PREA Risk Assessment Tool, Records of Reception and Transfer PRAT's. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, and Medical and Mental Health staff, intake staff, screeners and inmates.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor if the agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. The agency policy does require screening of all inmates upon admission or transfer for risk of sexual abuse victimization or sexual abusiveness toward other inmates. Interviews with staff assigned to screen inmates indicate that this is completed generally within 48 hours of arrival. Inmate interviewed stated that they were screened almost immediately upon arrival. Records indicate that 92.6% of all inmates received within the past 12 months were screened utilizing the PREA risk assessment tool (PRAT) with 72 hours of arrival. The PRAT has been identified as an objective screening instrument. Screener indicate that inmate's risk levels are reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. This is done within 30 days. Inmates fitting this category that were interviewed verified this information. Staff and inmates interviewed were aware that policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, line staff, Medical and Mental Health staff, intake staff, screeners and inmates, as well as review of Policy DC ADM 008.</p> <p>It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.42</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008 Section 9 B, Risk Tracking memo. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, and Medical and Mental Health staff, intake staff, screeners. A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor if the agency/facility uses information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Agency Policy dictates that information from screenings be used to address housing, bed, work, education and programming assignments. Interviews with staff indicate that if inmates are identified as either predatory or vulnerable they will be housed appropriately. Transgender, gay and bi-sexual inmates interviewed stated that the information given during screening played a role in their individual housing and felt relatively safe as a result. Transgender inmates are reviewed by the Gender Review Committee (GRC) every 6 months. All inmates that identify as vulnerable in the PRAT will be reviewed within 5 days for appropriate housing. In interviews with staff who sit on the GRC, all situations are determined on a case by case basis. Transgender inmates interviewed confirmed that they regularly meet with the GRC and their individual concern and taken into consideration.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, Supervisory staff the PREA Investigative Lieutenant, line staff, Medical and Mental Health staff, intake staff, screeners and inmates as well as review of Policy DC ADM 008. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|---|
| 115.43 | Protective Custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.43</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, DC-ADM 802, DC-ADM 802, Administrative Custody Procedures Manual Section 3 – Administrative Custody Housing Status, DC-ADM 802, Administrative Custody Procedures Manual Section 1 – Placement in Administrative Custody Status, DC-ADM 802, Administrative Custody Procedures Manual Section 4 – Release from Administrative Custody Status, Involuntary Administrative Custody Services Access Restriction Form, Initial Response Checklist.</p> <p>The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, and Medical and Mental Health staff, intake staff, screeners.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor if the agency has a policy prohibiting the placement of 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</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Agency policy prohibits the placement of 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. Interviews with staff indicate that victims or inmate whom identify as highly vulnerable are never placed in involuntary segregation. Inmates who identified as victims or vulnerable that were interviewed indicated that they were never placed in segregation. They’re has been no documented cases of inmates being placed in involuntary segregation for this reason in the past 12 months.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, line staff, Medical and Mental Health staff, intake staff, screeners, as well as review of Policy DC ADM 008. It was determined that SCI-Rockview meets this provision.</p> |

