# PREA AUDIT REPORT ☐ Interim ☒ Final LOCKUPS

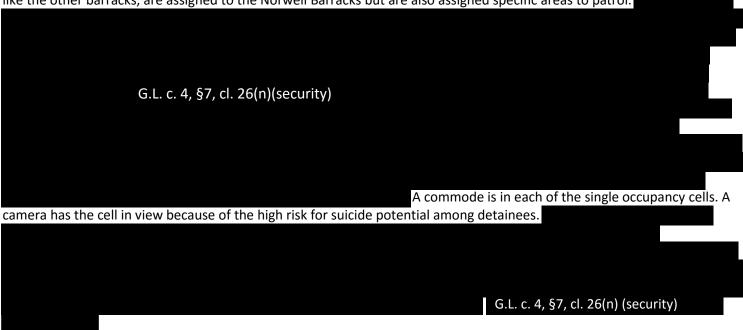
Date of report: March 26, 2017

Auditor Information							
Auditor name: Robert Lan	ier						
Address: PO Box 452, Blac	kshear, GA 31516						
Email: rob@diversifiedcorre	ectionalservices.com						
Telephone number: 912-	281-1525						
Date of facility visit: Octo	ober 17, 2016						
Facility Information							
Facility name: Massachuse	etts State Police Barracks, I	D-1, Norw	ell				
Facility physical address	6: 6 West Street, Route 123,	, Norwell,	MA 02061				
Facility mailing address	: (if different from above)	Click her	e to enter tex	it.			
Facility telephone numb	<b>oer:</b> 508-829-8415						
The facility is:	☐ Federal		State	State     ■ State		□ Co	unty
	☐ Military		☐ Municipa	al		☐ Pri\	vate for profit
	☐ Private not for profit						
Facility type:	□ Police	☐ Sher	iff		☐ Court Holding		☐ Other
Name of facility's Chief	Executive Officer: Lieu	itenant Jai	nes N. Odonr	nell			
G.L. c. 4, §7, cl. 26(n) (se	curity)						
Designed facility capaci	ty: 2						
Current population of fa	cility: 0						
Age range of the popula	ition: 19-59						
Name of PREA Compliance Manager: N/A  Title: Click here to enter text.							
Email address: Click here to enter text.  Telephone number: Click here to enter text.							
Agency Information							
Name of agency: Massach	nusetts State Police						
Governing authority or	parent agency: (if appl	<i>licable)</i> M	[assachusetts]	Exec	utive Office of Publ	ic Safet	y and Security
Physical address: 470 Wo	orcester Road, Framingham	, MA 017	02				
Mailing address: (if different from above) Click here to enter text.							
Telephone number: (508) 820-2300							
Agency Chief Executive Officer							
Name: Colonel Richard D. McKeon – Superintendent  Title: Superintendent							
Email address: richard.mckeon@MassMail.State.MA.US  Telephone number: (508) 820-2300							
Agency-Wide PREA Coordinator							
Name: Det. Capt. Phillip Do	Name: Det. Capt. Phillip Dowd  Title: Detective Captain/PREA Coordinator						
Email address: Timothy.Dowd@MassMail.State.MA.US			<b>Telephone number:</b> (508) 820-2660				

#### **AUDITFINDINGS**

#### **NARRATIVE**

The PREA Audit of the Massachusetts State Police Barracks, D-1, Norwell, was conducted on October 19, 2016. The State Police Barracks contain holding cells to detain individuals arrested by the troopers. These detainees are brought into the facility for booking and if unable to post bond or to secure release, they are detained. These offenders are often released after the booking process and troopers assist the offenders by allowing them to contact family and others who might be able to help them post their required bond. Detainees may be released prior to even being placed in a cell. Most detainees are released within hours however occasionally they may be detained over a weekend if arrested on a Friday afternoon. Prior to the audit, ongoing communications occurred between G4S and the MSP Deputy Chief Legal Counsel regarding the audit and audit process. Six weeks prior to the on-site audit, the Notice of PREA Audit was forwarded to the facility to be prominently posted where it would be visible to staff, detainees, visitors, contractors or any volunteers and interns. The auditor did not receive any communications from staff, detainees, visitors, contractors, volunteers or interns. Thirty (30) days prior to the on-site audit the facility provided a flash drive containing the Agency's policies, procedures, training bulletins, general orders and other documents to support compliance with the PREA Standards. The auditor reviewed the information provided and communicated where additional information was needed. By prior agreement the auditor arrived at the barracks at 5:00AM to interview overnight troopers prior to the end of their shift. The auditor was met by the Barracks Commander at 5:00 AM. The commander wanted to assure the auditor that he wanted to provide anything the auditor needed. It was evident "early on" that this Lieutenant, was proud of his unit and was committed to supporting the audit process. Troopers in this barrack, like the other barracks, are assigned to the Norwell Barracks but are also assigned specific areas to patrol.



