

PREA Facility Audit Report: Final

Name of Facility: Philadelphia Community Corrections Center #2

Facility Type: Community Confinement

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/20/2021

| 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: Patrick J. Zirpoli | Date of Signature: 10/20/2021 |

| AUDITOR INFORMATION | |
|-------------------------------------|------------------|
| Auditor name: | Zirpoli, Patrick |
| Email: | pzirpoli@ptd.net |
| Start Date of On-Site Audit: | 09/13/2021 |
| End Date of On-Site Audit: | 09/14/2021 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | Philadelphia Community Corrections Center #2 |
| Facility physical address: | 407 N 8th Street, Philadelphia, Pennsylvania - 19123 |
| Facility Phone | |
| Facility mailing address: | |

| Primary Contact | |
|--------------------------|-----------------|
| Name: | Randell Lauffer |
| Email Address: | rlauffer@pa.gov |
| Telephone Number: | 610-301-5897 |

| Facility Director | |
|--------------------------|-----------------|
| Name: | Randell Lauffer |
| Email Address: | rlauffer@pa.gov |
| Telephone Number: | 610-301-5897 |

| Facility PREA Compliance Manager | |
|----------------------------------|-------------------|
| Name: | Jacqueline Rupert |
| Email Address: | jarupert@pa.gov |
| Telephone Number: | M: 215-560-3041 |
| Name: | Randell Lauffer |
| Email Address: | rlauffer@pa.gov |
| Telephone Number: | |

| Facility Characteristics | |
|--|-------|
| Designed facility capacity: | 78 |
| Current population of facility: | 31 |
| Average daily population for the past 12 months: | 88 |
| Has the facility been over capacity at any point in the past 12 months? | No |
| Which population(s) does the facility hold? | Males |
| Age range of population: | 20-76 |
| Facility security levels/resident custody levels: | 1 |
| Number of staff currently employed at the facility who may have contact with residents: | 21 |
| Number of individual contractors who have contact with residents, currently authorized to enter the facility: | 15 |
| Number of volunteers who have contact with residents, currently authorized to enter the facility: | 0 |

| 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: | 7177282573 |

| Agency Chief Executive Officer Information: | |
|---|---------------|
| Name: | George Little |
| Email Address: | ██████@pa.gov |
| Telephone Number: | 717-728-2573 |

| 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.

Pre-Onsite Audit Phase

Audit Planning and Logistics:

I had the opportunity to discuss the audit process and expectations of both parties with the Agency PREA Coordinator David Radziewicz. We coordinated the dates for the onsite audit at the facility. During these conversations, we outlined an overall audit schedule and notified the facility of the estimated time of arrival on site.

Posting Notice of the Audit:

I forwarded the audit postings to the facility PREA Compliance Manager on August 2, 2021. The posting included the dates of the audit, the purpose of the audit, my contact information, and a statement regarding the confidentiality of any communication received. The posting was placed throughout the facility, including all housing units, visiting areas, recreational areas, and all common areas. I verified the placement of the audit notices through timestamped photographs and during the onsite portion of the audit during the facility tour and during the inmate and staff interviews. No staff nor inmates contacted me.

Review of Agency and Facility Policies, Procedures, and Supporting Documentation:

The agency uploaded all documentation to the Online Auditing System. This included all Pennsylvania Department of Corrections Policies and Procedures related to the Prison Rape Elimination Act. All facility-level Policies and Procedures, as well as documentation that all Department and Facility Policies and Procedures were practiced on a daily basis, were also uploaded. They also provided me a completed PRE-Audit Questionnaire. The Policies, Procedures and Documents reviewed during this phase of the audit are listed under the specific standard.

Outreach to Community Advocacy Organizations:

I contacted the Women Organized Against Rape (WOAR), which provides emotional support for the reentrants. They knew of no issues at the facility.

Agency Level Interviews:

I conducted the agency level interviews on August 24th through the 25th 2021. At that time, I met with the Pennsylvania Bureau of Community Corrections Administration, which included Major Laura Hoffman-Reed, Captain Brian Taylor and the Agency PREA Coordinator. I also interviewed investigative staff. I confirmed during these interviews that no Agency Level Processes have changed since the last audit conducted by me for the Pennsylvania Department of Corrections.

Onsite Audit Phase

Site Review:

I met with the Facility Director on September 13, 2021 at approximately 1130 a.m. We discussed the onsite portion of the audit, including facility tour, reentrant and staff interview location, and document review. After this brief meeting, a facility tour was conducted. During the tour, I had the opportunity to view all areas of the facility. I interacted with both staff and reentrants, as well as observed the interaction between the staff and reentrants. I was able to verify the location of cameras throughout the facility, as well as the camera monitor locations. While in the housing areas, I observed the related PREA information, Audit Posting, and applicable policies and procedures which are accessible to all inmates. These postings were further observed in common areas throughout the facility.

Upon completion of the facility tour, the reentrant interviews were conducted. They were conducted in an office; this provided privacy while

conducting the interviews. I randomly selected the reentrants from the daily roster.

Reentrant Type Number Random Reentrant Interviews 11

Reentrants with a Physical Disability 1

Reentrants who are Blind, Deaf, or Hard of Hearing 0

Inmates who are Limited English Proficient 1

Reentrants with a Cognitive Disability 2

Reentrants who Identify as Lesbian, Gay or Bisexual 1

Reentrants who identify as Transgender or Intersex 0

Reentrants who Reported Sexual Abuse 0

Reentrants who Reported Sexual Victimization During Risk Screening 0

Total Reentrant Interviews 16

During the interview process, several targeted categories of reentrants were not being housed at the facility.

I conducted the interviews with all reentrants, in the same manner, a preamble to the interview was relayed to the reentrant explaining the purpose of the interview, and how they were selected and explaining to them that they did not have to speak with me if they choose not to. No reentrants refused to speak with me. During the interviews, I utilized a copy of the initial PREA information received by reentrants, Facility Handbook, and Screening form to visually stimulate the reentrant's recollection of their initial intake process.

Upon completion of the reentrant interviews, the staff interviews were conducted on both days of the audit. These interviews were conducted in a conference room. During the process I interviewed staff in the following categories:

Interview Type Number Random Staff Interviews 7

Medical and Mental Health Staff 0

Administrative Staff 1

Victim Advocate & SANE Nurse 2

Volunteers and Contractors 0

Investigative Staff 1

Staff who Perform Screening 2

Staff on the Sexual Abuse Incident Review Team 1

First Responders 0

Director/PREA Compliance Manager and Designated to Monitor for Retaliation 1

Total Staff Interviews 15

I conducted the interviews with all staff in the same manner, a preamble to the interview was related to the staff member explaining the purpose of the interview, and how they were selected and explaining to them that they did not have to speak with me if they choose not to. No staff refused to speak with me.

At the conclusion of the Onsite Audit, an exit conference was held with the administration. At this time, I provided an overview of the audit findings during the onsite audit portion

Post Audit:

Upon completion of the Pre-Audit and Onsite Audit phases, I conducted a systematic evidence review of all the information obtained during the audit process. I utilized the Compliance Tool as a guide to ensure that all aspects of each standard were met. This assurance was made by triangulation of the policies and documentation reviewed, my personal observations during the onsite audit, and through the information received during the interviews. After taking all of these factors into account, I found that the facility has met all of the standards and are in compliance with the Prison Rape Elimination Act National Standards for Community Confinement.

AUDIT FINDINGS

Facility Characteristics:

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

Philadelphia Community Corrections Center (CCC) is operated by the Pennsylvania Department of Corrections, Bureau of Community Corrections. This is a residential program for female reentrants under the jurisdiction of the Pennsylvania Department of Corrections. Reentrants can be employed and engage in community service.

The Pennsylvania Department of Corrections CCC#2 is located at 407 North 8th Street Philadelphia, PA 19123. The physical location is within the boundaries of the City of Philadelphia, this is advantageous to the residents, allowing them to utilize public transportation, and being within walking distance to the Center City District. The facility does not provide food for the residents so again this allows them to walk to nearby eateries for meals. The facility is an all-male facility, with both male and female staff. Most of the residents are out of the facility for a large portion of the day, they work, attend treatment or other appointments, or are job seeking. The allotted time out of the facility varies between residents. The facility is located on the corner of North 8th Street and Willow Street, the main entrance is on the North 8th Street side of the building. This entrance is locked at all times, a call box allows returning residents and visitor the ability to contact the monitor's station. The area is also surveilled by a camera. Upon entering this doorway, you walk onto a stairwell, when you go up the stairs you come to the main door to the facility, going down would lead you to an area that is used for storing resident's bicycles, a locked door on the lower level leads to the downstairs of the facility. The main floor, which is considered the second story of the facility is controlled by a locked door, everyone entering the building must clear the metal detector before being granted entry. The immediate area inside the door is used for a main lobby with chairs, offices are located off this area. The monitor's bubble, which is a secure station that has windows allowing for visibility, is in the area also. The staff conference room, which is secured at all times, is located through a doorway. If you go through the conference room you will enter the staff kitchen and staff restrooms, this has a second entry door located in the resident's hallway. Upon walking into the main hallway, the resident's rooms, medical room, and bathrooms are located off this corridor. An interior stairwell is located at the end of the hallway, this stairwell leads to the first floor. The first floor contains resident's rooms, bathrooms, kitchen, and a community area. The counselor's offices are located off the community area. The resident's rooms have doors on them, but the locks have been removed. All the bathrooms have doors which can be closed for privacy. All areas of the facility are under supervision of staff.

Philadelphia CCC has 48 cameras in common areas of the facility. Cameras are monitored by Community Corrections Center Monitors and the Facility Director and recorded footage is stored for 30 days.

PREA signs are posted throughout the facility, these signs included the third-party reporting avenue, and information on the Pennsylvania Coalition Against Rape (PCAR).

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

| | |
|--------------------------------------|----|
| Number of standards exceeded: | 6 |
| Number of standards met: | 35 |
| Number of standards not met: | 0 |

Standards Exceeded

Number of Standards Exceeded: 6

§ 115.211 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator.

§ 115.217 Hiring and promotion decisions.

§ 115.231 Employee training.

§ 115.233 Resident education.

§ 115.234 Specialized training: Investigations.

§ 115.271 Criminal and administrative agency investigations.

Standards Met

Number of Standards Met: 35

§ 115.212 Contracting with other entities for the confinement of residents.

§ 115.213 Supervision and monitoring.

§ 115.215 Limits to cross-gender viewing and searches.

§ 115.216 Residents with disabilities and residents who are limited English proficient.

§ 115.218 Upgrades to facilities and technologies.

§ 115.221 Evidence protocol and forensic medical examinations.

§ 115.222 Policies to ensure referrals of allegations for investigations.

§ 115.232 Volunteer and contractor training.

§ 115.235 Specialized training: Medical and mental health care.

§ 115.241 Screening for risk of victimization and abusiveness.

§ 115.242 Use of screening information.

§ 115.251 Resident reporting.

§ 115.252 Exhaustion of administrative remedies.

§ 115.253 Resident access to outside confidential support services.

- § 115.254 Third-party reporting.
- § 115.261 Staff and agency reporting duties.
- § 115.262 Agency protection duties.
- § 115.263 Reporting to other confinement facilities.
- § 115.264 Staff first responder duties.
- § 115.265 Coordinated response.
- § 115.266 Preservation of ability to protect residents from contact with abusers
- § 115.267 Agency protection against retaliation.
- § 115.272 Evidentiary standard for administrative investigations.
- § 115.273 Reporting to residents.
- § 115.276 Disciplinary sanctions for staff.
- § 115.277 Corrective action for contractors and volunteers.
- § 115.278 Disciplinary sanctions for residents.
- § 115.282 Access to emergency medical and mental health services.
- § 115.283 Ongoing medical and mental health care for sexual abuse victims and abusers.
- § 115.286 Sexual abuse incident reviews.
- § 115.287 Data collection.
- § 115.288 Data review for corrective action
- § 115.289 Data storage, publication, and destruction.
- § 115.401 Frequency and scope of audits.
- § 115.403 Audit contents and findings.

Standards Not Met

Number of Standards Not Met: 0

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.

| | |
|---------|--|
| 115.211 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
| | <p data-bbox="242 145 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 518 300">Documentation reviewed:</p> <p data-bbox="242 329 486 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1284 416">DC-ADM 008 Prison Rape Elimination Act (PREA) Policy and Procedure entirety Effective April 22, 2019</p> <p data-bbox="242 445 622 474">DC-ADM 008 PREA Policy Statement</p> <p data-bbox="242 504 1420 562">DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 1 - Sexual Abuse/Sexual Harassment Prevention - Responsibilities</p> <p data-bbox="242 591 1236 620">DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Glossary of Terms DCADM</p> <p data-bbox="242 649 1061 678">801, Inmate discipline Procedures Manual Section 1 - Misconducts/Rule Violations</p> <p data-bbox="242 707 1444 766">DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 17 - Discipline Related to Sexual Abuse, Sexual Harassment, and retaliation</p> <p data-bbox="242 795 1364 853">4.1.1, Human Resources and Labor Relations Procedures Manual Section 7 - Standardization of Pre-Disciplinary Conferences</p> <p data-bbox="242 882 1388 911">DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Table of Contents DOC Mission Statement</p> <p data-bbox="242 940 510 969">DOC Organizational Chart</p> <p data-bbox="242 999 638 1028">PREA Coordinator Position Description</p> <p data-bbox="242 1120 1492 1478">Subsection (a) The agency has developed a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment, this policy also outlines the agencies approach to preventing, detecting, and responding to such conduct. This policy is the Commonwealth of Pennsylvania Department of Corrections, policy subject Prison Rape Elimination Act (PREA), policy number DC-ADM 008. This policy was effective on April 22, 2019. Prior to the issuance of this policy, the Pennsylvania Department of Corrections followed two separate PREA policies, DC-ADM 008 and BCC-ADM 008. These policies had been in effect since the incorporation of PREA into the Pennsylvania Department of Corrections. In an effort to make the policies consistent and applicable to both the State Correctional Institutions and Community Corrections Centers, the agency merged the policies into one. The policy has also been adopted by the contracted community corrections centers, which house reentrants for the Bureau of Community Corrections. The policy addresses all aspects of both the Prison Rape Elimination Act Standards for Prisons and Jails, and Community Confinement. The policy further defines all prohibited acts, the definitions listed in the glossary of terms are consistent with the definitions in both sets of PREA Standards.</p> <p data-bbox="242 1512 1476 1836">Subsection (b) The agency has designated an agency wide PREA Coordinator. During the interview, he related that he has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. I found the Agency PREA Coordinator to be well versed in the PREA Standards and their daily application in the Pennsylvania Department of Corrections. The PREA Coordinator was also a Certified Department of Justice PREA Auditor. Prior to becoming the Agency PREA Coordinator, he was a PREA Compliance Manager, and has been involved with the implementation of the PREA Standards since the incorporation. The position of PREA Coordinator reports directly to the Director of the Bureau of Standards/Audits/Accreditations, therefore this position is within the top of the agency administration. During the interviews with the administration of the Bureau of Community Corrections and the Director at the facility, I confirmed that the Agency PREA Coordinator is always available to answer questions and provide guidance on PREA related issues.</p> <p data-bbox="242 1870 1428 1928">During the interview with the PREA Coordinator he related that his division conducts quarterly desk top audits on each facility. They will randomly select standards and audit materials to ensure the facility is compliant with the standards.</p> |