| | |
|--------|--|
| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.51</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, The Reporting of Extraordinary Occurrences, and Inmate Request Slip to Staff Member. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, and Medical and Mental Health staff, intake staff, screeners and inmates.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor, if the agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. During the tour of the facility, the auditor could see PREA signage and posters posted in all living area and most common areas. Inmates were asked during formal interviews if the facility enables them to report incidences of sexual abuse of sexual harassment, retaliation for reporting and/or staff neglect, in multiple ways. All of the inmates interviewed were aware that there were numerous ways to report and most could identify at least two ways. The facility posts the address for the Pennsylvania Coalition Against Rape (PCAR). These posting are in clear view for inmates and the inmates were aware of the postings. It should be noted that SCI-Rockview does not house inmates for immigration purposes, therefore provisions for contact information for consular officials in not applicable. Interviews of line staff and inmates indicate that inmates are aware that they can report to staff verbally, in writing and through third parties and staff know they are mandated to accept reports in all three ways. Staff are also aware that these reports must be documented. Through interviews with line staff and review of training records show staff may also report privately. Phone numbers and addresses are posted throughout the facility for staff to privately report. This information is also presented during staff training sessions and updates.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, line staff, Medical and Mental Health staff, intake staff, screeners and inmates as well as review of Policy DC ADM 008. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.52</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, DC-ADM 804, Inmate Grievance System Procedures Manual</p> <p>Section 1 – Grievances & Initial Review. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, and Medical and Mental Health staff, intake staff, screeners, Line staff and inmates.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. The auditor conducted interviews with the Superintendent and Deputy Superintendents, the Agency PREA Coordinator, the facility PREA Compliance regarding this standard. Interviews indicate that SCI-Rockview does not permit inmates to utilize the grievance system for incidences of Sexual Abuse or Sexual Harassment. All incidences of this type are handled strictly through a formal administrative or criminal PREA investigation. This is due to the timeliness and emergency nature of such reports. If an inmate files a grievance based on a PREA allegation, the facility grievance coordinator will reject the grievance and forward it to the PREA Compliance manager for tracking and investigation.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Line Staff and inmates, as well as review of Policy DC ADM 008 and DC-ADM 804, Inmate Grievance System Procedures Manual Section 1 – Grievances & Initial Review. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|--|
| 115.53 | Inmate access to outside confidential support services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.53</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA Policy DC ADM 008, PREA Hand-out, Agreement with Centre County Women’s Resource Center. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant Line staff and inmates.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor if the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. The auditor conducted interviews with the Superintendent and Deputy Superintendents, the Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, The PREA Investigative Lieutenant, Line Staff and inmates. Through these interviews the auditor confirmed that the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. The Department works in collaboration with the Pennsylvania Coalition Against Rape (PCAR) and its member centers. The facility PCM, in conjunction with the statewide PREA Coordinator/designee has worked to establish mutual agreements with local rape crisis centers where all Department facilities are located. Inmates are instructed and educated on this process during orientation and posters and handouts are available for viewing throughout the facility. Phone numbers are available for inmates for PCAR and the Center County Women’s Resource Center. Inmates stated during interviews that they are afforded access to dayroom telephones anytime they would need to contact a victim services entity of report an incident. They stated that the calls were a confidential as can be expected due to proximity to other inmates and facility recording capabilities. The Investigative Lieutenant stated during the tour that all inmate telephone calls are monitored through the facility recording system, however, calls made to victim services entities once monitored are not listened to for specific content. All reports are forwarded to the PSP for investigation or referred back to the facility investigator based on severity. Staff and inmates appear to understand the mandatory reporting mandates. A memorandum of understanding for Centre County Women’s Resource Center was reviewed by the auditor.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Line Staff and inmates, as well as review of Policy DC ADM 008, PREA Hand-out, and Agreement with Centre County Women’s Resource Center . It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.54</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 3 – Reporting Sexual Abuse and Sexual Harassment, The Pennsylvania DOC Web Site, PREA Posters in English and Spanish and PREA hand-outs. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, Line Staff and inmates.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor if the agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Information regarding 3rd party reporting can be found on the Agency website. 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. Reports can also be submitted online at www.tipsubmit.com. Interviews with inmates indicated that most were aware that reports of sexual abuse and sexual harassment can be made through third parties. This information is presented at orientation and posters and handouts are available for inmates view.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Line Staff and inmates, as well as review of Policy DC ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 3 – Reporting Sexual Abuse and Sexual Harassment, The Pennsylvania D C Web Site, PREA Posters in English and Spanish and PREA hand-outs. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>116.61</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA DC-ADM 008. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, Line Staff and inmates.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. During interviews with staff it was apparent that staff of all disciplines were aware of the requirements to immediately report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. This is also true for retaliation and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff also understand that they are not permitted to reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Line Staff and inmates, as well as review of Policy DC ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 3 – Reporting Sexual Abuse and Sexual Harassment. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.62</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA DC-ADM 008, Examples of movement and examples of Response to Allegations of Sexual Abuse Checklists. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, Line Staff and inmates.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor, when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. When asked, each line staff interviewed understood and could identify steps taken anytime they learn an inmate is subject to a substantial risk of imminent sexual abuse. There have been five documented case in the past 12 months where an inmate was subject to substantial risk of imminent sexual abuse. In each case staff took appropriate measure to ensure the inmate’s safety. The common response from staff and inmates who were identified and interviewed was this action is immediate.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Line Staff and inmates, as well as review of Policy DC ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 3 – Reporting Sexual Abuse and Sexual Harassment. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|--|
| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.63</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, the Departments PREA DC-ADM 008. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. Interviews with the Superintendent and Deputies indicate that does in fact occur. Examples of documentation corroborating this information were reviewed. There were 21 allegations made in the past 12 months of abuse at another facility. In each case the inmate is seen by Psychology staff, given victim services information and the sending facility is informed and any relevant documentation is forwarded to that facility. Documentation reviewed and interviews with the PREA Compliance Manager and Superintendent show that this occurs within 72 hours. An email and a notification letter is sent to the sending facility as a matter of record. The PREA Investigating Lieutenant stated that all cases described above are investigated in accordance with PREA standards. File reviews indicate that is the case.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 3 – Reporting Sexual Abuse and Sexual Harassment. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.64 | Staff first responder duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.64</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, PREA DC-ADM 008, PREA First Responder Checklist, Pocket Cards. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant and Line Staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor, does the agency have a first responder policy for allegations of sexual abuse.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Both inmate and staff interviewed stated that upon reporting an incident of sexual abuse or sexual harassment, the inmates identified are immediately separated. A checklist is followed to ensure consistency. Evidence preservation is followed and staff appear to be knowledgeable about this when asked. A responder card is carried by staff and identifies all steps to take to include the preservation and collection of evidence. In the past 12 months there have been 69 allegations that an inmate was sexually abuse. Of those reports, inmates were separated by the first staff member to respond was 10 times. Most of the incidences occurred at other facilities or were reports of incidences that occurred in the past. Of these 20 cases occurred within the time span to collect physical evidence. Of these allegations 3 cases, staff first responders ensured the abusers and the victims not to take any actions to destroy physical evidence. Questions were asked to non- security staff about their role in response. All said they would keep an eye on the victim and immediately notify security. This is detailed in the agency policy. There have been 50 reports of sexual abuse or sexual harassment made to non-security staff in the past 12 months. All report were of incidences that happened outside the evidence collection time frame or did not involve penetration</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 4. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.65 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.65</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, PREA DC-ADM 008, Local PREA Procedure 008 ROC 001 Dated 01-20-2017. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant and Line Staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor has the facility developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. The Local PREA Procedures Manual was reviewed and interviews with facility leadership and the PREA Compliance Manager indicated that the facility staff are familiar with the manual. Line staff were interviewed and most were familiar with the manual. Several of the staff interviewed made a statement relative to, "I couldn't quote the contents but I know where to find it."</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 4. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Audited at Agency Level |
| | Auditor Discussion |
| | <p>This standard is also being, or has been, audited at the agency-level. If the facility does not have any responsibility for this standard. A formal interview was conducted with eth Agency PREA Coordinator and the auditor asked if there have been any new collective bargaining agreement's entered into since the agency's last PREA audit on 01/25/2017. There have not. All current Collective bargaining agreements documentation has been uploaded and reviewed. All provisions of 115.66 have been satisfactorily met. Therefore, the standard has been met.</p> |