#### DESCRIPTION OF FACILITY CHARACTERISTICS

Norwell Barracks, D-1, is primarily responsible for patrolling 26 miles of Route 3 from Braintree to Plymouth. This barracks also provided 68 miles of secondary patrol coverage of Routes 228, 3A, 123 and 53. Norwell also provides seasonal patrol of the area surrounding Nantasket Beach in Hull, an extremely popular and bustling destination in summer. Wompatuck State Park in Hingham is within Norwell's boundaries and offers camping, fishing, bicycle trails and hiking trails. The barracks are located in an attractive older two story building of brick construction. The bottom floor contains

G.L. c. 4, §7, cl. 26(n) (security)

and two cells in

the cell block area. The desk post serves as the communication/control center.

G.L. c. 4, §7, cl. 26(n)(security)

Each cell has a bunk and a commode. There are no showers in the facility and detainees are provided a wash basin for cleaning up. Detainees are generally detained after being booked only until they can post bail or are otherwise released by the courts. One detainee was arrested and brought in for booking. Because the arrested female was emotional after having been involved in a vehicle accident, the auditor was unable to interview her however the auditor was able to observe the "booking" process in which the detainee was provided PREA related information verbally using the PREA Placard mounted on the wall in the booking area. The detainee was told of the Zero Tolerance Policy and how to report allegations of sexual abuse or sexual harassment, including the telephone number to Citizens' Response. The detainee was asked if she had any questions or concerns. Her only concern was contacting someone to post her bond. The Trooper was very professional and assisted the detainee in making calls. Within an hour, the detainee was released, just after having been placed in the holding cell. The detainee was also screened by the trooper for vulnerability for victimization and/or abusiveness. This was documented in the data base.

There are assigned to the D-1 Barracks. These included a Lieutenant (Barracks Commander), Sergeants and troopers. G.L. c. 4, §7, cl. 26(n) (security) Detainees range in age from 19 to 59 however juveniles are not held in the cells. There are two small holding cells in the facility. Each cell is furnished with a bed and commode.

G.L. c. 4, §7, cl. 26(n)(security)

The Norwell, D-1 Barracks houses individuals who have been arrested and need to be detained while they await court, make bond or transfer to another facility. Lengths of stay vary however staff report the longest an individual would be detained in a holding cell would be three days over a long weekend. There were no detainees in the facility on the day of the audit.

#### SUMMARY OF AUDIT FINDINGS

The Standards applicable to this facility are the PREA Standards for Lockups. The audit process consisted of reviewing documentation on the flash drive, including policies, procedures, training bulletins, general orders training rosters and other documents explaining operations and to support compliance with the PREA Standards. It also involved reviewing documentation on-site and following the audit, interviewing staff and observations made during the audit. The following were interviewed. The Lieutenant who is responsible for the entire operation of the facility, the agency's PREA Coordinator, the agency head's designee, the shift commander, desk staff, and randomly selected staff, who also perform intake and victimization screening in compliance with departmental policy. Each PREA standard was evaluated separately using the verbiage of the standard, nothing more or less. Based on the documentation provided, interviews and observations, the auditor rated each standard. Additional documentation was requested to be provided after the audit and during an interim period. Corrective actions are identified in the applicable standard's narrative. Thirty (30) standards were initially rated as "Meets" and three (3) standards were rated as "not met". The three standards rated "not met" included the following: 115.115, Limists to Cross Gender Viewing and Searches; 115.117, Hiring and Promotion Decisions; and 115.167, Agency Protection Against Retaliation. Corrective action plans were developed and the agency provided documentation to indicated compliance. All standards are now rated "met".