| | |
|---------|--|
| 115.212 | Contracting with other entities for the confinement of residents |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 528 300">Documentation Reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1420 448">DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 2 - Sexual Abuse/Sexual Harassment Prevention - Contracting</p> <p data-bbox="242 477 1029 506">12 Department-wide Contracts effective February 1, 2019, to January 31, 2024</p> <p data-bbox="242 535 1377 595">Statement of Work, Residential Housing, and Treatment Invitation to Qualify (ITQ) Contract Bureau of Community Corrections</p> <p data-bbox="242 624 951 654">PREA Contract Compliance Monitoring Reports for contracted facilities</p> <p data-bbox="242 683 759 712">US DOJ PREA Audit reports for contracted facilities</p> <p data-bbox="242 795 1485 1258">Subsection (a) DC-ADM 008 addresses contract obligations with private agencies or other entities for the housing of inmates and reentrants. These entities include private community correction centers and private treatment facilities. By policy, all new contracts or contract renewals for housing requires the contractor to adopt and comply with the PREA Standards and the PA DOC policies related to PREA. This includes the requirement that they undergo a PREA Audit by a certified Department of Justice Auditor every three years and provide the agency with a copy of the audit report. All contracted facilities are also subject to constant monitoring by the Contract Facility Coordinator. These Coordinators conduct inspections of the facilities to ensure they are in compliance with the contract. Contract monitoring is documented on the PREA Contract Compliance Monitoring Report, and as per policy is completed for each contracted facility between August 20 and October 31 of each year. During the interviews with the BCC Administration, they confirmed they also conduct inspections of the contracted facilities. During previous PREA Audits of contracted facilities I have conducted both the BCC Administration and the Contract Facility Coordinators would attend portions of the audit to include the facility tour and either the entrance meeting or exit meeting. I confirmed that the policy is in practice during the interviews with the BCC Administration, PREA Coordinator, and Contract Facility Coordinators. The audited facility has not entered into a contract for the housing of reentrants within the past 12 months.</p> <p data-bbox="242 1288 1497 1617">Subsection (b): DC-ADM 008 requires the PREA Compliance Division, in consultation with the Bureau of Community Corrections Contract Facility Coordinator, to monitor each contract agency's compliance with the PREA Standards, this is completed between August 20 and October 31 of each audit year. In the years in which a facility completes an official PREA audit, the final audit report satisfies the monitoring requirement for that year and must be made available to the Department of Corrections. Bureau of Community Corrections Contract Compliance Monitoring Reports and corresponding DOJ PREA Audits were submitted for review and indicated compliance with the standards and DC-ADM 008. During the years in which an audit is not completed, the contracted monitoring form is completed. The DC-ADM 008 requires the Department of Corrections completed contract monitoring for PREA compliance by October 31. The PREA Coordinator also confirmed that contracted agencies submit the audit reports as soon as they receive it. The Department of Corrections monitors any corrective action in which the agencies are addressing with the auditor.</p> <p data-bbox="242 1646 1485 1809">Subsection (c): Since August 2012, the Department of Corrections has not entered into a contract with an agency that fails to comply with the PREA standards. According to DC-ADM 008, only in emergency circumstances can the Department of Corrections enter into a contract with an agency that has not followed the PREA standards, and all unsuccessful attempts to gain compliance have been documented. The BCC Administration interviews confirmed that in the past, the agency had terminated contracts for failure to comply with the PREA Standards.</p> |

| | |
|---------|---|
| 115.213 | Supervision and monitoring |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 520 300">Documentation reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1417 450">DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 3 - Sexual abuse/Sexual Harassment Prevention - Supervision and Monitoring</p> <p data-bbox="242 479 1222 508">8.3.1, Bureau of Community Corrections Security Procedures Manual Section 15 - Facility Staffing</p> <p data-bbox="242 537 1187 566">Staffing Plan & PREA Report for CCCs dated January 25, 2021, prepared by the Major of BCC</p> <p data-bbox="242 595 863 624">Staffing Plan & PREA Report for CCCs for 2017 through 2020</p> <p data-bbox="242 654 432 683">Monitor Schedules</p> <p data-bbox="242 763 1493 927">Subsection (a) DC-ADM 008 addresses supervision and monitoring of the reentrants at the facilities. The policy directs each facility to develop, document, and make its best efforts to comply on a regular basis with the staffing plan as found in policy 8.3.1. 8.3.1 provides for adequate levels of staffing, and where applicable, video monitoring, to protect reentrants from sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring the BCC takes into consideration the following:</p> <ol data-bbox="242 956 1171 1211" style="list-style-type: none"> 1) the physical size and layout of the facility; 2) number and type of offenders assigned to the facility; 3) video monitoring to protect offenders against sexual abuse; 4) the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and 5) any other factors. <p data-bbox="242 1240 1493 1503">Subsection (b) The auditor reviewed the staffing plan template, which is utilized to develop the staffing plan for each facility. The template takes into consideration all the factors outlined in 8.3.1. I further discussed the staffing plan development with the BCC Administration and confirmed that these factors are taken into consideration during the development of the staffing plan. During the interview with the Facility Director, they confirmed that the placement of the cameras throughout the facility is always being evaluated to enhance the overall facility safety. The staffing plan for the Philadelphia CCC is developed through the Bureau of Community Corrections and reviewed by the PREA Coordinator. The Philadelphia CCC staffing plan is predicated on the facility being at the full capacity of 70 male reentrants. The average number of daily reentrants for the past 12 months has been 33. During the onsite audit, the facility was housing 35 male reentrants.</p> <p data-bbox="242 1532 1493 1727">Subsection (c) Policy 8.3.1 dictates the Bureau Major or designee is responsible for conducting an annual review of the staffing patterns at every CCC and preparing a report with recommendations for staffing level and/or video monitoring equipment. I reviewed the Staffing Plan and PREA Report for CCCs for 2017 through 2021. These reports indicate that on an annual basis, the facility is assessing, determining, and documenting whether adjustments are needed to staffing plans, monitoring technologies, and other available resources. I further confirmed the assessment during the interview with the BCC Administration.</p> <p data-bbox="242 1756 1461 1852">The BCC has centralized the scheduling for all monitors at the CCCs. The scheduling is conducted by the Management Operations Center (MOC). This enables the BCC to continually monitor staffing at all the CCCs and ensure all facilities are always fully staffed.</p> |

| | |
|---------|---|
| 115.215 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire Policy and Procedures</p> <p>DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 8 - Sexual Abuse/Sexual Harassment Prevention - Limits to Cross-Gender Viewing and Searches</p> <p>DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 19 - Working with Transgender and Intersex Inmates</p> <p>8.3.1, Bureau of Community Corrections Security Procedures Manual Section 30 - Searches Signs posted in the facility for opposite gender announcements</p> <p>Subsection (a): Policy DC-ADM 008 prohibits cross-gender strip searches except in exigent circumstances. Policy 8.3.1 states the Bureau of Community Corrections staff are prohibited from conducting cross-gender strip searches. The policy outlines under what circumstances a strip search may be completed and how one is conducted. During the past 12 months, the facility has not conducted a cross-gender strip or cross-gender visual body cavity searches. I further confirmed during CCC Monitor interviews that they have never conducted a search of this nature, or have any knowledge of a search being conducted. They confirmed that as per training and policy, a strip search would be approved by the Facility Director, conducted by two same-gender staff members, and documented on the Offender Strip Search Log. During the onsite audit, I reviewed the Offender Strip Search Log and confirmed the searches are being documented. I further confirmed the procedure with the Facility Director during his interview.</p> <p>Subsection (b): As an agency, DC-ADM 008 prohibits cross-gender pat-down searches of female reentrants, except in exigent circumstances. Facilities are not allowed to restrict female reentrants access to programming and other out-of-cell opportunities in order to comply with the policy. Policy 8.3.1, further states that only female staff may conduct pat searches of female or transitioning female reentrants and those reentrants participating in programming and other opportunities cannot be restricted if female staff are not available for a search. If a search of a female reentrant is necessary to ensure the safety of the facility and female staff is not available, the facilities will contact local law enforcement for assistance. This process was confirmed by both the interviewed staff and reentrants. The facility is a male facility but has a population of non-resident reentrants that report to the facility to provide urines and meet with their counselor. These reentrants can be females and are subject to search.</p> <p>Subsection (c): As per policy strip searches are documented on the Bureau of Community Corrections Offender Strip Search Log. A completed log was reviewed during the onsite audit. The log documents the date, time, Offender DOC number, offender last name, two sets of staff initials, and if contraband was found. DC-ADM 008 states that if a cross-gender search is conducted, it must be documented using the Cross-Gender Search Validation Form. No cross-gender searches were conducted at Philadelphia CCC.</p> <p>Subsection (d): DC-ADM 008 states that reentrants shall be able to shower, perform bodily functions, and change clothing without a non-medical 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 or security round. This limitation not only applies to in-person viewing, but also all forms of remote viewing as well. The policy also states that staff of the opposite gender shall announce their presence when entering a reentrant housing area.</p> <p>During interviews with staff, and reentrants all confirmed whenever a female enters the housing unit floor, an announcement is made prior to entry onto the floor, and the staff will state loudly, "female on the floor." I viewed and heard the announcements being made while conducting the audit.</p> <p>Signs are also posted at the entry to every housing area as a reminder to female staff to announce upon entering. The bathrooms have curtains for the showers and separate stalls for each toilet. These stalls have an operational door. A sign designates the bathroom is the only location a reentrant may be unclothed.</p> <p>Subsection (e): Policy ADM-008 and 8.3.1 prohibits searches or physical examinations of transgender or intersex inmates for the sole purpose of determining the reentrants genital status. The policy further states that if the genital status is unknown, it may be determined during conversations with the reentrant, by reviewing medical records, or, if necessary, by learning the information through a broader medical examination conducted in private by a medical practitioner. It should be noted that all reentrants are coming into the Philadelphia CCC from another correctional setting, the staff confirmed they receive notice of</p> |

the reentrant's arrival date, and all pertinent information pertaining to the reentrant. The genital status would be known prior to the reentrants' arrival. All interviewed staff confirmed they are not allowed to search or physically examine any reentrant to determine genital status. A search of this nature has not taken place at Philadelphia CCC.

Subsection (f): The reviewed training records confirmed that all staff had completed the Offender Searches Training in 2021. This training included how to conduct cross-gender pat searches and searches of transgender and intersex reentrants in a professional and respectful manner and in the least intrusive manner possible. Training is conducted through the Department's Training Academy. I reviewed the training curriculum, confirming it includes policy and PREA Standard review and stresses the importance of being professional and respectful during the search and to conduct searches in the least intrusive manner possible consistent with security needs. All CCC Monitors interviewed confirmed having been trained on the proper searching techniques. During their interviews, they were able to describe these techniques and the importance of being professional and respectful during the search and to conduct searches in the least intrusive manner possible consistent with security needs.

115.216 Residents with disabilities and residents who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation reviewed:

Pre-Audit Questionnaire

DC-ADM 008, Prison Rape Elimination Act (PREA) Procedures Manual Section 4 - Sexual Abuse/Sexual Harassment Prevention - Access to Special Populations

BCC- ADM 005, Bureau of Community Corrections Resident legal Procedures Manual Section 1 - Reasonable Accommodations

Management Directive Subject: Hiring/Contracting Sign Language Interpreters/Transliterators Dated September 12, 2014

Photograph of Intake Handout written in Braille Viewed PREA Information in English and Spanish PROPIO LS LLC language Services Purchase Order

Over-the-phone Interpreting instructions

DOC Foreign Language Employee Directory

Reporting Sexual Abuse and Sexual Harassment notice written in Spanish

PREA Information handout written in Spanish Handbook written in Spanish

Foreign Language Employee Directory

Subsection (a) Policy DC-ADM 008 dictates that reentrants with disabilities have an equal opportunity to participate in or benefit from all aspects of the Department's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Written materials shall be delivered in alternative formats or delivered through alternative methods that accommodate a reentrants disability. These include translated Spanish materials and the intake handout in Braille. BCC-ADM 005 indicates that individuals with disabilities shall be assigned to a Community Corrections Center that provides reasonable accommodations according to the individual needs of the resident, including individuals diagnosed with mental or physical impairments. Facilities are required to evaluate their ability to receive and retain residents with disabilities according to policy. The Facility Director indicated that he evaluates the ability of the Philadelphia CCC to accommodate disabled reentrants according to services available, and the ability of the reentrant to access all areas of the facility. For example, the Philadelphia CCC has all reentrant housing on the upper floors and has no elevator access for disabled reentrants. Through BCC Administrative interviews and facility-level interviews, I confirmed that the agency had designated facilities to accommodate reentrants with specific needs such as blind reentrants, and disabled. During the Counselor and CCC Monitor interviews, I confirmed that they would read the material to reentrants if needed, and utilize the services provided by the agency to ensure the reentrant understands the PREA information and reporting avenues.

Subsection (b): DC-ADM 008 outlines the steps the Department takes to ensure meaningful access to all aspects of the Department's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to individuals who are limited English proficient. This includes written materials and interpretation services either through an outside contractor or approved staff. The facility provided copies of the Spanish PREA notices, and these were also viewed at the facility during the facility tour. The interviewed reentrants confirmed that the notices had been posted in both English and Spanish since their arrival at the facility. BCC-ADM 005, requires qualified staff or contractors to provide translation services for reentrants.

Pennsylvania Department of Corrections has an eight-page list of staff who are skilled in providing interpretation services. The list contains the staff name and work location and the interpretation service the staff is qualified to provide. Staff is available to interpret in over 55 foreign languages, dialects, and sign language. If staff is not available, the Department also contracts for over-the-phone interpretation services through PROPIO Language Services. Staff is provided direction on how to obtain this service. During the facility tour, the CCC Monitors provided me a copy of the instruction card, which is comprehensive and extremely easy to use.

Subsection (c) DC-ADM-008 and DC-ADM-005 prohibits the use of reentrants to interpret, read, or provide other types of assistance except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the reentrants safety, the performance of the first responder duties or the investigation of the reentrants allegations. If an inmate serves as an interpreter, the interpretation is to be documented. All staff interviewed stated they would not allow a reentrant to interpret for another reentrant in reporting sexual abuse or sexual harassment, and they felt that they could not

control the information once another reentrant knew about alleged sexual abuse or sexual harassment. They indicated they would utilize the translation services outlined in the policy or contact MOC for further guidance. During the past 12 months, Philadelphia CCC has not relied on reentrants to provide interpretation services for any PREA related matter.

| | |
|---------|--|
| 115.217 | Hiring and promotion decisions |
| | Auditor Overall Determination: Exceeds Standard |
| | <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Centralized Clearances Procedures Manual 1.1.4 Section 4 Centralized Clearances Procedures</p> <p>Pennsylvania Department of Corrections Application for Employment</p> <p>Human Resources and Labor Relations Procedures Manual 4.1.1 Section 40 Conducting Pre- Employment Background Investigations with Attachment 40-B, Attachment 40-c Position Vacancy interest Form</p> <p>Human Resources and Labor Relations Procedures Manual 4.1.1 Section 41 Employment of Job Applicants Having Prior Adverse Contacts with Criminal Justice Agencies</p> <p>Bureau of Community Corrections Security Procedures Manual 8.3.1 Section 31 Contractor and Volunteer Clearances</p> <p>Application and approval for CCC Monitor hired within past 12 months</p> <p>Human Resources and Labor Relations Procedures Manual 4.1.1 Section 3 Employee Arrests- Felony, Misdemeanor, or Summary Offenses</p> <p>Sample JNET Check</p> <p>Subsection (a) Policy 4.1.1 dictates that the Department of Corrections will not hire or promote anyone who:</p> <ul style="list-style-type: none"> • 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 to include state facilities for persons who are mentally ill, disabled or intellectually disabled, or chronically ill or handicapped; residential care or treatment facilities for juveniles; and facilities that provide skilled nursing, intermediate or long-term care, or custodial or residential cares; • has been convicted or civilly or administratively adjudicated for 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; and/or • has been convicted of any offense under the following or equivalent out of state offense: • Title 18 Pa C.S.A. Chapter 31 - Sexual offenses • Title 18 Pa C.S.A. Chapter 59 - public Indecency <p>Background investigations are conducted for all candidates for positions in the Department. This is a Central Office function and includes both Human Resources and the Office of Special Investigations and Intelligence (OSII). Human Resource Office is responsible for ensuring the candidate completes the Position Vacancy Interest Form and the application materials, sending the PREA Consent to Release of Information Form and the PREA Current/Prior Employer Letter, receiving, and reviewing completed forms and determining whether the applicant may be hired consistent with PREA. A review includes a criminal background check, licensing status, criminal justice documentation, and Pennsylvania State Police investigative files conducted by OSII. Investigation packets for potential candidates were reviewed. The packets contained detailed information including Consent to Release Information for Prison Rape Elimination Act Compliance, PREA Current/Prior Employer Letter, court records, and licensing documentation. Also included was the Personal Background Information form which includes the following questions:</p> <ul style="list-style-type: none"> • Have you ever been employed in a prison, jail, lockup, community confinement facility, juvenile facility or other institution (as defined in 42 U.S.C. 1997) to include state facilities for persons who are mentally ill, disabled or intellectually disabled, or chronically ill or handicapped; residential care or treatment facilities for juveniles; and facilities that provide skilled nursing, intermediate or long-term care, or custodial or residential care? • Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? • Have you had substantiated against you allegations of sexual abuse in a prison, jail, lockup, community |

confinement facility, juvenile facility, or other institution, or have you ever resigned during a pending investigation of an allegation of sexual abuse of a confined individual?