| | |
|---------------|---|
| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.67</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, PREA DC-ADM 008, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training, Retaliation Monitoring Form. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant and Line Staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions were asked by the auditor, does the agency have 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.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Several examples of action taken by the facility to protect inmates from retaliation were reviewed. Interviews with inmates showed that they were aware of the agency policies set forth to protect them from retaliation and most stated they were educated on this during initial PREA orientation. The inmates that were interviewed stated that they felt relatively safe and said that they felt staff would do what they could to protect them from retaliation. Staff, when asked, were also aware of the mandates. The facility has designated staff to monitor retaliation. An interview was conducted with a staff member assigned this task. This staff member was familiar with the responsibilities assigned to this position and was aware of the time frames associated with monitoring. There have been no instances of retaliation reported within the past 12 months.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 3. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>116.68</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, PREA DC-ADM 008, DC-ADM 008, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual</p> <p>Section 2 – Sexual Abuse/Sexual Harassment Prevention and Training and Shift Commander Checklist. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant and Line Staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, questions the auditor asked, if the agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse 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.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Interviews with staff assigned to Segregated Housing Units and the PREA Investigating Lieutenant as well as documentation and file review indicate that no inmates have been placed in involuntary segregation in the past 12 months. Interviews with both inmates and staff show the same responses. Several of the inmates interviewed that had reported sexual abuse or sexual harassment stated that they were separated from the alleged perpetrator and they usually could stay in the assigned living unit. The perpetrator of the allegation is placed in segregation for investigative purposes and the victim is either left in their assigned unit if they feel safe, moved closer to the officer’s station or moved to another similar unit. Policy includes stipulations for a 30 day review in the event an inmate was placed involuntary segregation.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 2. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|--|
| 115.71 | Criminal and administrative agency investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.71</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 5 – Sexual Abuse/Sexual Harassment Prevention and Training and Shift Commander Checklist. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant and Line Staff.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, the auditor asked, if the agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. An interview with the investigating Lieutenant showed that all substantial allegations that appear to be criminal are referred for prosecution. A Memorandum of Understanding exists between the facility/agency and the Pennsylvania State Police indicating the PSDP would conduct all criminal investigations regarding PREA. The Investigating Lieutenant stated during his interview that when the allegation has been received from the victim it is always forwarded to the PSP and they make the determination if they will investigate the matter criminally or if the allegation does not reach the severity of a criminal offense, the matter is investigated administratively by the facility investigator. There have been no instances of this in the past 12 months. Agency policy mandates and file reviews and interviews verify that all referrals and reports are retained for as long as the abuser in incarcerated or employed plus 5 years.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 2. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.72 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.72</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 5 – Investigating Allegations of Sexual Abuse or Sexual Harassment. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. The auditor interviewed the investigating Lieutenant regarding the level of proof that was relied upon for determining whether allegations of sexual abuse or sexual harassment are substantiated. The investigator indicated that preponderance of the evidence is relied upon for that determination. He stated that he understood that PREA investigation differ from other investigations and that it is not necessary for him to substantiate the allegation beyond a shadow of a doubt.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 2. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.73 | Reporting to inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.73</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 5 – Investigating Allegations of Sexual Abuse or Sexual Harassment, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 8 and copy of PREA Investigation Notification Form. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. A file review was conducted regarding a question an inmate posed to the auditor during the site tour. The auditor was able to verify the question and give a concise answer based on the finding of the signed letter which was issued to the inmate at the completion of an investigation communicating to him the outcome of the investigation. Through interviews with inmates who made allegations and their investigations have concluded it has been established that the facility does inform inmates of the outcomes.</p> <p>There have been 49 criminal or administrative investigations of alleged sexual abuse completed in the past 12 months. All 49 were notified of the outcome. An interview with the Investigating Lieutenant indicates that there are clear lines of communication between the facility and the Pennsylvania State Police involving investigation outcomes. There has been one alleged incident investigated by PSP in the past 12 months and it is still on-going. If a staff member is involved, the inmate is informed of the outcome. There were 3 alleged incidences (sexual harassment) investigated. All were found to be unsubstantiated. Inmate on inmate case the victim is notified of the outcome and on the status of criminal charges and criminal conviction. File reviews show that all instances of notification are documented. In the past 12 months 49 notifications were provided and all were documented.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 2. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|--|
| 115.76 | Disciplinary sanctions for staff |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.76</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual, and HR Bulletin 4.1.1.1 dated 01/20/15</p> <p>Section 7 – Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Interviews with the PREA Compliance manager and review of Section 7 of DC ADM 008 determined that policy addresses staff discipline. Training material indicate this is part of the staff training. Several staff members were interviewed and stated that they were aware that they are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Records indicate that there have been no staff disciplines to any level in the past 12 months for violating these policies. Policy does reflect that disciplinary sanction are commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. Policy indicates that any terminations of staff as a result of violating policies regarding sexual abuse or sexual harassment are reported to law enforcement. No incidences of policy violation have occurred in the past 12 months resulting in law enforcement notification.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 8. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|---|