The Department also conducts PREA background checks for all contractors and volunteers utilizing the PREA Questionnaire and Consent to Release PREA Information. According to policy 8.3.1, prior employment in any type of confinement facility will be further investigated to ensure that the candidate has not been found to have any of the following:

- engaged in sexual abuse in a prison, jail, lockup, community confinement facility, halfway house, group home, inpatient treatment facility, correctional institution, or juvenile detention facility;
- has been convicted of engaging or attempted 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; and/or
- has been civilly or administratively adjudicated to have engaged in the activity described above.

Subsection (b) According to policy and procedures, in addition to incidents of sexual abuse, the Department also considers any incidents of sexual harassment in determining whether to hire or promote anyone. Question G. under General Information of the Application for Employment asks " have you had substantiated allegations of sexual harassment in the workplace against you, or have you ever resigned during a pending investigation of sexual harassment.

Subsection (c) Policy 4.1.1 indicates that background checks are completed by the Office of Special Investigations and Intelligence (OSII) for all prospective new hires and rehires that have been separated for more than 60 days. The background check includes driving record, Pennsylvania State Police investigative file, licensing, military records, criminal justice documentation, and drug related convictions. Additionally, contact is made with current and prior employers. Human Resource staff confirmed that OSII in Central Office completes background checks. During the past twelve months, no staff were hired at Philadelphia CCC.

Subsection (d) No contractors or volunteers have been hired at Philadelphia CCC during the past twelve months. According to policy 8.3.1 every person, volunteer, or contractor, who provides recurring on-site services and has individual/group contact with reentrants at a CCC, are not allowed contact with reentrants until they:

- submit to a criminal background check by completing the Community Corrections Application electronically and submitting it to the Facility Director or designee
- submit to a Prison Rape Elimination Act (PREA) background check by electronically completing the PREA Questionnaire and Consent to Release PREA Information and submitting the forms to the Facility Director or designee
- receive clearance from the Department after an investigation and criminal history check. Criminal background records checks are maintained in the Centralized Clearance database for staff and contractors.

Subsection (e) Pennsylvania Department of Corrections utilizes the Justice Network (JNET) System to cross check all employees daily to identify employees that have had negative contact with law enforcement. It is the employee's responsibility to report such contact to their supervisor as soon as possible and no later than the employee's next scheduled workday. The use of the JNET system was confirmed through interviews with Human Resources and the facility Director. According to policy contractor and volunteer clearance is valid for a maximum of 24 months; however, policy 8.3.1, requires an annual clearance update conducted on every individual who received clearance and continues to provide services.

Subsection (f) Current employees of the Department of Corrections complete the Position Vacancy Interest Form when seeking other employment within the Department. Any individual new to the Department of Corrections seeking employment complete the Application for Employment. Individuals are required to complete the questionnaire, leaving no blank spaces. The Application for Employment includes a Consent to Release Information for Prison Rape Elimination Act Compliance. The Application and the Position Vacancy Interest Form both require the applicant to answer PREA related questions regarding prior employment in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution to include state facilities for persons who are mentally ill, disabled, or retarded, or chronically ill or handicapped; residential care or treatment facilities for juveniles; and facilities that provide skilled nursing, intermediate or long term care or custodial or residential care and while employed in such a capacity has the applicant:

- engaged in sexual abuse,
- had a substantiated allegation of sexual abuse or sexual harassment against the applicant, or
- resigned during an investigation for sexual abuse or sexual harassment or

- been convicted, civilly or administratively adjudicated for 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.

A new applicant is also asked if the applicant is current or former military personnel and during the military service did the applicant's duties include the supervision of prisoners or detainees.

Subsection (g) Applicants for employment are required to affirm and sign the Application for Employment, indicating the information contained in the application and any attachments contain no misrepresentation or falsification, omission or concealment of material fact and is true and complete to the best of the applicant's knowledge and belief. The applicant must also acknowledge that any material omission or false information is grounds for non-selection or discipline, or termination of employment. According to Section 31 of policy 8.3.1, Contractor and Volunteer Clearances, contractors and volunteers will not be granted clearance with the Department if the candidate deliberately falsified or omitted pertinent information, including PREA related misconduct on the Community Corrections Clearance Application or PREA Questionnaire. Additionally, 1.1.4 Section 4 requires the contractor or volunteer to complete the Centralized Clearance Check Information Request Form. This form contains the signature line in which the candidate acknowledges that the candidate completed the form and agrees that the information contained on the form is accurate. According to 1.1.4, any falsified information will be grounds for clearance disapproval or possible criminal prosecution. 4.1.1 Human Resources and Labor Relations Procedures Manual requires the Human Resource Office to designate a PREA Employment Verification Coordinator to:

- respond to requests by researching the employees' Official Personnel File for disciplinary actions relating to PREA and contacting the facility's Security Office for any additional relevant information;
- records the results of the research on the supplied document;
- return the information to the requester within one week of receiving the request.

Subsection (h) Staff interviewed stated that Pennsylvania DOC provides information on substantiated allegations of sexual abuse or sexual harassment involving a former employee when the information is requested from an institutional employer for whom the employee has applied to work.

The agency is far exceeding the standards by having in place a system where they will be notified of any change in an employee's criminal history status. This practice not only negates the 5-year criminal history check and exceeds the requirements of the standards. The agency is also conducting criminal history checks yearly on recurring volunteers and contractors.

| | |
|---------|--|
| 115.218 | Upgrades to facilities and technology |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 518 300">Documentation reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1473 450">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 6- Sexual Abuse/Sexual Harassment Prevention-Upgrades to Facilities and Technologies</p> <p data-bbox="242 479 1418 542">Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 3- Facility Design, Operation, and Access</p> <p data-bbox="242 571 1490 633">Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 6- Community Corrections Center (CCC) Maintenance, Repair, and Construction</p> <p data-bbox="242 663 1453 725">Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 42- Closed Circuit Television (CCTV) Monitoring and Recording</p> <p data-bbox="242 804 1484 1205">Subsection (a) Policy DC-ADM 008 addresses the design and upgrades of CCCs under the Bureau of Community Corrections. The policy directs the Bureau of Community Corrections to follow Department policy 8.3.1 for facility design and upgrades, the policy further states that Department policy 8.3.1 section 42 will be followed for any video monitoring systems and upgrades. DC-ADM 008 further dictates that the PREA Coordinator or the facility PREA Compliance Manager's involvement in the decision-making process shall be documented in meeting minutes, memorandum, or other written format. Policy 8.3.1 Section 3 outlines the requirements for the construction and layout of a Community Correction Center. These requirements include construction components such as adequate space, lighting, entrances, and exits, and security components. The policy also states that any facility that provides cross- gender housing a physical barrier must be in place between the housing areas, and the facility must provide a secure area without video surveillance for strip searches and urinalysis screenings. Policy 8.3.1 Section 6 requires the Deputy Director of Facilities Management/designee ensures the PREA Coordinator and/or facility PREA Compliance Manager is involved with all new construction projects and/or changes to a current facility.</p> <p data-bbox="242 1234 1473 1395">During the interview with the Facility Director/PREA Compliance Manager, he stated that the facility has not upgraded or changed the design. He did note that if a change was being considered, he would be in the decision-making process to ensure the effectiveness of the modification upon the facility's ability to protect reentrants from sexual abuse is taken into consideration. The PREA Coordinator confirmed that he would be notified of any modification or change at any Department facility, and his opinion would be taken into consideration.</p> <p data-bbox="242 1424 1490 1787">Subsection (b) Policy 8.3.1 section 42 requires the Department to consider how such technology may enhance the Department's ability to protect residents from sexual abuse. Policy DC-ADM 008 addresses the design and upgrades of CCCs under the Bureau of Community Corrections. The policy directs the Bureau of Community Corrections to follow Department policy 8.3.1 section 42 will be followed for any video monitoring systems and upgrades. DC-ADM 008 further dictates that the PREA Coordinator or the facility PREA Compliance Manager's involvement in the decision-making process shall be documented in meeting minutes, memorandum, or another written format. During the BCC Administration, Facility Director, and PREA Coordinator interviews, I confirmed that they are constantly taking the overall safety of the reentrants into consideration when touring a facility. If any expansion or modification was planned the overall safety, including the sexual safety of the reentrants, is taken into consideration. They further confirmed that all PREA incidents are reviewed at the Administration level, and they are always taking into consideration possible technology changes that can better prevent incidents from occurring.</p> |

| | |
|---------|---|
| 115.221 | Evidence protocol and forensic medical examinations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 1- Sexual Abuse/Sexual Harassment Prevention-Responsibilities Section 14- Responding to Reports of Sexual Abuse</p> <p>Section 15- Access to Outside Confidential Support Services</p> <p>Section 18- Investigating Allegations of Sexual Abuse and/or Sexual Harassment Memorandum between the Pennsylvania Department of Corrections and Pennsylvania State Police dated February 16, 2017, with an amendment to include 26 Lockup Facilities operated by the Pennsylvania Board of Probation and Parole</p> <p>Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 24- BCC Evidence Control</p> <p>National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents Second Edition</p> <p>Pennsylvania Victims Compensation Assistance Program Manual for Compensation Assistance</p> <p>MOU with Drexel University College of Medicine</p> <p>Letter of agreement with Women Organized Against Rape (WOAR)</p> <p>Subsection (a) The agency is responsible for all administrative investigations at Philadelphia CCC, all investigations of a criminal nature are investigated by the Pennsylvania State Police. Policy DC-ADM 008 addresses the agency's obligation to follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The policy directs staff to follow the initial Response Checklist and the Instructions for PREA Evidence Retention, which are contained within section 14. The Response Checklist and the Instructions for PREA Evidence Retention outlines the uniform evidence protocol, which is designed to maximize the retention/collection of usable evidence. The Pennsylvania State Police follows a uniform protocol which maximizes evidence identification, collection, and retention, and far exceeds any requirements of the PREA Standards. During interviews with the Facility Investigator and BCC Administration, I confirmed that they follow the protocols outlined in the policy. The Philadelphia CCC has not had any investigations during the audit period, although I have reviewed agency-wide investigations and found that they follow the policy and a uniformed evidence protocol.</p> <p>Subsection (b) I confirmed through review of policy DC-ADM 008 and interviews that the protocols were developed from the National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents Second Edition, dated April 2013. It should be noted that the Commonwealth of Pennsylvania utilizes Child Advocacy Centers for all child victims (under the age of 18). The protocols developed by the Pennsylvania Chapter of Children's Advocacy Centers and Multidisciplinary Teams are developed also utilizing the National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents Second Edition, dated April 28, 2013.</p> <p>Subsection (c) Policy DC-ADM 008 Section 1 dictates that an alleged sexual abuse victim is provided access to a forensic medical examination as outlined in Section 14. Section 14 further describes the procedure to obtain the services of a hospital to provide these examinations. The Philadelphia CCC has entered into a MOU with Drexel University College of Medicine, to provide these services. The Sexual Assault Nurse Examiner at the hospital will conduct a sexual assault examination. These services are provided at no cost to the victim under Pennsylvania Law. This is outlined in the Pennsylvania Victims Compensation Assistance Program Manual for Compensation Assistance. I contacted a supervisor at Drexel University College of Medicine and verified that the services outlined in the letter of agreement are offered at the hospital and are at no cost to the victim.</p> <p>Subsection (d)(e) DC-ADM 008 section 15 directs the facility PREA Compliance Manager to coordinate victim services related to sexual abuse. The Philadelphia CCC has entered into a letter of agreement with the YWCA Greater Philadelphia to provide these services. A qualified victim advocate will accompany and support the victim through the forensic medical examination process and investigatory interviews and provide emotional support, crisis intervention, information, and referrals if needed. The facility PREA Compliance Manager stated that a victim would be provided the information for these services and can contact them at any time. The reentrants at the facility can leave the facility and have private cellular telephones. The facility provides a payphone for those without a cellular telephone. I contacted the Women Organized Against Rape (WOAR)</p> |

and verified they provide the services as outlined in the letter of agreement, and they further informed me that due to confidentiality, if these services were provided, they would not provide me that information.

Subsection (f) (g) The Pennsylvania State Police investigates the criminal incidents that occur at the facility. The Department holds a Memorandum of Understanding with the Pennsylvania State Police (a state entity) to conduct the criminal investigations, the MOU outlines the responsibilities of the State Police and ensures they follow the subsections of the standard. I contacted the Pennsylvania State Police Bureau of Criminal Investigation and confirmed that the State Police would follow the MOU.

Subsection (h) The agency does not utilize staff members for victim advocacy; this was confirmed with the PREA Coordinator.

No incidents of sexual abuse or sexual harassment were reported at the facility where these services were utilized or needed to be utilized. The facility has not had any incidents reported within the past 12 months.

| | |
|---------|---|
| 115.222 | Policies to ensure referrals of allegations for investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 18- Investigating Allegations of Sexual Abuse and/or Sexual Harassment</p> <p>Memorandum between the Pennsylvania Department of Corrections and the Pennsylvania State Police dated February 16, 2017, with an amendment to include 26 Lockup Facilities operated by the Pennsylvania Board of Probation and Parole</p> <p>Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 24- BCC Evidence Control Section 35- Investigations</p> <p>Bureau of Community Corrections and Lockup PREA Report-Sexual Abuse</p> <p>Subsection (a)(b)(c) The agency is responsible for all administrative investigations at Philadelphia CCC, all investigations of a criminal nature, are investigated by the Pennsylvania State Police. Policy DC-ADM 008 states that every report, complaint, or allegation of sexual abuse and sexual harassment, including uninvolved parties and anonymous reports, shall be investigated promptly, thoroughly, and objectively. Investigations shall be conducted in accordance with all related Department policies and Prison Elimination Act Standard. Policy 8.3.1 outlines the investigative steps to be taken; initially all investigations are reported to the Office of Special Investigations and Intelligence (OSII) for tracking, utilizing the Sexual Abuse Coversheet; this is completed via email. The agency trained investigators will begin an administrative investigation, if the incident is criminal in nature, the administrative investigation will stop, and the Pennsylvania State Police will be notified, this notification is documented in the written report. The Major and Captain of the Bureau of Community Corrections are notified of the investigation and the investigations are tracked by them as well. The agency policy for investigations is available to the public on the agency website at https://www.cor.pa.gov. The policy outlines the responsibilities of the agency and the Pennsylvania State Police.</p> <p>Subsection (d) Policy 8.3.1 governs the agency's conduct while conducting the administrative investigations. The Pennsylvania State Police, a State entity, has confidential policies and procedures in place that govern the conduct of criminal investigations. These policies were reviewed by me during my employment with the Pennsylvania State Police, and these policies address all aspects relating to criminal investigations of sexual abuse and sexual harassment in confinement settings. During the interviews with the Agency Investigators, they confirmed that they follow the conduct outlined in the policy. This was further confirmed by a review of investigations at the agency level.</p> |

| | |
|---------|---|
| 115.231 | Employee training |
| | Auditor Overall Determination: Exceeds Standard |
| | <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11- Sexual Abuse-Sexual Harassment Prevention Training-Education</p> <p>Course Lesson Plan Cover Sheet with Course Lesson Plan</p> <p>PREA Training and Professional Boundaries Training</p> <p>2019 Policy Update Training</p> <p>PREA Essentials 2018 web-based training</p> <p>Training Transcripts for Staff assigned to the Philadelphia CCC</p> <p>Basic Training PowerPoint 2021 with notes</p> <p>Subsection (a)(b)(c)(d) Policy DC-ADM 008 Section 11 outlines the agencies employee training. The policy states that staff at all Department facility types shall receive standardized Basic Training and Refresher Training curriculum that addresses or exceeds the Prison Rape Elimination Act (PREA) Standards requirements for each facility type. The PREA Compliance Manager (PCM), in conjunction with the Training Coordinator at each facility type, shall ensure that all employees who have contact with inmates receive the following training:</p> <ol style="list-style-type: none"> (1) the zero-tolerance policy against sexual abuse and sexual harassment within the Department; (2) how staff are to fulfill their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures as defined in this policy; (3) inmates' right to be free from sexual abuse and sexual harassment; (4) the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) the dynamics of sexual abuse and sexual harassment in confinement; (6) the common reactions of sexual abuse and sexual harassment victims; (7) how to detect and respond to signs of threatened and actual sexual abuse; (8) how to avoid inappropriate relationships with inmates; (9) how to communicate effectively and professionally with inmates, including Lesbian, Gay, Bisexual, Transgender, and Intersex (LGBTI) or gender-nonconforming inmates; and (10) how to comply with relevant laws of Pennsylvania related to mandatory reporting of sexual abuse to outside authorities. <p>During even-numbered years, PREA education is provided in the form of a refresher of the initial basic staff training information for all staff members. During odd-numbered years, PREA education is provided in the form of an update to Policy DC-ADM 008 for all staff members to ensure knowledge of the agency's current sexual abuse and sexual harassment policies and procedures. The training is tailored to the gender of the reentrants at the facility. All staff members acknowledge that they have received and understand the training by completing the PREA Training and Understanding Verification Form. I confirmed through interviews with the staff at the facility that they have received the training as outlined above, and all staff was able to explain the training and policy. I further verified the training by reviewing the training transcripts for the staff assigned to the Philadelphia CCC. The training materials utilized for training were reviewed, I found that the training exceeds the requirements of the standards. The Facility Director further confirmed that they would frequently discuss PREA during staff meetings to ensure the facility is meeting all requirements of the standards.</p> |