| 115.77 | Corrective action for contractors and volunteers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.77</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008</p> <p>Section 7 – Discipline Related to Sexual Abuse, Sexual Harassment, and Retaliation and Volunteer suspension letter. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Agency Policy addresses this requirement. Documentation review revealed that this process has been followed. Policy review and interviews with the PREA Compliance Manager also indicate that any volunteer or contractor who engages in sexual abuse be prohibited from contact with inmates. This is accomplished by suspending or terminating entrance authorization. There have been zero instances of volunteers or contractors engaging in sexual abuse be prohibited from contact with inmates in the past 12 months, thus no reports to law enforcement. Cases of alleged sexual abuse or harassment of inmates on the part of contractors or volunteers are investigated and the alleged perpetrator is suspended during the investigation. A review of suspension letters has been reviewed to corroborate this action.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, as well as review of Policy DC ADM 008 Section 8. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|--|
| 115.78 | Disciplinary sanctions for inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.78</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008</p> <p>Section 7 – Discipline Related to Sexual Abuse, Sexual Harassment. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant.</p> <p>A facility tour, including all facility buildings within the confines of the secure perimeter as well as all outlying buildings was conducted. During the tour and during formal interviews, the auditor asked if inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Agency Policy addresses inmate discipline following administrative and criminal finding by means of formal disciplinary process after a finding of guilt for inmate on inmate sexual abuse. Interviews with the investigative Lieutenant indicate that in the past 12 months there have been 2 instances of inmate on inmate sexual abuse that have occurred at SCI-Rockview. Neither of these cases resulted in criminal findings.</p> <p>The facility medical and mental health staff were interviewed and indicate that therapy, counseling or other interventions designed to address and correct the underlying reasons or motivations for abuse are offered. Inmates interviewed reiterated this and confirmed that they were offered or knew the services were available. Conversations with mental health staff as well as review of inmate records show that inmates are offered therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Review of DC ADM 008 Section 7 clearly states that the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact and does not discipline inmates for reporting sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. Inmate interviews indicate that the inmates are educated during orientation on this subject. The agency prohibits all sexual activity between inmates and does in fact discipline inmates for such behavior unless it was been determined through investigation that one of the parties involved was coerced.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant and inmates as well as review of Policy DC ADM 008 Section 8. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|--------|---|
| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.81</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008</p> <p>Section 2 – Related to Sexual Abuse, Sexual Harassment Prevention and Training and the PRAT. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, Medical and Mental Health Services Staff, Line Staff and inmates.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Interviews were conducted with staff assigned to conduct inmate PREA screenings as well as review of the PRAT (PREA Risk Assessment Tool) and policies governing PREA screening revealed that any inmate that discloses prior sexual victimization during a screening is offered a follow up meeting with a medical and or mental health practitioner and those follow up meeting occur within 14 days and all follow up meeting are documented. Records indicate that 100% of the inmates that have disclosed prior victimization during a screening in the past 12 months received a follow up meeting. This is also the case for inmates that disclose having previously perpetrated sexual abuse during a screening. Records also indicate that 100% of inmates that reported perpetrating sexual abuse on a screening in the past 12 months have received a follow up. Confidentiality regarding previous victimization and or perpetration is limited to medical and mental health staff with the exceptions of security involved in investigations or staff assigned to make decisions regarding the inmate’s treatment, housing, education and program assignments and any law enforcement entity that may be investigation allegations. Medical staff and inmates interviewed stated that medical and mental health staff do obtain informed consent from the inmates prior to reporting prior reporting any previous victimization that did not occur in an institutional setting.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Medical and Mental Health Staff, Line Staff and inmates as well as review of Policy DC ADM 008 Section 8. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.82 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.82</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008</p> <p>Section 4- Responding to Reports of Sexual Abuse. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, Medical and Mental Health Services Staff, Line Staff and inmates.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. Upon interviewing inmates that have been victimized it was determined that they receive timely, unimpeded access to emergency medical treatment and crisis intervention services. One inmate interviewed that had been a victim in the past stated that the facility was very quick to take care of him and get him medical attention. The inmate went on to say that victim services was offered and follow ups were conducted by Psychological Services.</p> <p>The services provided in determined by medical and mental health practitioners based on their professional judgment. Inmate who reported victimization stated that they were offered emergency medical treatment and crisis intervention services in a timely manner. Inmates also stated that they were offered access to STI prophylaxis and all of the services provided per done so at no cost to the inmate.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Medical and Mental Health Staff, Line Staff and inmates as well as review of Policy DC ADM 008 Section 8. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.83</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008</p> <p>Section 4- Responding to Reports of Sexual Abuse, Example of PRAT with Psychological Services Follow up. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, Medical and Mental Health Services Staff, Line Staff and inmates.</p> <p>Observations: The Agency's policy includes all the elements of this PREA Standard. Interviews with inmates identified as reporting as being victimized during incarceration show that the facility offers medical and mental health evaluation and treatment. Inmate victims of abuse are offered STI testing, without cost. One inmate that reported being a victim of sexual abuse stated during an interview that medical services were offered and there was not cost involved. Interviews with mental health staff and records review indicate that mental health evaluations are conducted on all inmate on inmate abusers within 60 days of learning of such abuse history and if deemed appropriate treatment is offered.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Medical and Mental Health Staff, Line Staff and inmates as well as review of Policy DC ADM 008 Section 8. It was determined that SCI-Rockview meets this standard.</p> |

| | |
|---------------|---|
| 115.86 | Sexual abuse incident reviews |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>115.86</p> <p>Compliance evidence: The facility provided the auditor with; the pre-Audit Questionnaire, DC-ADM 008</p> <p>Section 6 - Sexual Abuse Incident Review -, PREA Sexual Abuse Incident Review form. The auditor also conducted interviews with the facility Superintendent and Deputy Superintendents, The Agency PREA Coordinator, the facility PREA Compliance Manager, Supervisory staff, PREA Investigative Lieutenant, Medical and Mental Health Services Staff.</p> <p>Observations: The Agency’s policy includes all the elements of this PREA Standard. Policy states that a Sexual Abuse Incident Review (SAIR) will be conducted at the conclusion of every PREA investigation. Interviews with the Superintendent, Deputies and PREA Compliance Manager as well as review of several SAIR’s indicate the facility is conducting such reviews and they are completed within 30 days of the completion of the investigation. In the past 12 months 49 SAIR’s have been conducted. Review of the SAIR’s show that they are attended by upper-level management officials and allow for input from line supervisors, investigators, and medical or mental health practitioners. SAIR’s and prepared and then an administrative review of the SAIR takes place within two weeks of the completion of the SAIR with recommendations for improvements.</p> <p>COMPLIANCE DETERMINATION: Conclusion is based on the evidence and observations during the facility tour, formal interviews with the PREA Compliance Manager, The PREA Coordinator, the Superintendents and the Deputy Superintendents and Supervisory staff and the PREA Investigative Lieutenant, Medical and Mental Health Staff as well as review of Policy DC ADM 008 Section 6. It was determined that SCI-Rockview meets this standard.</p> |