| | |
|---------|--|
| 115.232 | Volunteer and contractor training |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 210 451 235">Auditor Discussion</p> <p data-bbox="242 271 499 295">Documentation reviewed:</p> <p data-bbox="242 329 485 353">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1485 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11- Sexual Abuse-Sexual Harassment Prevention Training-Education with Attachment 11-C</p> <p data-bbox="242 479 1018 504">Signed PREA Training and Understanding Verification Form Attachment 11-A</p> <p data-bbox="242 535 1490 862">Subsection (a)(b)(c) Policy DC-ADM 008 Section 11 outlines the agency's contractor and volunteer training. The policy states that contractors and volunteers who have contact with inmates (to include contract service providers, public visitors, or Non-Department Employees) shall receive training on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The policy further states that they shall be trained during orientation sessions and annual training reflective of the level of contact that they have with inmates. The policy further outlines the level of training a contractor or volunteer must-have, this is dictated by the level of inmate contact they have. The policy states that if they have contact for 5 hours or more per week, they receive the same training as employees. If the contact is less, they will receive an orientation that includes information on the Department's zero-tolerance policy and their responsibilities under the policy. All contractors and volunteers acknowledge they received and understand the training by completing the PREA Training and Understanding Verification Form.</p> <p data-bbox="242 896 1477 1021">During the audit, I reviewed the completed PREA Training and Understanding Verification Forms for the contractors who enter the Philadelphia CCC. I verified with the Facility Director that he or a monitor will provide the training to the contractors at the facility level. I reviewed the training materials utilized. I found them to be extremely comprehensive and outlined the Department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.</p> |

| | |
|---------|---|
| 115.233 | Resident education |
| | <p data-bbox="242 145 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 518 300">Documentation reviewed:</p> <p data-bbox="242 327 486 356">Pre-Audit Questionnaire</p> <p data-bbox="242 383 1484 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11- Sexual Abuse-Sexual Harassment Prevention Training-Education with:</p> <p data-bbox="242 474 1428 539">Attachment 11-D (PREA Inmate Intake Handout) Attachment 11-E (Inmate Education Facilitators Guide) Signed PREA Education Receipt for Reentrants</p> <p data-bbox="242 566 1460 595">Signed Sexual Abuse Awareness Handout Receipt for Reentrants Zero Tolerance Reporting posters English and Spanish</p> <p data-bbox="242 622 1013 651">Signed PREA Training and Understanding Verification Form Attachment 11-A</p> <p data-bbox="242 678 686 707">PREA Inmate Education 2020 SPANISH.pdf</p> <p data-bbox="242 734 542 763">Inmate Education Booklet.pdf</p> <p data-bbox="242 790 510 819">PREA Education 2020.pdf</p> <p data-bbox="242 846 566 875">Education Booklet - Spanish.pdf</p> <p data-bbox="242 969 1484 1335">(a)(b)(c)(d)(e) During the intake process, reentrants receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and information on agency policies and procedures for responding to such incidents. This procedure is outlined in DC-ADM 008 Section 11. The Facility Director and staff confirmed that the reentrants receive the PREA Inmate Intake Handout, which is provided by a staff member at intake. The reentrant will confirm receipt by signing the PREA Reentrant and Detainee Intake Handout Receipt. They further confirmed if a reentrant is limited English proficient, deaf, visually impaired, or otherwise disabled as well as residents who have limited reading skills, the information will be provided as outlined in standard 115.216. This education would be provided on an individual basis by a staff member. During the Agency Level interviews, I confirmed that the education is provided at each facility, so if a reentrant was transferred to a different facility, they would receive the information.</p> <p data-bbox="242 1361 1380 1426">During the facility tour, I confirmed the key information is readily available to the reentrants through posters located throughout the facility. These posters are in both English and Spanish.</p> <p data-bbox="242 1453 1460 1581">During the reentrant interviews, I confirmed they are receiving the information upon intake, they also confirmed the information is posted throughout the facility and has been since they arrived. All the interviewed reentrants confirmed that they also viewed a video on PREA shortly after arriving at the facility. They also confirmed they were asked if they had any questions.</p> <p data-bbox="242 1608 1484 1805">The Philadelphia CCC has a population of reentrants that are non-residents, but they do report to the facility to meet with the Counselor or provide a urine sample. These reentrants are also educated on PREA. They will receive the PREA Inmate Intake Handout, which is provided by a staff member at intake. The reentrant will confirm receipt by signing the PREA Reentrant and Detainee Intake Handout Receipt. The facility staff informed me that since these reentrants do enter the facility, they wanted to ensure they were educated on PREA and were held to the same expectations as the other reentrants who reside at the facility.</p> |

| | |
|---------|--|
| 115.234 | Specialized training: Investigations |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11- Sexual Abuse-Sexual Harassment Prevention Training-Education</p> <p>Sexual Assault Investigators Training PowerPoint 2017</p> <p>Employee Training Transcript for Investigators</p> <p>Subsection (a)(b)(c) Policy DC-ADM 008 outlines the training for staff who are assigned to investigate sexual abuse and sexual harassment in confinement settings. It dictates that all investigators must complete the basic PREA and refresher training prior to the investigator's training. This specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Upon completion of the training the Training Transcript of the staff member is updated to indicate they have received the required training to conduct investigations.</p> <p>During the audit process, I reviewed the training material utilized for the Investigators Training, the training includes all required topics outlined in the standard.</p> <p>During the interviews with agency investigators, I found them to be extremely knowledgeable in the investigation process and techniques. More importantly, they are fully aware of the limitations when conducting the administrative investigation and will stop and immediately contact the Pennsylvania State Police if the investigation appears to be criminal. The audited facility did not have any investigations during the auditing period, but I have had the opportunity to review several agency investigations. I found the investigations comprehensive and informative.</p> |

| | |
|---------|---|
| 115.235 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>DC-ADM 008 Section 11 Sexual Abuse-Sexual Harassment Prevention -Training-Education.docx</p> <p>08.01.01 Section 05 Resident Procedures (All facilities wo medical services).doc</p> <p>1 PREA Specialized Medical and Mental Health 2018.pdf</p> <p>Participant Guide PREA for Med-MH.docx</p> <p>PREA Specialized Medical and Mental Health 2019</p> <p>Subsection(a)(c)(d) Policy DC-ADM 008 outlines the training for all full and part-time medical and mental health care practitioners who work regularly in the facilities. The policy states that they will be trained in, or provide proof that they have been trained prior to providing service to the facility in the following areas:</p> <ul style="list-style-type: none"> a. how to detect and assess signs of sexual abuse and sexual harassment b. how to preserve physical evidence of sexual abuse c. how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and d. how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. <p>There are no medical or mental health care staff on site at Philadelphia CCC nor are there contracted services provided to reentrants at Philadelphia CCC. Reentrants receive medical and mental health care in the community.</p> <p>All contractors who provide more than 5 hrs. of service per week, and all employees receive the training outlines in standard 115.231.</p> <p>Subsection (b): Forensic Examinations are provided at Drexel University College of Medicine.</p> |

| | |
|---------|---|
| 115.241 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 9- Sexual Abuse-Sexual Harassment Prevention Screening for Risk of Victimization and Abusiveness</p> <p>PREA Risk Assessment Tool user guide</p> <p>PREA Risk Assessment Tool Training PowerPoint 2019 PRAT Assessments</p> <p>PRAT Tracking spreadsheet</p> <p>Completed PRAT tools</p> <p>Subsection (a)(b)(c)(d)(e)(f) Policy DC-ADM008 Section 9 outlines the procedure to conduct screenings within 72 hours for all reentrants that enter the facility, and upon transfer to another facility. The agency utilizes the PREA Risk Assessment Tool (PRAT), which is an objective screening instrument developed to identify reentrants that are at high-risk for victimization or abusiveness. The PRAT considers at a minimum:</p> <ul style="list-style-type: none"> • whether the inmate has a mental, physical, or developmental disability; • the age of the inmate; • the physical build of the inmate; • whether the inmate has previously been incarcerated; • whether the inmate's criminal history is exclusively nonviolent; • whether the inmate has prior convictions for sex offenses against a child or an adult; • whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; • whether the inmate has previously experienced sexual victimization; • the inmate's own perception of vulnerability; and • whether the inmate is detained solely for civil immigration purposes. <p>The screening also considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, to assist assessing reentrants. The screening at the Philadelphia CCC is conducted by the Counselors at the facility. During the interviews, I found that all Counselors and the Director are trained to conduct screening if needed. During the interviews they stated that they would see the reentrant either upon arrival or the next morning if he comes in after they are gone. The normal process is to bring the reentrant to their office and conduct the screening with them in private. The information will be entered into the PRAT Tracker which they utilize to track the screenings to ensure a second assessment is conducted between 20 and 30 days. The second assessment is also conducted in person.</p> <p>Subsection (g) Both the Counselors and the Facility Director stated that a reentrant would be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness. They further confirmed that they had not assessed a reentrant under any of these conditions in the past 12 months.</p> <p>Subsection (h) Policy DC-ADM 008 prohibits disciplining any reentrant for refusing to answer, or for not disclosing complete information in response to questions asked during the screening. The Facility Director confirmed they had not disciplined anyone for not answering the questions on the screenings.</p> <p>Subsection (i) The agency has implemented controls on the completed PRAT. The PRAT is stored electronically in a secure system that limits access to general staff. I confirmed with the staff at the facility that the only staff who have access to the information are the Facility Director and Counselors.</p> |

During the reentrant interviews I confirmed they were screened during the intake process, and within 30 days of being at the facility.

I reviewed the completed screenings for twenty of the reentrants, and I reviewed the tracking tool for the facility, which listed all reentrants. All reentrants had been screened within 72 hrs., and a second screening was completed within 30 days.

| | |
|---------|---|
| 115.242 | Use of screening information |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 518 300">Documentation reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1474 450">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 9- Sexual Abuse-Sexual Harassment Prevention Screening for Risk of Victimization and Abusiveness</p> <p data-bbox="242 479 1485 542">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 19- Sexual Abuse-Sexual Harassment Prevention Working with Transgender and Intersex Inmates PREA Accommodation Committee Checklist</p> <p data-bbox="242 571 703 600">Completed gender review committee checklist</p> <p data-bbox="242 629 1249 658">PREA Accommodation Committee Reassessment Checklist PREA Risk Assessment Tool user guide</p> <p data-bbox="242 687 1007 716">PREA Risk Assessment Tool Training PowerPoint 2019 PRAT Assessments</p> <p data-bbox="242 745 528 775">PRAT Tracking spreadsheet</p> <p data-bbox="242 804 475 833">Completed PRAT tools</p> <p data-bbox="242 913 1485 1108">Subsection (a)(b) Policy DC-ADM008 Section 9 outlines the procedure to utilize the information received from the PRAT to inform housing, bed placement, work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. During the interviews with the Facility Director and Counselors, they stated that these decisions are made on an individualized basis. They could assign the reentrants to rooms that are closer to the officer's station to ensure the reentrant is monitored closely. They also can house in a smaller room, if need be, to ensure overall safety.</p> <p data-bbox="242 1137 1485 1570">Subsections (c)(d)(e)(f) DC-ADM 008 states that the Department considers on a case-by-case basis whether a placement would ensure the health and safety of all impacted reentrants and whether the placement or accommodation could potentially present management or security problems when assigning a transgender or intersex reentrant to a facility that is consistent with the reentrant's gender identity and in making other privacy, housing, and programming assignments. When transferred to a facility, transgender or intersex reentrants are reviewed by the PREA Accommodation Committee (PAC) to make individualized determinations regarding privacy, housing, and programming assignments to ensure their safety at the current facility. Participants in the review consider all aspects of the reentrant's social and medication transition. Reentrants are invited to participate in the PAC meetings. The reviews are documented by using the PREA Accommodation Committee (PAC) checklist and the PREA Accommodation Committee Reassessment Checklist which is completed at a 6-month review. By policy, transgender and intersex reentrants are given the opportunity to shower separately and privately from other reentrants. At the Philadelphia CCC, a transgender reentrant would be able to utilize one of the showers during a specific time, and would be the only reentrant allowed in the shower at the time. The interviewed monitors related that they would accomplish this by allowing the reentrant to shower during count.</p> <p data-bbox="242 1599 1469 1794">During agency level and the Facility Directors interviews I confirmed the procedures outlined above. As per policy, the agency does not place transgender or intersex reentrants in dedicated facilities, units, or wings solely based on such identification or status, unless such a placement is in connection with a consent decree, legal settlement, or legal judgment for the purposes of protecting such reentrants. The CCC, in coordination with the Bureau of Community Corrections Administration and the Office of Population Management will strive not to place transgender and intersex reentrants in dedicated facilities.</p> <p data-bbox="242 1823 1453 1917">During the PREA Coordinator interview, I confirmed PADO is not under any legal action or consent decrees. I confirmed that every facility in BCC can safely house transgender inmates; the agency does not have a dedicated CCC to house transgender or intersex reentrants.</p> |

| | |
|---------|---|
| 115.251 | Resident reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11- Sexual Abuse-Sexual Harassment Prevention Training with attachments 11-D and 11-H</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Sexual Abuse-Sexual Harassment Prevention Reporting Sexual abuse and Sexual Harassment with Attachment 12-C</p> <p>2017 Inmate Handbook</p> <p>2018 Basic Training PowerPoint</p> <p>PREA Policy Updates</p> <p>Public Website</p> <p>Subsection (a) and (b) DC-ADM 008 requires all staff, contractors, volunteers, and reentrants to report knowledge or suspicion of sexual abuse, sexual harassment, retaliation by other reentrants or staff for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. The policy provides a number of ways in which reentrants may report allegations of sexual abuse, sexual harassment, retaliation and staff neglect or violation of responsibilities that may have contributed to such incidents. DC-ADM 008 lists the following reporting avenues:</p> <ul style="list-style-type: none"> · Tell any staff member to immediately report the incident · Tell any supervisor or manager to immediately report the incident · Make a written request to any staff member, supervisor or manager · Send a written report to the third-party reporting address established with the Office of State Inspector General (OSIG): <ul style="list-style-type: none"> ATTN: PREA Coordinator Office of State Inspector General 555 Walnut Street, 8th Floor Harrisburg, PA 17101 · Have your family call to notify the facility or contact OSIG <p>The same information is provided to reentrants in the issued Inmate Handbook and the PREA Inmate Intake Handout, which is given to all reentrants at the time of intake at the facility. The reporting information is also posted throughout the facility, and daily PREA announcements are made on each shift at the facility, these announcements include reporting avenues. During the staff and reentrant interviews, I confirmed that they are familiar with the reporting avenues and understood how to report. They further understood that the reports could be made anonymously and through a third party.</p> <p>Subsection (c): DC-ADM 008 requires all staff to accept and document reports made verbally, in writing, anonymously, and from uninvolved parties. The procedure further requires staff to promptly forward the information to the facilities designated investigators, which for the BCC is coordinated through the Bureau of Community Corrections - Management Operations Center (BCC-MOC). All reports are immediately documented and retained in the investigative file. The staff understood the requirements under the policy, and all stated that they would notify the MOC and the facility director.</p> <p>Subsection (d): Staff are trained during the PREA Basic Training PowerPoint and the update training, that they have the option to privately report an allegation of sexual abuse, sexual harassment, or retaliation through writing an anonymous letter according to policy, or reporting privately to the PREA Coordinator or Facility PREA Compliance Manager. The interviewed staff understood the reporting avenues available to them, and they knew they could report to the Agency PREA Coordinator</p> |

or the Facility PREA Compliance Manager. All staff indicated that they would report to the Facility PCM.

| | |
|---------|--|
| 115.252 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Sexual Abuse-Sexual Harassment Prevention Reporting Sexual abuse and Sexual Harassment</p> <p>Policy BCC-ADM 003 Community Corrections Resident Grievances Procedures Manual Section 1 Grievance Reporting</p> <p>Subsection (a) DC-ADM 008 states that inmates shall not utilize the inmate grievance system to report sexual abuse or sexual harassment by a staff member or inmate-on-inmate sexual abuse, as defined in the Glossary of Terms for this procedures manual. However, if an inmate files a grievance related to staff-on-inmate sexual abuse/sexual harassment or inmate-on-inmate sexual abuse, the Facility Grievance Coordinator shall reject the grievance and forward it to the facility Security Office in SCIs or the BCC-MOC in CCCs, CCFs, and Lockups, in addition to the PCM/designee for tracking and investigation. The inmate shall be notified of the rejection and forwarding of the allegation for investigation. During the interview with the Facility Director, he confirmed this procedure.</p> |

| | |
|---------|---|
| 115.253 | Resident access to outside confidential support services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 11- Sexual Abuse-Sexual Harassment Prevention Training with attachments 11-D and 11-E Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Sexual Abuse-Sexual Harassment Prevention Reporting Sexual abuse and Sexual Harassment with attachment 12-C</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 14- Sexual Abuse-Sexual Harassment Prevention Responding to Reports of Sexual abuse with attachment 14-J</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 15- Sexual Abuse-Sexual Harassment Prevention Access to Outside Confidential Support Services</p> <p>Letter of Agreement with Women Organized Against Rape (WOAR)</p> <p>Subsection (a)(b) DC-ADM 008 outlines the facility's obligation to provide reentrants with access to outside victim advocates for emotional support services related to sexual abuse. The policy states that the PCM shall ensure that inmates are offered and provided with access to outside victim advocates for emotional support services related to sexual abuse which has occurred in a confinement setting. During non-working hours, the Shift Commander shall be responsible for ensuring the aforementioned support services in SCIs. Supportive services may be provided via a variety of methods, including in-person, during a non-monitored phone call, and/or in writing. The policy further states that the PCM shall inform inmates prior to giving them access the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. During his interview, the Facility Director/PCM stated that he would provide the reentrant the contact information for the Women Organized Against Rape (WOAR). He further stated he would explain that there are no restrictions on contacting them, the reentrants have the ability to utilize the unrecorded telephones anytime they wish and leave during the day.</p> <p>Subsection (c) The facility has a letter of agreement with the Women Organized Against Rape (WOAR) a community service provider that can provide reentrants with confidential emotional support services related to sexual abuse. I contacted the Women Organized Against Rape (WOAR) and confirmed that the letter of agreement is current.</p> <p>The Facility Director confirmed that the facility has not had an investigation in the past 12 months where the services needed to be offered; he understands his obligations under the policy.</p> |

| | |
|---------|--|
| 115.254 | Third party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Sexual Abuse-Sexual Harassment Prevention Reporting Sexual abuse and Sexual Harassment</p> <p>Public website</p> <p>Subsection (a) DC-ADM 008 states that family, friends, and the general public can make reports through the Sexual Abuse Reporting Address with the OSIG. This is an option for the general public to report an allegation of sexual contact. The reporting address is:</p> <p>ATTN: PREA Coordinator</p> <p>Office of State Inspector General</p> <p>555 Walnut Street, 8th Floor</p> <p>Harrisburg, PA 17101</p> <p>It also states that a writer may choose to include his/her name and contact information, but it is not necessary for making a report; complaints can be made anonymously. The agency has this information posted on their website.</p> |

| | |
|---------|--|
| 115.261 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Sexual Abuse-Sexual Harassment Prevention Reporting Sexual abuse and Sexual Harassment</p> <p>2017 Basic Training Reporting Slides.pdf</p> <p>POLICY UPDATE TRAINING 2021.pdf</p> <p>PREA Essentials 2020 Web Based Training.pdf</p> <p>Basic Training 2021 Visual Aid.pdf</p> <p>Subsection (a) Policy DC-ADM 008 states that all staff, contractors, volunteers, and reentrants are required to report knowledge or suspicion of sexual abuse, sexual harassment, retaliation by others for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. All staff, contract service providers and volunteers are required to immediately report any knowledge, suspicion, or information regarding sexual abuse, sexual harassment, retaliation, or staff neglect to the Shift Commander, Facility Director, PBPP District Director, or Deputy District Director. All staff is provided first responder pocket cards, and these cards outline the staff responding duties; one of these duties is to report the incident to the MOC. All interviewed staff understood the responding duties, and all stated that they would immediately contact the MOC and report the incident.</p> <p>Subsection (b) DC-ADM 008, states that PREA reports are to be held in strict confidence. It further directs staff not to reveal any information related to sexual abuse allegation to anyone other than to the extent necessary to report to designated supervisors and officials, to make treatment, investigation, and other security and management decisions. The interviewed staff confirmed that they would not divulge the information to anyone unless they needed to know about the incident.</p> <p>Subsection (c) DC-ADM 008 states that medical and mental health practitioners are to report sexual abuse and to inform reentrants of the practitioner's duty to report and the limitations of confidentiality, at the initiation of services, unless otherwise precluded by Federal, State, or local law. It should be noted that Philadelphia CCC does not have medical and mental health providers, these services are received in the community.</p> <p>Subsection (d) DC-ADM 008 states that if the alleged victim is under the age of 18, the Department will refer the allegation to the designated State or local services agency under applicable mandatory reporting laws as outlined by the Pennsylvania Department of Human Services. If the reentrant was deemed to be a vulnerable adult under law, the Pennsylvania Department of Human Services would be notified. All allegations involving a juvenile would be reported to ChildLine.</p> <p>Subsection (e) DC-ADM 008 states that when learning of an allegation of sexual abuse, sexual harassment, including third party and anonymous reports, the facility director or designee is required to verbally notify the BCC-MOC for action and investigation. If staff are unsure whether an allegation being made is related to sexual abuse or sexual harassment, the information is still forwarded to BCC-MOC for review. During interviews I confirmed that all allegations of sexual abuse and sexual harassment are investigated.</p> |

| | |
|---------|---|
| 115.262 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 01- Sexual Abuse-Sexual Harassment Prevention Responsibilities</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 14- Sexual Abuse-Sexual Harassment Prevention Responding to Reports of Sexual Abuse</p> <p>Subsection (a) Policy DC-ADM 008 states that when staff become aware that a reentrant is subject to substantial risk of imminent sexual abuse, appropriate and immediate action shall be taken to protect the reentrant. First responders are also required to take preliminary steps to protect the alleged victim.</p> <p>During the facility interviews I confirmed with the staff that they would immediately take the reentrant to a secure area away from the other reentrants. The Facility Director and the BCC Administration confirmed that they can make housing changes as well as facility changes if the situation dictates.</p> |

| | |
|---------|--|
| 115.263 | <p>Reporting to other confinement facilities</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Sexual Abuse-Sexual Harassment Prevention Reporting Sexual Abuse and Sexual Harassment with attachment 12-D</p> <p>BCC Example of Notification (2021).pdf</p> <p>PREA Essentials 2020 Web Based Training.pdf</p> <p>Subsection (a)(b)(c)(d) Policy DC-ADM 008 states that upon receiving an allegation that a reentrant was sexually abused while confined at another facility, the BCC Facility Director/PBPP District Director/Deputy District Director/designee shall document the receipt of the allegation via a DC-121, Part 3, or Incident Report Form and verbally notify the BCC-MOC without delay. The BCC-MOC shall prepare a confidential report; PREA Report – Sexual Abuse. The affected facility will be provided a copy of the confidential report and contact information in an electronic format for any follow-up questions. A copy of the notification, attachments, and any electronic correspondence associated with its distribution shall be maintained in the BCC Security Office case file. The BCC shall make initial contact with the Facility Director or appropriate office of the agency where the alleged abuse occurred by utilizing the PREA Report – Sexual Abuse to coordinate any immediate actions that may need to be taken. The BCC shall make follow-up contact with the affected Facility Director or appropriate office of the agency where the alleged abuse occurred to make the formal notification to the affected facility within 72 hours of the report. A copy of the notification, attachments, and any electronic correspondence associated with its distribution shall be maintained in the BCC Security Office case file.</p> <p>During staff interviews, it was confirmed that the above procedures would be followed. This was further confirmed through the review of the completed documentation to another facility when an incident was reported to Philadelphia CCC. The Facility Director confirmed that if he received a report under these circumstances, he would immediately notify the MOC of the allegation.</p> |
|---------|--|

| | |
|---------|---|
| 115.264 | Staff first responder duties |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 12- Sexual Abuse-Sexual Harassment Prevention Reporting Sexual Abuse and Sexual Harassment with attachment 12-A</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 14- Sexual Abuse-Sexual Harassment Prevention Responding to Reports of Sexual Abuse with attachment 14-E</p> <p>PREA Essentials 2020 Web Based Training.pdf</p> <p>2017 Basic Training with Notes Section.pdf</p> <p>POLICY UPDATE TRAINING 2021 - Response slides.pdf</p> <p>Basic Training 2021 Visual Aid.pdf</p> <p>Subsection (a)(b) Policy DC-ADM 008 states that upon learning of an allegation that a reentrant or detainee was sexually abused, the first staff member to respond shall take immediate action and</p> <ol style="list-style-type: none"> a. call "911" if a physical or sexual assault is currently in progress; b. escort the alleged victim to a safe location away from others; c. if the incident occurred within 96 hours of the reporting, 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; d. notify the BCC Facility Director/PBPP District Director/Deputy District Director/designee; e. contact the BCC-Management Operations Center (MOC) and follow all directions provided. The BCC-MOC will assess the situation and advise if it is appropriate to ensure the preservation of physical evidence contained on the alleged abuser; f. do not interview the alleged victim or anyone else, simply report the current information; g. preserve and protect any possible crime scene as outlined in Department policy 8.3.1, "Community Corrections Security," Section 24 until appropriate steps can be taken to collect evidence; h. do not take any photographs/video of the alleged victim or abuser; i. complete the BCC and Lockup Initial Response Checklist (Attachment 14-E) and a DC-121, Part 3-BCC; and j. follow procedures and submit all other required written reports pursuant to these procedures manual. <p>All staff at the facility are employees of the PADO and would follow the above procedures.</p> <p>During the interviews, all staff indicated that they would make the reentrants safety their first priority and follow the policy.</p> <p>The facility has not had any investigations during the audit period.</p> <p>All initial reports completed by the staff are forwarded to the MOC assigned to an investigator and kept within the investigation file. This was confirmed during previous agency investigation reviews and investigator interviews.</p> |

| | |
|---------|--|
| 115.265 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 14- Sexual Abuse-Sexual Harassment Prevention Responding to Reports of Sexual Abuse Philadelphia CCC Institutional Plan</p> <p>Subsection (a) DC-ADM 008 dictates that each facility is required to develop a written plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. This may be in the form of local facility policy or documented facility-specific plan. The Philadelphia CCC Local Institutional Plan August 22, 2021 was reviewed during the pre-audit. The plan includes first responder duties, Facility Director responsibilities, emergency medical treatment services, and mental health treatment services. The Facility Director stated that he or a designated security staff would immediately notify the MOC and the Pennsylvania State Police. If an emergency response was needed, the Philadelphia Police Department would also be notified. He further confirmed the plan coordinates the actions between PADO, community providers, and law enforcement. The initial response would involve the MOC, which provides direction if needed. The facility holds letters of agreement with the community providers outlined in the institutional plan.</p> |

| | |
|---------|---|
| 115.266 | Preservation of ability to protect residents from contact with abusers |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 518 300">Documentation reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1401 483">4.4.1, Human Resources and Labor Relations Procedures Manual Section 5 - Suspension Without Pay for Exempt Employees Under the Fair Labor Standards Act and Suspension Pending Investigation for Exempt and Non-Exempt Employees</p> <p data-bbox="242 510 691 539">Memorandum from Secretary of Corrections</p> <p data-bbox="242 566 667 595">Pennsylvania Doctors Alliance Agreement</p> <p data-bbox="242 622 1002 651">American Federation of State, County and Municipal Employees Agreement</p> <p data-bbox="242 678 1118 707">Correctional Institution Vocational Education Association, Pennsylvania State Education</p> <p data-bbox="242 734 799 763">Association, National Education Association Agreement</p> <p data-bbox="242 790 946 819">Federation of State Cultural and Educational Professionals Agreement</p> <p data-bbox="242 846 882 875">Pennsylvania State Corrections Officers Association Agreement</p> <p data-bbox="242 902 895 931">OPEIU Healthcare Pennsylvania Memorandum of Understanding</p> <p data-bbox="242 958 416 987">SEIU Agreement</p> <p data-bbox="242 1014 1126 1043">Service Employees International Union Healthcare Pennsylvania, CTW, CLC Agreement</p> <p data-bbox="242 1137 1489 1503">Subsection (a) and (b) According to the letter dated January 13, 2015, from the Director of Human Resources to the 2015 PREA Auditor, the Pennsylvania Department Of Corrections operates within the confines of collective bargaining agreements with eight different unions. None of the collective bargaining agreements contain language that limits the ability to remove a staff member alleged to have engaged in sexual abuse from contact with an inmate (reentrant) pending the outcome of an investigation. The Pennsylvania Department of Corrections Secretary provided direction to executive leadership outlining the procedures to follow. He directed those suspensions pending investigation should only be considered when the alleged offenses are of a nature that warrants immediate removal from the workplace. There does not need to be a demonstration that the employee committed the suspected offenses, but rather the nature of the allegations is such that there is just cause to remove the employee from the institution pending the outcome of the investigation. He further stated that for allegations that fall under PREA, and the Commonwealth has no requirement to provide 24 hours written notification of the allegations in accordance with Article 33, Section 20 pursuant to the interest arbitration award issued November 7, 2014.</p> <p data-bbox="242 1529 1477 1626">All of the agreements were reviewed, none of the agreements limited the Department's ability to remove alleged staff sexual abusers from contact with reentrants pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p data-bbox="242 1653 1457 1787">Human Resource and Labor Relations Procedures Manual 4.1.1, allows for employees to be suspended pending an investigation when the alleged offenses are severe in nature and warrants immediate removal from the workplace. This policy exempts the requirement that H- 1 employees be given written notification of allegations prior to the pre-suspension meeting when the allegation falls under PREA.</p> <p data-bbox="242 1814 1445 1910">The interview with the Agency Head Designee confirmed the Commonwealth renewed collective bargaining agreements since 2012 and that agreements contain language allowing the Department to remove alleged staff sexual abusers from contact with reentrants pending an investigation or a determination of whether and to what extent discipline is warranted.</p> |

| | |
|---------|--|
| 115.267 | Agency protection against retaliation |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 520 300">Documentation reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1485 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 13- Sexual Abuse-Sexual Harassment Prevention Protection Against Retaliation with attachment 13-A</p> <p data-bbox="242 477 1477 537">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 18 Investigating Allegations of Sexual Abuse Sexual Harassment.docx</p> <p data-bbox="242 566 719 595">PREA Essentials 2020 Web Based Training.pdf</p> <p data-bbox="242 624 675 654">2017 Basic Training with Notes Section.pdf</p> <p data-bbox="242 683 509 712">PREA Education 2020.pdf</p> <p data-bbox="242 741 588 770">Basic Training 2021 Visual Aid.pdf</p> <p data-bbox="242 853 1473 1016">Subsection (a) DC-ADM 008 Section 13 outlines the agency's duties in protecting reentrants and staff against retaliation for reporting an incident or cooperating with an investigation of sexual abuse or sexual harassment. It states that any individual who seeks to deter a reentrant or other individual from reporting sexual abuse or sexual harassment or who in any manner harasses or intimidates any person who reports the alleged contact is subject to discipline. DC-ADM 008 designates the Facility Director in the Community Corrections Center as the staff charged with monitoring retaliation.</p> <p data-bbox="242 1046 1485 1173">Subsection (b) The Facility Director confirmed that by the policy he has the authority to employ multiple protection measures, such as housing changes or transfer for a reentrant victim or abusers, or removal of alleged staff or reentrant abusers from contact with the victim, and video surveillance with audio. He would determine these protective measures on an individual basis.</p> <p data-bbox="242 1202 1493 1464">Subsection (c) DC-ADM 008 requires that at least 90 days following a report of sexual abuse or sexual harassment, the Department will monitor the conduct and treatment of reentrants or staff who reported the sexual abuse or sexual harassment and of reentrants who were reported to have suffered sexual abuse or sexual harassment to see if there are changes that may suggest possible retaliation by reentrants or staff, and shall act promptly to remedy such retaliation. Retaliation monitoring is documented on the Department Retaliation Monitoring Form. Retaliation Monitoring includes the review of disciplinary reports, housing reports, program changes, negative performance reviews, and reassignments of staff. The Department does have the authority to continue monitoring past 90 days if the initial monitoring indicates a continuing need or is requested by the alleged victim when there is evidence of retaliation.</p> <p data-bbox="242 1494 1490 1590">Subsection (d) Meetings are documented on the Retaliation Monitoring Form, these meetings are conducted with the person of concern to discuss any concerns or observations at intervals of 96 hours, 15 days, 30 days, 60 days, and 90 days after the incident.</p> <p data-bbox="242 1619 1414 1680">Subsection (e) DC-ADM 008 states that if any other individual who cooperates with an investigation expresses fear of retaliation; the Department will take appropriate measure to protect that individual against retaliation.</p> <p data-bbox="242 1709 1493 1836">Subsection (f) DC-ADM 008 limits the Department's obligation to monitor retaliation once the reentrant is released from custody, or the investigation is determined to be unfounded. The Facility Director confirmed retaliation monitoring occurs for a minimum of 90 days. He stated that he would utilize counselors to assist with the monitoring since they are obligated to meet with the reentrants.</p> |