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

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

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

| | |
|----------------|---|
| 115.401 | Frequency and scope of audits |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>On February 27 and 28, 2017 the on-site portion of the audit took place. A comprehensive tour of the facility took place in which the auditors took time to physically observed standard practices in place. One auditor toured the exterior building and the other toured the facility within the fence. The auditors informally interviewed both staff members and inmates during the tour. Questions were asked regarding the auditor posting and other related PREA signage, training provided to staff and inmates regarding Sexual safety and the agency's Zero Tolerance Policy on sexual abuse and sexual harassment, services provided and reporting protocols. The auditor postings were up six weeks prior to the arrival of the auditor. The auditors used a combination of file, record and policy review, physical observation of practices being implemented and followed, appropriate signage and inmates information posting and formal and informal interviews with inmates and staff.</p> <p>The auditor was granted access to all areas. SCI-Rockview supplied the auditor with all relative documentation both within the Pre Audit questionnaire as well as during the site visit. The auditor was supplied with a private setting to conduct interviews with both staff and inmates. A cross section of the inmate population, to include inmates that reported being victimized, transgender inmates, inmates that identify as gay or bi-sexual and inmates with identified disabilities. One inmate with limited English proficiency was interviewed using the contract LEP line.</p> <p>Staff from several different disciplines were interviewed, to include; security staff both general housing and restrictive housing, medical and mental health staff, contract/volunteer staff, supervisory staff, inmate screeners, maintenance staff and those assigned to monitor retaliation. Telephone interviews were conducted with Human Resources staff and Medical staff at Mount Nittany Medical Center.</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".) | |

| 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.) | yes |

| | | |
|-------------------|---|-----|
| 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? | no |

| | | |
|-------------------|---|-----|
| 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.) | na |

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

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

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

| 115.21 (d) | Evidence protocol and forensic medical examinations | |
|------------|--|-----|
| | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? | yes |
| | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? | yes |
| | Has the agency documented its efforts to secure services from rape crisis centers? | yes |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

| 115.51 (b) | Inmate reporting | |
|------------|--|-----|
| | Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? | yes |
| | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? | yes |
| | Does that private entity or office allow the inmate to remain anonymous upon request? | yes |
| | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? | yes |

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

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

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

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

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

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

| 115.52 (e) | Exhaustion of administrative remedies | |
|------------|--|-----|
| | Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) | yes |
| | 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.) | yes |
| | 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.) | yes |

| 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 |