| | |
|---------|--|
| 115.271 | Criminal and administrative agency investigations |
| | Auditor Overall Determination: Exceeds Standard |
| | <p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 518 297">Documentation reviewed:</p> <p data-bbox="240 329 485 356">Pre-Audit Questionnaire</p> <p data-bbox="240 387 1485 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 18- Sexual Abuse-Sexual Harassment Prevention Investigating Allegations of Sexual Abuse and/or Sexual Harassment</p> <p data-bbox="240 479 1485 539">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 20- Sexual Abuse-Sexual Harassment Prevention Data Collection and Retention</p> <p data-bbox="240 571 1272 598">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 35 Investigations</p> <p data-bbox="240 683 1485 844">Subsection (a) DC-ADM 008 states that every report, complaint, or allegation of sexual abuse and sexual harassment, including uninvolved parties and anonymous reports, shall be investigated promptly, thoroughly, and objectively. During the staff interviews, I confirmed that all allegations are reported and investigated. The allegations are reported to the MOC, and an investigator is immediately assigned. The investigations are tracked utilizing the PREA Tracking System. During the BCC Administrative interviews, I confirmed that anonymous and third-party reports are investigated in the same thorough manner.</p> <p data-bbox="240 875 1485 1068">Subsection (b)(c) DC-ADM 008 states the Department will use investigators who have received specialized training in sexual abuse investigations when an incident of sexual abuse is alleged. The interviewed investigators confirmed they had received the department PREA training, as well as the investigator's training as outlined in standard 115.234. They further confirmed that as per the training and policy they would gather and preserve direct and circumstantial evidence such as DNA and electronic monitoring data, interview alleged victims, suspected abusers, and witnesses, and review prior complaints of sexual harassment and report of sexual abuse involving the suspected abuser.</p> <p data-bbox="240 1099 1453 1227">Subsection (d) Policy states that if the evidence appears to support a criminal prosecution, compelled interviews will be conducted. The investigators indicated that if this occurs, they will contact the Bureau Major for guidance. They confirmed that if the investigation indicated any criminal statutes were violated, the Pennsylvania State Police would conduct the compelled interviews.</p> <p data-bbox="240 1258 1485 1386">Subsection (e) The interviewed investigators confirmed that the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an inmate or staff. They further stated that the Department does not require a reentrant who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition of proceeding with the investigation. This is further outlined in the policy.</p> <p data-bbox="240 1417 1485 1677">Subsection (f) DC-ADM 008 requires investigators to make an effort to determine whether staff actions or failures to act contributed to the abuse. At the conclusion of the investigation, an Investigative Summary is completed and includes a description of the allegation, a detailed description of the reviewed video or other electronic monitoring data which articulates how the allegation was not supported, and a conclusion that articulates how the victim's allegation was determined to be not credible and how the evidence supports a determination of unfounded. This includes descriptions of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings are included. The Investigative Summary includes statements of the victim, witnesses, and abuser, video evidence, and police reports, if available, and how the evidence supports the findings.</p> <p data-bbox="240 1709 1485 1800">Subsection (g) The Criminal Investigations are documented in a report which includes a thorough description of the physical, testimonial, legal documents, and copies of all documentary evidence where feasible. These reports are created by the Pennsylvania State Police.</p> <p data-bbox="240 1832 1485 1924">Subsection (h) Allegations of sexual abuse are referred to PSP. However, according to DCADM 008 if a case has not already been referred for a criminal prosecution, the Bureau of Investigations and Intelligence will refer substantiated allegations of conduct that appear to be criminal for prosecution.</p> <p data-bbox="240 1955 1445 2047">Subsection (i) Policy indicates that each facility and Bureau of Investigations and Intelligence are responsible to securely maintain PREA investigation files, including criminal and administrative agency investigative reports for as long as the alleged abuser is incarcerated or employed plus five additional years.</p> <p data-bbox="240 2078 1453 2139">Subsection (j) DC-ADM 008 states that if the alleged abuser or victim departs from employment or control of the facility or Department, the investigation will not be terminated. Interviews confirmed if an alleged abuser submits resignation from</p> |

employment, the resignation will not be accepted. If the victim leaves the facility, the investigator will make every effort to interview the alleged victim prior to departure or will make efforts to contact the alleged victim wherever the victim is.

Subsection (l) When an allegation is investigated by PSP or another outside law enforcement agency, the policy requires the investigator to maintain regular contact with the criminal investigator for updates and progress, to request a copy of the investigative information to be included in the Department's investigative file, and request notification of the outcome of the investigation in order to notify the alleged victim. The PADO and PSP have a MOU outlining the cooperation between the two agencies when the investigations are conducted. The Facility Director indicated he would contact the PSP Station Commander if there were any communication issues during an investigation.

Numerous investigations have been reviewed during audits with the PADO. These investigations are thorough and extremely organized. All provisions outlined in the standard are being followed.

| | |
|---------|---|
| 115.272 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 18- Sexual Abuse-Sexual Harassment Prevention Investigating Allegations of Sexual Abuse and/or Sexual Harassment</p> <p>Investigators Training Power Point</p> <p>Policy 8.3.1 Bureau of Community Corrections Security Procedures Manual Section 35 Investigations</p> <p>Subsection (a) DC-ADM 008 and 8.3.1 state that no standard higher than a preponderance of the evidence shall be imposed in determining whether allegations of sexual abuse or sexual harassment are substantiated. This is outlined in the training that all investigators receive. The interviewed investigators and BCC Administration confirmed the use of this standard of proof when investigating allegations of sexual abuse and sexual harassment. This was further confirmed during review of agency investigations.</p> |

| | |
|---------|--|
| 115.273 | Reporting to residents |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 518 300">Documentation reviewed:</p> <p data-bbox="240 331 485 358">Pre-Audit Questionnaire</p> <p data-bbox="240 389 1485 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 18- Sexual Abuse-Sexual Harassment Prevention Investigating Allegations of Sexual Abuse and/or Sexual Harassment with attachment 18-C</p> <p data-bbox="240 479 576 506">Reentrant notifications from 2019</p> <p data-bbox="240 595 1485 752">Subsection (a) DC-ADM 008 states that following an investigation of a reentrant's allegation of sexual abuse or sexual harassment in a Department of Corrections facility, or contract facility, the PCM at the facility where the reentrant is housed is responsible for notifying the reentrant of the outcome of the investigation whether the allegation is found to be substantiated, unsubstantiated, or unfounded. The Facility Director confirmed that when he receives the outcome information from the investigator, he then informs the reentrant of the investigation finding.</p> <p data-bbox="240 784 1469 842">Subsection (b) If a law enforcement agency conducts the investigation, the Department will request the relevant information from the investigating agency in order to inform the reentrant of the outcome of the criminal investigation.</p> <p data-bbox="240 873 1401 931">Subsection (c) Following a reentrant's allegation that a staff committed sexual abuse against a reentrant, the PCM is responsible for informing the reentrant when the following occurs:</p> <ul data-bbox="240 963 1426 1164" style="list-style-type: none"> • the staff is no longer posted within the reentrant's unit • the staff is no longer employed at the facility • the Department learns the staff has been criminally charged related to the sexual abuse within the facility • the Department learns that the staff has been convicted on a charge related to sexual abuse within the facility. <p data-bbox="240 1196 1481 1290">Subsection (d) Following a reentrants allegation of sexual abuse by another reentrant, the PCM will inform the victim when the Department learns the alleged abuser has been criminally charged related to the sexual abuse within the facility or when the Department learns that the abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="240 1321 1465 1379">Subsection (e) PA DOC uses as a standard form, PREA Investigation - Inmate Notification, to document and notify alleged victims. Upon completion, this form is filed in the reentrant file, and a copy is forwarded to the BCC PREA Captain.</p> <p data-bbox="240 1411 1477 1469">When notifying a reentrant following an allegation of sexual abuse or sexual harassment, the PCM uses the standard PREA Investigation - Inmate Notification form "Staffing Update" a section includes checkboxes for:</p> <ul data-bbox="240 1500 1197 1926" style="list-style-type: none"> • transferred to another post • transferred to another facility • temporarily restricted from this facility • permanently restricted from this facility • permanently restricted from all Department of Corrections sites and its contracted sites • is no longer employed by the Department of Corrections • is no longer employed by the contract Facility • other (please define below) <p data-bbox="240 1957 1465 2016">The form includes a section titled "Criminal Action" which lists two checkbox options when notifying reentrants who alleged sexual abuse by another reentrant:</p> <ul data-bbox="240 2047 1270 2128" style="list-style-type: none"> • Criminal charges have been filed against the abuser in relation to the sexual abuse report filed • The abuser has been convicted of criminal charges related to the sexual abuse report filed. |

Subsection (f) Notifications occur when the reentrant has been transferred to another facility within the Department of Corrections. However, the Department's obligation to report the results of the investigation to the alleged victim terminates if the alleged reentrant victim is released from the Department's custody.

No incidents of staff on reentrant sexual abuse or sexual harassment have been alleged or investigated at Philadelphia CCC during the past 12 months.

| | |
|---------|---|
| 115.276 | Disciplinary sanctions for staff |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 17- Sexual Abuse-Sexual Harassment Prevention Discipline Related to Sexual Abuse Sexual Harassment and Retaliation</p> <p>Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 7 Standardization of Pre-Disciplinary Conferences</p> <p>Policy 4.1.1 Human Resources and Labor Relations Procedures Manual Section 4 Resignations in Lieu of Discharge with attachment 4-C</p> <p>A bulletin issued on January 20, 2015, from Secretary</p> <p>Subsection (a)(b)(c) DC-ADM 008 states that any employee who violates the Department's zero-tolerance policy shall be subject to appropriate disciplinary or administrative action up to and including termination. Discipline occurs in accordance with policy 4.1.1. Policy 4.1.1 states that termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. The policy further states that disciplinary sanction for violations of agency policies related to sexual abuse or sexual harassment other than engaging in sexual abuse shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>Subsection (d) DC-ADM 008 states that all terminations for violations of sexual abuse and sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation shall be reported to professional licensing bureaus and law enforcement agencies, unless the activity was clearly not criminal. Policy 4.1.1 states that should a staff member resign in lieu of discharge for violation of DC-ADM 008, the Bureau of Human Resources will notify the Office of Special Investigations and Intelligence (OSII) to determine if a potential criminal violation exists. If the violation meets criminal standards, OSII will refer the matter to the District Attorney's Office that has jurisdiction over the affected facility. Whether or not the matter is referred to the District Attorney's Office, the Bureau of Human Resources will notify relevant licensing bodies. Additionally, when an employee resigned while under investigation for violations of sexual abuse or sexual harassment, any settlement language will include provisions that permit the employer to report to any prospective institution employer that the employee resigned during a pending investigation. Human Resource and Labor Relations Bulletin issued on January 20, 2015, notifies staff of the changes to the policy in which resignation in lieu of discharge cases or dismissal cases related to sexual abuse and sexual harassment will be reported to law enforcement if the activity is criminal in nature and to any relevant licensing body.</p> <p>Philadelphia CCC has not had a staff subject to disciplinary action for sexual abuse or sexual harassment.</p> |

| | |
|---------|---|
| 115.277 | Corrective action for contractors and volunteers |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 210 453 237">Auditor Discussion</p> <p data-bbox="242 271 501 297">Documentation reviewed:</p> <p data-bbox="242 329 485 356">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1485 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 17- Sexual Abuse-Sexual Harassment Prevention Discipline Related to Sexual Abuse Sexual Harassment and Retaliation</p> <p data-bbox="242 535 1457 730">Subsection (a) DC-ADM 008 states that any contract employee or volunteer who violates the Department's zero-tolerance policy is subject to appropriate disciplinary or administrative action. When an allegation is made against a contractor or volunteer, that person will be removed from contact and communication with the alleged victim until the conclusion of the investigation. If the contractor or volunteer has been found to have engaged in sexual abuse, the individual will have their access to Department facilities revoked and will be reported to professional licensing bureaus and law enforcement agencies, unless the activity was clearly not criminal.</p> <p data-bbox="242 761 1465 853">Subsection (b) DC-ADM 008 states that if a contractor or volunteer violates DC-ADM 008 other than by engaging in sexual abuse, the facility will take appropriate remedial measures and shall consider whether to prohibit further contact with reentrants.</p> <p data-bbox="242 884 1490 1079">I confirmed during interviews that Philadelphia CCC has not had a contractor or volunteer reported to law enforcement or relevant licensing bodies for allegations of sexual abuse. The Facility Director confirmed that if a contractor or volunteer was alleged to have engaged in sexual abuse or sexual harassment of reentrants, they would not be allowed to enter the facility nor have contact with reentrants. Upon notification of the allegation, the allegation would be documented and the MOC would be contacted to assign an investigator. I further confirmed that the contractor's or volunteer's security clearance would be immediately suspended; if the allegations were substantiated the security clearance would be revoked.</p> |

| | |
|---------|--|
| 115.278 | Disciplinary sanctions for residents |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 520 300">Documentation reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1485 450">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 17- Sexual Abuse-Sexual Harassment Prevention Discipline Related to Sexual Abuse Sexual Harassment and Retaliation</p> <p data-bbox="242 479 624 508">Policy DC-ADM 801 Inmate Discipline</p> <p data-bbox="242 537 1241 566">Policy 13.8.1 Access to Mental Health Care Procedures Manual Section 11 Sex Offender Treatment</p> <p data-bbox="242 651 1461 745">Subsection (a) DC-ADM 008 states that reentrants are subject to disciplinary sanctions according to the formal disciplinary process, following an administrative finding that the reentrant violated the zero-tolerance policy, engaged in reentrant-on-reentrant sexual abuse or following a criminal finding of guilt for reentrant-on-reentrant sexual abuse.</p> <p data-bbox="242 775 1449 869">Subsection (b) DC-ADM 008 states that sanctions will be commensurate with the nature and circumstances of the sexual abuse, sexual harassment or retaliation committed, the reentrants disciplinary history and the sanctions imposed for comparable offenses by other reentrants with similar histories.</p> <p data-bbox="242 898 1490 963">Subsection (c) The disciplinary process considers whether a reentrant's mental disabilities or mental illness contributed to the behavior when determining what type of sanction if any, should be imposed.</p> <p data-bbox="242 992 1490 1485">Subsection (d) DC-ADM 008 states that when a reentrant is found guilty of a Class 1 Misconduct related to sexual abuse in a facility that offers Sex Offender treatment Program the Unit Manager/Facility Director will refer the reentrant to the Sex Offender Treatment Program for evaluation to determine whether or not the reentrant is appropriate for the program, and if the reentrant will be required to complete the program as part of the sanctions or as a condition to accessing programming or other benefits. Policy 13.8.1 outlines actions for inmates without a sexual conviction who sexually assaults during incarceration. If a sexual assault results in a formal legal charge and a criminal conviction in a Pennsylvania court of law, the individual will be referred for assessment. The policy directs all facilities to attempt to conduct a mental health evaluation of all known reentrant-on-reentrant abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by a mental health practitioner. If the facility offers Sex offender Treatment, the facility shall consider whether to require the offending reentrant to participate in such interventions as a condition of access to programming or other benefits. Reentrants who have been found to have engaged in sexual abuse without an accompanying criminal conviction shall be evaluated for Sex Offender Treatment and offered the opportunity to participate voluntarily in programming. The Facility Director confirmed that a reentrant who engages in sexual abuse or sexual harassment would be removed from the center and transferred to a State Correctional Institution. The reentrant would then be offered programming at the receiving institution according to policy.</p> <p data-bbox="242 1514 1490 1608">Subsection (e) It was confirmed that the facility would discipline a reentrant for sexual contact with staff only upon finding that the staff member did not consent to such contact. If this is determined, the incident would be reported to the Pennsylvania State Police, since this activity is criminal in nature.</p> <p data-bbox="242 1637 1469 1731">Subsection (f) DC-ADM 008 states that a report of sexual abuse made in good faith, based on a reasonable belief that the alleged conduct occurred, will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p data-bbox="242 1760 1490 1854">Subsection (g) The Department prohibits all sexual activity between reentrants and may discipline reentrants for such activity. The Department will not deem such activity as sexual abuse, if through the investigative process determines, the activity was consensual.</p> <p data-bbox="242 1883 1458 1912">The Philadelphia CCC has not disciplined any reentrant for sexual abuse or sexual harassment within the past 12 months.</p> |

| | |
|---------|---|
| 115.282 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Forensics Examinations Law</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 14- Sexual Abuse-Sexual Harassment Prevention Responding to Reports of Sexual Abuse with attachment 14-F</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 1- Sexual Abuse-Sexual Harassment Prevention Responsibilities</p> <p>Policy 8.1.1 Community Corrections Procedures Manual Section 5 Resident Procedures</p> <p>Subsection (a) DC-ADM 008 states that alleged victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. The policy further requires staff to ensure the alleged sexual abuse victim is provided access to a forensic medical examination and mental health evaluation. The staff indicated that they would notify law enforcement via 911 if the alleged victim requires emergency medical treatment and ensures the alleged victim is provided access to a forensic medical examination. Victims of sexual abuse are provided the form "If you are the Reported Victim of Sexual abuse - CCC's and Lockups" which quotes 28 C.F.R. 115.282 (a)(d) and requires the victim to indicate whether the victim is requesting or declining a medical examination, mental health evaluation, and rape crisis services. The victim is asked to sign and date the form. Health care is provided to community correctional center reentrants in the community rather than on-site by the Department of Corrections Staff.</p> <p>Subsection (b) DC-ADM 008 directs security staff first responders to take preliminary steps to protect the alleged victim if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made. The facility utilizes Drexel University College of Medicine for forensic examinations; the Supervisor at the hospital indicated that a Sexual Assault Nurse Examiner is always available. She further confirmed that the hospital would contact the Women Organized Against Rape (WOAR) to ensure a victim advocate was available to the victim.</p> <p>Subsection (c) DC-ADM 008 states that all alleged victims of sexual abuse are offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care. The supervisor at Drexel University College of Medicine confirmed that this is provided to all victims of sexual assault.</p> <p>Subsection (d) Through policy and Pennsylvania Law, all treatment services are provided to the alleged victim without financial costs and regardless of whether the alleged victim names the abuser or cooperates with any investigation arising out of the incident. Pennsylvania State law prohibits a provider from billing a victim for forensic rape exams. The State also does not require a victim of sexual assault to cooperate with law enforcement or prosecution for the examination to be paid for by the victim's Compensation Assistance program. The supervisor at Drexel University College of Medicine that victims of sexual assault receive services without cost to the victim. She also confirmed that victims are not required to cooperate with an investigation to receive an examination and treatment.</p> |

| | |
|---------|---|
| 115.283 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire Forensics Examinations Law</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 14- Sexual Abuse-Sexual Harassment Prevention Responding to Reports of Sexual Abuse with attachment 14-F</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 9- Sexual Abuse-Sexual Harassment Prevention Screening for Risk of Victimization and Abusiveness</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 10- Sexual Abuse-Sexual Harassment Prevention medical and Mental Health</p> <p>Subsection (a) DC-ADM 008 requires Philadelphia CCC to offer medical and mental health evaluation and if appropriate, treatment to all reentrants who have allegedly been victimized by sexual abuse in any prison jail, lock up, or juvenile facility. In Community Corrections Centers, reentrants receive medical and mental health care in the community. Reentrants are notified of services via the "If you are the Reported Victim of Sexual Abuse - CCCs and Lockups," which is provided to reentrants upon the report of an incident of sexual abuse.</p> <p>Subsection (b) Ongoing medical and mental health treatment is available for reentrants who have been allegedly victimized by sexual abuse. This includes appropriate follow-up services, treatment plans, and as necessary referrals for continued care following the reentrants transfer to another facility or released.</p> <p>Subsection (c) Policy states that PADOCC facilities are required to provide alleged victims with medical and mental health services consistent with the community level of care. Philadelphia CCC will provide services to reentrants through community providers.</p> <p>Subsection (d) and (e) Policy dictates that a female victim would be offered a pregnancy tests an if pregnancy results from the conduct described in paragraph § 115.283(d), they will receive timely and comprehensive information as well as access to all lawful pregnancy-related medical services. The audited facility is an all-male facility, but they do have female reentrants that are not residing at the facility reporting to the facility to provide urines and meet with the counselors.</p> <p>Subsection (f) Policy dictates that all alleged victims of sexual abuse are offered testing for sexually transmitted infections. This was further confirmed with the supervisor Drexel University College of Medicine.</p> <p>Subsection (g) Pennsylvania State Statute dictates treatment services are provided to alleged victims without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Victims are provided services at no cost and are not required to file a report or consent to the rape kit being tested.</p> <p>Subsection (h) Policy DC-ADM 008, address mental health evaluations and treatment of reentrant abusers. The policy requires a mental health evaluation to be conducted on abusers within 60 days of learning of the abuse history and offer treatment when deemed appropriate. Policy13.8.1 requires the same and states that the treatment may be required. Reentrants who have been found to have engaged in sexual abuse without an accompanying criminal conviction shall also be evaluated for Sex Offender treatment, as appropriate, and offered the opportunity to participate voluntarily in programming.</p> |

| | |
|---------|---|
| 115.286 | Sexual abuse incident reviews |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 520 300">Documentation reviewed:</p> <p data-bbox="242 329 485 358">Pre-Audit Questionnaire</p> <p data-bbox="242 387 1485 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 16- Sexual Abuse-Sexual Harassment Prevention Sexual Abuse Incident Review with attachment 16-A</p> <p data-bbox="242 477 512 506">Completed Incident review</p> <p data-bbox="242 591 1477 719">Subsection (a)(b) DC-ADM 008 dictates that at the conclusion of every sexual abuse investigation, whether substantiated or unsubstantiated, the facility will conduct a Sexual Abuse Incident Review. This review should take place within 15 working days of receipt of BII's notification the investigation was deemed satisfactory. During the auditing period no incidents or allegations of sexual abuse have occurred at Philadelphia CCC, where a review has taken place.</p> <p data-bbox="242 748 1485 911">Subsection (c) The Sexual Abuse Incident Review committee consists of the Center Director, CDC Region 1, Center Director for Region 1, Investigating Lieutenant, A/RD BCC Region 1, and the Counselor. This team is consistent with policy, in that DC-ADM 008 requires Community Corrections Center Sexual Abuse Incident Review committees to consist of, at a minimum, the PREA Compliance Manager, Bureau of Community Corrections Regional Director, the Facility Director, other designated manager or supervisor, BCC Investigator, facility counselor, medical and mental health practitioner if on site.</p> <p data-bbox="242 940 1158 969">Subsection (d) DC-ADM 008 states that the Sexual Abuse Incident Review committee shall:</p> <ul data-bbox="242 999 1485 1444" style="list-style-type: none"> <li data-bbox="242 999 1442 1059">• considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse, <li data-bbox="242 1088 1485 1149">• considers whether the incident was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender or intersex identification, status or perceived status, gang affiliation, or was motivated by other group dynamics, <li data-bbox="242 1178 1442 1238">• examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse, <li data-bbox="242 1267 1062 1296">• assesses the adequacy of staffing level in that area during different shifts, <li data-bbox="242 1326 1442 1355">• assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff, <li data-bbox="242 1384 1477 1444">• considers information such as housing assignment, measures taken as a result of the allegation, need for follow-up for the victim. <p data-bbox="242 1473 1477 1570">The review is documented on the Sexual Abuse Incident Review standard form and submitted to the Secretary's Office. The PREA Compliance Manager submits the report within 10 days of the review to the Bureau of Community Corrections Major for distribution.</p> <p data-bbox="242 1599 1493 1727">Subsection (e) DC-ADM 008 states that it is the responsibility of the Facility Manager, BCC Director, or PBPP District Director to implement the recommendations for improvement or document the reasons for not doing so on the PREA Sexual Abuse Incident Review Plan of Action. The completed PREA Sexual Abuse Incident Review plan of Action is distributed to higher-level management staff.</p> <p data-bbox="242 1756 906 1785">The interviewed staff understood their obligations under the policy.</p> |

| | |
|---------|---|
| 115.287 | Data collection |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 20- Sexual Abuse-Sexual Harassment Prevention Data Collection and Retention</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 02- Sexual Abuse-Sexual Harassment Prevention Contracting</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 18- Sexual Abuse-Sexual Harassment Prevention Investigating Allegations of Sexual Abuse Sexual Harassment</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 16- Sexual Abuse-Sexual Harassment Prevention Sexual Abuse Incident Reviews</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 17- Sexual Abuse-Sexual Harassment Prevention Discipline Related to Sexual Abuse Sexual Harassment</p> <p>2013 through 2019 PADOC Annual Reports PREA Tracking System Collection</p> <p>2015 through 2019 PADOC SSV-1A Forms Contract Incident Data</p> <p>Data Collection and incident Based Monitoring from Contract Facilities Sample Data from Contract Facilities</p> <p>Subsection (a) DC-ADM 008 directs the PREA Compliance Division to collect accurate, uniform data for every allegation of sexual abuse at facilities under the direct control of the Department of Corrections, using a standardized instrument and set of definitions. The PREA Tracking System is used to track every report, complaint, or allegation of sexual abuse and/or sexual harassment, according to DC-ADM 008. The tracking is a web-based application, tracking the same information for each report. As confirmed in DC- ADM 008, this tracking includes County Jails, who provide contract services to the Bureau of Community Corrections. BCC Administration and the PREA Coordinator confirmed the use of the PREA Tracking System for all reports of sexual abuse and sexual harassment, including those stemming from contracted agencies.</p> <p>Subsection (b) Policy dictates that the PREA Compliance Coordinator is responsible for reviewing data collected and to aggregate the data annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. This information is compiled into a PREA Annual Report. I reviewed the annual reports from 2013 through 2019.</p> <p>Subsection (c) PADOC also reports any additional information required by the Survey of Sexual Violence required by the Department of Justice, Bureau of Justice Statistics. The Survey of Sexual Violence is completed by DOC for each incident, as indicated by the submission of completed Surveys of Sexual Violence forms from 2015through 2019. The information included in the Survey is included in the PREA reports submitted by investigators.</p> <p>Subsection (d) DC-ADM 008 indicates that all data be maintained, reviewed, and collected as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. This information is housed in the PREA Tracking System.</p> <p>Subsection (e) DC-ADM 008 addresses sexual abuse and sexual harassment prevention in contracted facilities, including notification of sexual abuse and sexual harassment incidents and the entry into the PREA Tracking System. The policy states that incident-based and aggregated data shall also be collected from every facility the Department contracts with for the confinement of its inmates. Philadelphia CCC submitted examples of screenshots of the PREA Tracking System which showed incidents of sexual abuse and sexual harassment in contracted facilities and an example of the Report of an Incident from the PREA Tracking System of an incident of sexual abuse from a contracted facility. Also submitted and reviewed was Sexual Abuse Incident Review report from a contracted facility.</p> <p>Subsection (f) Policy dictates that the Annual PREA Report is required to be approved by the Secretary and posted on the Department's Website by June 30 of each year. The Department of Justice has not requested agency data.</p> |

| | |
|---------|---|
| 115.288 | Data review for corrective action |
| | <p data-bbox="242 145 742 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 518 300">Documentation reviewed:</p> <p data-bbox="242 327 486 356">Pre-Audit Questionnaire</p> <p data-bbox="242 383 1492 448">Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 20- Sexual Abuse-Sexual Harassment Prevention Data Collection and Retention</p> <p data-bbox="242 474 683 504">2013 through 2019 PADOCA Annual Reports</p> <p data-bbox="242 589 1492 685">Subsection (a) DC-ADM 008 states that the PREA Compliance Division is responsible for reviewing data collected and annually aggregating the data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by:</p> <ul data-bbox="242 712 1444 891" style="list-style-type: none"> <li data-bbox="242 712 587 741">• identifying problem areas <li data-bbox="242 768 774 797">• taking corrective action on an ongoing basis <li data-bbox="242 824 1444 891">• preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole. <p data-bbox="242 918 1444 1014">The PREA Coordinator confirmed that incident-based data is collected. This information is used to monitor locations and identify a trend and areas of concern in order to address specific problems or address Department-wide issues through training. An annual report is prepared and includes corrective action.</p> <p data-bbox="242 1041 1492 1106">Subsection (b) As per policy DC-ADM 008, the annual report includes comparison data and corrective actions for the current year with those from previous years, and an assessment of the Department's progress in addressing sexual abuse.</p> <p data-bbox="242 1133 1460 1261">Subsection (c) As per policy DC-ADM 008 the annual PREA Report is authored by the coordinator and is forwarded to the Secretary for approval and posted on the Department's website by June 30 of each year. PREA Annual reports for 2013 through 2019 were reviewed. The PREA Annual Report for 2019 is currently posted on the Pennsylvania DOC public website.</p> <p data-bbox="242 1288 1476 1453">Subsection (D) DC-ADM 008 states that specific identifying information shall be redacted so that no individual is identifiable. The Department may also redact specific material from the reports when publication would present a clear and specific danger to a facility but must indicate the nature of the material redacted. In a review of the PREA Annual Reports, no personal identifying information was included or redacted, and there did not appear to be any information posing a threat to the safety and security of a facility.</p> |

| | |
|---------|---|
| 115.289 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation reviewed:</p> <p>Pre-Audit Questionnaire</p> <p>Policy DC-ADM 008 Prison Rape Elimination Act (PREA) Procedures Manual Section 20- Sexual Abuse-Sexual Harassment Prevention Data Collection and Retention</p> <p>Annual reports</p> <p>Subsection (a) DC-ADM 008 requires PREA data collected to be securely retained on the Department's secure servers.</p> <p>Subsection (b) (c) DC-ADM 008 states that the Department shall make all aggregated sexual abuse data information from facilities under its direct control and contracted facilities readily available to the public through the Department website, at least annually. Specific identifying information collected for reported purposes shall be redacted so no individual is identifiable or if publication would present a clear and specific danger to the facility. The nature of the redaction must be indicated. The PREA Coordinator confirmed that incident-based data is collected and that information is compiled in an annual report. The annual reports are easily located on the Department's public website.</p> <p>Subsection (d) As per DC-ADM 008, collected PREA data is retained for a period of no less than ten years after the date of the initial collection unless federal, state, or local law requires otherwise. In viewing the Department's public website, the annual PREA Reports for 2014, 2015, 2016, 2017, and 2018 are available for public viewing.</p> |

| | |
|---------|---|
| 115.401 | Frequency and scope of audits |
| | <p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 1493 432">Subsection (a)(b) During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency has ensured that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once. This was verified by reviewing all of the audit reports from August 20, 2013 to present. I also verified that annually at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited.</p> <p data-bbox="240 463 1123 490">Subsection (h) During the audit process I had access to all areas of the audited facilities.</p> <p data-bbox="240 521 1158 548">Subsection (i) I received copies of all relevant documents associated with the audit process.</p> <p data-bbox="240 580 1090 607">Subsection (m) During the onsite audit I conducted private interviews with reentrants.</p> <p data-bbox="240 638 1313 665">Subsection (n) Reentrants and Staff were permitted to send me confidential information or correspondence.</p> |

| | |
|---------|--|
| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Subsection (f) All final audit reports are available to the public on the agency website. This was confirmed by navigating to the website and reviewing the audit reports. |

| Appendix: Provision Findings | | |
|-------------------------------------|--|-----|
| 115.211 (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 |
| 115.211 (b) | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator | |
| | Has the agency employed or designated an agency-wide PREA Coordinator? | yes |
| | Is the PREA Coordinator position in the upper-level of the agency hierarchy? | yes |
| | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities? | yes |
| 115.212 (a) | Contracting with other entities for the confinement of residents | |
| | If this agency is public and it contracts for the confinement of its residents with private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and 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 residents.) | yes |
| 115.212 (b) | Contracting with other entities for the confinement of residents | |
| | 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 residents.) | yes |
| 115.212 (c) | Contracting with other entities for the confinement of residents | |
| | If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.) | na |
| | In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.) | na |
| 115.213 (a) | Supervision and monitoring | |
| | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect residents against sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The physical layout of each facility? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the resident population? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? | yes |

| | | |
|--------------------|---|-----|
| 115.213 (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? (NA if no deviations from staffing plan.) | na |
| 115.213 (c) | Supervision and monitoring | |
| | In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns? | yes |
| | In the past 12 months, has the facility 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 assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels? | yes |
| 115.215 (a) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners? | yes |
| 115.215 (b) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.) | na |
| | Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) | na |
| 115.215 (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 residents? | yes |
| 115.215 (d) | Limits to cross-gender viewing and searches | |
| | Does the facility have policies that enable residents to shower, perform bodily functions, and change clothing without non-medical 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 have procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical 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 area where residents are likely to be showering, performing bodily functions, or changing clothing? | yes |

| | | |
|--------------------|---|-----|
| 115.215 (e) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status? | yes |
| | If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, 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 |
| 115.215 (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 residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |

| 115.216 (a) | Residents with disabilities and residents who are limited English proficient | |
|--------------------|--|-----|
| | Does the agency take appropriate steps to ensure that residents 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: Residents who are deaf or hard of hearing? | yes |
| | Does the agency take appropriate steps to ensure that residents 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: Residents who are blind or have low vision? | yes |
| | Does the agency take appropriate steps to ensure that residents 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: Residents who have intellectual disabilities? | yes |
| | Does the agency take appropriate steps to ensure that residents 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: Residents who have psychiatric disabilities? | yes |
| | Does the agency take appropriate steps to ensure that residents 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: Residents who have speech disabilities? | yes |
| | Does the agency take appropriate steps to ensure that residents 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 residents 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 residents with disabilities including residents who: Have intellectual disabilities? | yes |
| | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents 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 residents with disabilities including residents who: Who are blind or have low vision? | yes |
| 115.216 (b) | Residents with disabilities and residents 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 residents 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 |

| | | |
|--------------------|--|-----|
| 115.216 (c) | Residents with disabilities and residents who are limited English proficient | |
| | Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations? | yes |
| 115.217 (a) | Hiring and promotion decisions | |
| | Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ? | yes |
| | Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents 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 the services of any contractor who may have contact with residents 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 the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ? | yes |
| 115.217 (b) | Hiring and promotion decisions | |
| | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents? | yes |
| | Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents? | yes |
| 115.217 (c) | Hiring and promotion decisions | |
| | Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check? | yes |
| | Before hiring new employees who may have contact with residents, 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 |
| 115.217 (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 residents? | yes |
| 115.217 (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 residents or have in place a system for otherwise capturing such information for current employees? | yes |

| | | |
|--------------------|---|-----|
| 115.217 (f) | Hiring and promotion decisions | |
| | Does the agency ask all applicants and employees who may have contact with residents 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 residents 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 |
| 115.217 (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 |
| 115.217 (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 |
| 115.218 (a) | Upgrades to facilities and technology | |
| | 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 residents 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 |
| 115.218 (b) | Upgrades to facilities and technology | |
| | 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 residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.) | na |
| 115.221 (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 |
| 115.221 (b) | Evidence protocol and forensic medical examinations | |
| | Is this protocol developmentally appropriate for youth where applicable? (NA 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? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.) | yes |

| | | |
|--------------------|--|-----|
| 115.221 (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 |
| 115.221 (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? | no |
| | Has the agency documented its efforts to secure services from rape crisis centers? | yes |
| 115.221 (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 |
| 115.221 (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 agency 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 |
| 115.221 (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 115.221(d) above). | na |
| 115.222 (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 |

| | | |
|--------------------|---|-----|
| 115.222 (b) | Policies to ensure referrals of allegations for investigations | |
| | Does the agency have a policy 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 |
| 115.222 (c) | Policies to ensure referrals of allegations for investigations | |
| | If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).) | yes |
| 115.231 (a) | Employee training | |
| | Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with residents 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 residents on: Residents' right to be free from sexual abuse and sexual harassment? | yes |
| | Does the agency train all employees who may have contact with residents on: The right of residents 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 residents on: The dynamics of sexual abuse and sexual harassment in confinement? | yes |
| | Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims? | yes |
| | Does the agency train all employees who may have contact with residents 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 residents on: How to avoid inappropriate relationships with residents? | yes |
| | Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents? | yes |
| | Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? | yes |
| 115.231 (b) | Employee training | |
| | Is such training tailored to the gender of the residents at the employee's facility? | yes |
| | Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa? | yes |

| | | |
|--------------------|---|-----|
| 115.231 (c) | Employee training | |
| | Have all current employees who may have contact with residents 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 |
| 115.231 (d) | Employee training | |
| | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? | yes |
| 115.232 (a) | Volunteer and contractor training | |
| | Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? | yes |
| 115.232 (b) | Volunteer and contractor training | |
| | Have all volunteers and contractors who have contact with residents 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 residents)? | yes |
| 115.232 (c) | Volunteer and contractor training | |
| | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? | yes |
| 115.233 (a) | Resident education | |
| | During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment? | yes |
| | During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment? | yes |
| | During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment? | yes |
| | During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents? | yes |
| | During intake, do residents receive information regarding agency policies and procedures for responding to such incidents? | yes |
| 115.233 (b) | Resident education | |
| | Does the agency provide refresher information whenever a resident is transferred to a different facility? | yes |

| | | |
|--------------------|---|-----|
| 115.233 (c) | Resident education | |
| | Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient? | yes |
| | Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf? | yes |
| | Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired? | yes |
| | Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled? | yes |
| | Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills? | yes |
| 115.233 (d) | Resident education | |
| | Does the agency maintain documentation of resident participation in these education sessions? | yes |
| 115.233 (e) | Resident education | |
| | In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats? | yes |
| 115.234 (a) | Specialized training: Investigations | |
| | In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)). | yes |
| 115.234 (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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(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 criminal or administrative sexual abuse investigations. See 115.221(a)). | yes |
| 115.234 (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 criminal or administrative sexual abuse investigations. See 115.221(a).) | yes |

| | | |
|--------------------|--|-----|
| 115.235 (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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | 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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | 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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | 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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| 115.235 (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 does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.) | na |
| 115.235 (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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| 115.235 (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 §115.231? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.) | yes |
| | Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? (N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.) | yes |
| 115.241 (a) | Screening for risk of victimization and abusiveness | |
| | Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents? | yes |
| | Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents? | yes |
| 115.241 (b) | Screening for risk of victimization and abusiveness | |
| | Do intake screenings ordinarily take place within 72 hours of arrival at the facility? | yes |
| 115.241 (c) | Screening for risk of victimization and abusiveness | |
| | Are all PREA screening assessments conducted using an objective screening instrument? | yes |

| | | |
|--------------------|--|-----|
| 115.241 (d) | Screening for risk of victimization and abusiveness | |
| | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident's criminal history is exclusively nonviolent? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident 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 residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident 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 residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization? | yes |
| | Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability? | yes |
| 115.241 (e) | Screening for risk of victimization and abusiveness | |
| | In assessing residents 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 residents 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 residents 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 |
| 115.241 (f) | Screening for risk of victimization and abusiveness | |
| | Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? | yes |
| 115.241 (g) | Screening for risk of victimization and abusiveness | |
| | Does the facility reassess a resident's risk level when warranted due to a: Referral? | yes |
| | Does the facility reassess a resident's risk level when warranted due to a: Request? | yes |
| | Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse? | yes |
| | Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness? | yes |

| | | |
|--------------------|--|-----|
| 115.241 (h) | Screening for risk of victimization and abusiveness | |
| | Is it the case that residents 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 |
| 115.241 (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 resident's detriment by staff or other residents? | yes |
| 115.242 (a) | Use of screening information | |
| | Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents 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 § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? | yes |
| 115.242 (b) | Use of screening information | |
| | Does the agency make individualized determinations about how to ensure the safety of each resident? | yes |
| 115.242 (c) | Use of screening information | |
| | When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents 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 residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems? | yes |
| 115.242 (d) | Use of screening information | |
| | Are each transgender or intersex resident'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 |
| 115.242 (e) | Use of screening information | |
| | Are transgender and intersex residents given the opportunity to shower separately from other residents? | yes |

| | | |
|--------------------|--|-----|
| 115.242 (f) | 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 residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.) | 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 residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.) | 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 residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
| 115.251 (a) | Resident reporting | |
| | Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment? | yes |
| | Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? | yes |
| 115.251 (b) | Resident reporting | |
| | Does the agency also provide at least one way for residents 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 resident reports of sexual abuse and sexual harassment to agency officials? | yes |
| | Does that private entity or office allow the resident to remain anonymous upon request? | yes |
| 115.251 (c) | Resident reporting | |
| | Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? | yes |
| | Do staff members promptly document any verbal reports of sexual abuse and sexual harassment? | yes |
| 115.251 (d) | Resident reporting | |
| | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents? | yes |

| | | |
|--------------------|---|-----|
| 115.252 (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 resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident 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 |
| 115.252 (b) | Exhaustion of administrative remedies | |
| | Does the agency permit residents 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 a resident 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 |
| 115.252 (c) | Exhaustion of administrative remedies | |
| | Does the agency ensure that: a resident 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 |
| 115.252 (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 residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) | na |
| | If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident 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 resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) | na |
| 115.252 (e) | Exhaustion of administrative remedies | |
| | Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) | na |
| | Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) | na |
| | If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.) | na |

| | | |
|--------------------|---|-----|
| 115.252 (f) | Exhaustion of administrative remedies | |
| | Has the agency established procedures for the filing of an emergency grievance alleging that a resident 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 a resident 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 resident 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 |
| 115.252 (g) | Exhaustion of administrative remedies | |
| | If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.) | na |
| 115.253 (a) | Resident access to outside confidential support services | |
| | Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents 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 enable reasonable communication between residents and these organizations, in as confidential a manner as possible? | yes |
| 115.253 (b) | Resident access to outside confidential support services | |
| | Does the facility inform residents, 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 |
| 115.253 (c) | Resident 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 residents 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 |
| 115.254 (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 a resident? | yes |

| | | |
|--------------------|--|-----|
| 115.261 (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 residents 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 |
| 115.261 (b) | Staff and agency reporting duties | |
| | Apart from reporting to designated supervisors or officials, do 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 |
| 115.261 (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 residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? | yes |
| 115.261 (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 |
| 115.261 (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 |
| 115.262 (a) | Agency protection duties | |
| | When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident? | yes |
| 115.263 (a) | Reporting to other confinement facilities | |
| | Upon receiving an allegation that a resident 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 |
| 115.263 (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 |
| 115.263 (c) | Reporting to other confinement facilities | |
| | Does the agency document that it has provided such notification? | yes |
| 115.263 (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 |

| | | |
|--------------------|--|-----|
| 115.264 (a) | Staff first responder duties | |
| | Upon learning of an allegation that a resident 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 a resident 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 a resident 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 a resident 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 |
| 115.264 (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 |
| 115.265 (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 |
| 115.266 (a) | Preservation of ability to protect residents 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 limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| 115.267 (a) | Agency protection against retaliation | |
| | Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff? | yes |
| | Has the agency designated which staff members or departments are charged with monitoring retaliation? | yes |
| 115.267 (b) | Agency protection against retaliation | |
| | Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |

| | | |
|--------------------|---|-----|
| 115.267 (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 residents 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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 resident 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:4. Monitor resident 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 resident 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 reassignment of staff? | yes |
| | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? | yes |
| 115.267 (d) | Agency protection against retaliation | |
| | In the case of residents, does such monitoring also include periodic status checks? | yes |
| 115.267 (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 |
| 115.271 (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 115.221(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 115.221(a).) | yes |
| 115.271 (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 115.234? | yes |

| | | |
|--------------------|---|-----|
| 115.271 (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 |
| 115.271 (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 |
| 115.271 (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 resident or staff? | yes |
| | Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? | yes |
| 115.271 (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 |
| 115.271 (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 |
| 115.271 (h) | Criminal and administrative agency investigations | |
| | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? | yes |
| 115.271 (i) | Criminal and administrative agency investigations | |
| | Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? | yes |
| 115.271 (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 facility or agency does not provide a basis for terminating an investigation? | yes |
| 115.271 (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 any form of administrative or criminal sexual abuse investigations. See 115.221(a).) | yes |
| 115.272 (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 |

| | | |
|--------------------|---|-----|
| 115.273 (a) | Reporting to residents | |
| | Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? | yes |
| 115.273 (b) | Reporting to residents | |
| | If the agency did not conduct the investigation into a resident'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 resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) | yes |
| 115.273 (c) | Reporting to residents | |
| | Following a resident'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 resident's unit? | yes |
| | Following a resident'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 resident'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 resident'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 |
| 115.273 (d) | Reporting to residents | |
| | Following a resident's allegation that he or she has been sexually abused by another resident, 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 a resident's allegation that he or she has been sexually abused by another resident, 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 |
| 115.273 (e) | Reporting to residents | |
| | Does the agency document all such notifications or attempted notifications? | yes |
| 115.276 (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 |
| 115.276 (b) | Disciplinary sanctions for staff | |
| | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? | yes |

| | | |
|--------------------|---|-----|
| 115.276 (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 |
| 115.276 (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 |
| 115.277 (a) | Corrective action for contractors and volunteers | |
| | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents? | 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 |
| 115.277 (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 residents? | yes |
| 115.278 (a) | Disciplinary sanctions for residents | |
| | Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process? | yes |
| 115.278 (b) | Disciplinary sanctions for residents | |
| | Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories? | yes |
| 115.278 (c) | Disciplinary sanctions for residents | |
| | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior? | yes |
| 115.278 (d) | Disciplinary sanctions for residents | |
| | 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 resident to participate in such interventions as a condition of access to programming and other benefits? | yes |
| 115.278 (e) | Disciplinary sanctions for residents | |
| | Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact? | yes |

| | | |
|--------------------|--|-----|
| 115.278 (f) | Disciplinary sanctions for residents | |
| | 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 |
| 115.278 (g) | Disciplinary sanctions for residents | |
| | Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.) | yes |
| 115.282 (a) | Access to emergency medical and mental health services | |
| | Do resident 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 |
| 115.282 (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 § 115.262? | yes |
| | Do security staff first responders immediately notify the appropriate medical and mental health practitioners? | yes |
| 115.282 (c) | Access to emergency medical and mental health services | |
| | Are resident 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 |
| 115.282 (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 |
| 115.283 (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 residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? | yes |
| 115.283 (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 |
| 115.283 (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 |
| 115.283 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all-male" facility. Note: in "all-male" facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na |

| | | |
|--------------------|---|-----|
| 115.283 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | If pregnancy results from the conduct described in paragraph § 115.283(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. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na |
| 115.283 (f) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? | yes |
| 115.283 (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 |
| 115.283 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? | yes |
| 115.286 (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 |
| 115.286 (b) | Sexual abuse incident reviews | |
| | Does such review ordinarily occur within 30 days of the conclusion of the investigation? | yes |
| 115.286 (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 |
| 115.286 (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 §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? | yes |
| 115.286 (e) | Sexual abuse incident reviews | |
| | Does the facility implement the recommendations for improvement, or document its reasons for not doing so? | yes |

| | | |
|--------------------|---|-----|
| 115.287 (a) | Data collection | |
| | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? | yes |
| 115.287 (b) | Data collection | |
| | Does the agency aggregate the incident-based sexual abuse data at least annually? | yes |
| 115.287 (c) | Data collection | |
| | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? | yes |
| 115.287 (d) | Data collection | |
| | Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? | yes |
| 115.287 (e) | Data collection | |
| | Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.) | yes |
| 115.287 (f) | Data collection | |
| | Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) | na |
| 115.288 (a) | Data review for corrective action | |
| | Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? | yes |
| | Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? | yes |
| | Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? | yes |
| 115.288 (b) | Data review for corrective action | |
| | Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse? | yes |
| 115.288 (c) | Data review for corrective action | |
| | Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? | yes |
| 115.288 (d) | Data review for corrective action | |
| | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? | yes |
| 115.289 (a) | Data storage, publication, and destruction | |
| | Does the agency ensure that data collected pursuant to § 115.287 are securely retained? | yes |

| | | |
|--------------------|---|-----|
| 115.289 (b) | Data storage, publication, and destruction | |
| | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? | yes |
| 115.289 (c) | Data storage, publication, and destruction | |
| | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? | yes |
| 115.289 (d) | Data storage, publication, and destruction | |
| | Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? | yes |
| 115.401 (a) | Frequency and scope of audits | |
| | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.) | yes |
| 115.401 (b) | Frequency and scope of audits | |
| | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.) | no |
| | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) | na |
| | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | 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 residents? | yes |
| 115.401 (n) | Frequency and scope of audits | |
| | Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | yes |
| 115.403 (f) | Audit contents and findings | |
| | The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) | yes |