Number of standards exceeded: 0

Number of standards met: 32

Number of standards not met: 0

Number of standards not applicable: 1

#### Standard 115.111 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

The agency and facility has a zero tolerance for all forms of sexual activity between detainees, detainees and staff and between volunteers, contractors and staff. Zero tolerance is required in the MSP Academy Training Bulletin, 2016-09, Prison Rape Elimination Act of 2003 (PREA), Your Responsibilities Under PREA and acknowledges and documents that the MSP has a Zero Tolerance for all forms of sexual conduct between detainees, or detainees and staff, volunteers, contractors or visitors and that the MSP will investigate all complaints of sexual assault of sexual harassment. MSP, General Order, PRI-07, Detainee Sexual Abuse and Sexual Harassment, May 20, 2016, establishes a zero tolerance policy towards all forms of sexual abuse and sexual harassment towards any detainee and ensures that all detainees have the right to be free from sexual abuse and sexual harassment. The Prison Rape Elimination Act and Standards Training Bulletin reiterates the MSP's Zero Tolerance Policy. Agency policy requires that the agency appoint a PREA Coordinator staff member who has attained the rank of Captain or higher as the PREA Coordinator. The PREA Coordinator for the agency is a Captain of Detectives. An interview with the PREA Coordinator indicated he is knowledgeable, has a grasp of implementing PREA and that he is committed, as is the agency, to the sexual safety of detainees. Too, his rank enables him to have access to the agency's command staff to secure their support in implementing PREA. He indicated in his interview that he does receive great support from the command staff in implementing PREA. Staff, in their interviews, related that they understand the agency has a Zero Tolerance Policy and that any form of sexual misconduct, sexual abuse and sexual harassment is prohibited. The Lieutenant and troopers at the Norwell Barracks were very knowledgeable of PREA and responded to questions asked during interviews with quick responses, correct information and confidence. Detainees are made aware of the Zero Tolerance Policy via a sign the booking room. The sign describes sexual assault as an act of violence and provides information related to ways detainees can report sexual assault or sexual harassment. This includes providing telephone numbers to the Massachusetts Attorney General's Office and for outside reporting to Citizenresponse@pol.state.ma.us . The agency's website contains PREA related information and identifies a Zero Tolerance for sexual abuse as well as providing information on how to report it. Interviews with staff indicated that they had received training described and provided in MSP Academy Training Bulletin 2016-09 relating to the Zero Tolerance Policy. Training rosters were provided as well, documenting that staff have completed the required training. There were no detainees in the facility to be interviewed during the audit. The auditor observed the "booking" process during which a trooper who had just arrested a female who had been involved in a vehicle accident very professionally and slowly explained the Zero Tolerance Policy, the detainee's rights to be free from sexual abuse and sexual harassment and how to report sexual abuse, sexual harassment and retaliation. At the conclusions of his explanations, he patiently asked the detainee if they understood the information he had just given them or if they had questions they needed clarified. The presentation he made was impressive.

# Standard 115.112 Contracting with other entities for the confinement of detainees

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the
relevant review period)

		Does Not Meet Standard (requires corrective action)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
This st	andard is	rated non-applicable. The agency does not contract for the confinement of detainees.
Stand	ard 115	.113 Supervision and monitoring
		Exceeds Standard (substantially exceeds requirement of standard)
	$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
-		State Police General Order, PRI-06, Prison Monitoring, dated March 1, 2016, states that continuous ssential for maintaining and assuring the safety and welfare of prisoners while in custody.
		G.L. c. 4, §7, cl. 26(n)(security)
G.L. omission who see barrace	sult of the c. 4, §7, con. There erve defined the control of the c	administrative staff in each barracks and from headquarters indicated that minimum staffing is essentially e agreements between the MSP Administration and the employee's union. Minimum staffing is a depending on the needs of the individual barracks based on its are also troopers who are assigned to work with the courts. Some of the barracks have civilian dispatchers need catchment areas. Each of the barracks contains between two and three cells. Each of the audited a practice of not "double-bunking" in any cell, therefore detainees are housed in single occupancy cells with lly, they have a practice that prohibits placing a male in a cell next to a female.
detain remain mainta facility harass and co staffing the un Norwedemor recent	ees kept of until co nined. Int of, compose ment du nsidered g is predi its and ir Il State P nstrated I ly been p	often released within hours, following admission, on bail or for other reasons. Only occasionally are adult more than a few days and this occurs generally on Fridays after court resulting in the detainee having to urt the following week. Observations during the audit period confirmed that the minimum staffing was serviews with staff indicated that in developing the staffing plan staff did consider the physical layout of the sition of the population and other relevant factors. There have been no allegations of sexual assault or sexual ring the past twelve months but had there been any, staff indicated that these incidents would be reviewed in the staffing plan development. Acting as the Agency Head's designee, the PREA Coordinator advised that feated upon the requirements of the contract with the bargaining units. Currently that staffing varies among accludes either  G.L. c. 4, §7, cl. 26(n) (security)  The volice Barracks are managed by a young energetic and proactive professional, a lieutenant. The lieutenant his commitment to PREA by meeting the PREA Auditor at 5:00AM. Discussions with him indicated that he has promoted to Barracks Commander but it was evident that the barracks was prepared for their audit and that and his troopers were very knowledgeable of PREA, Zero Tolerance, First Responding and Reporting. They all nort

indicated they would not use a detainee to interpret for another detainee but that they had professional telephonic translations services and several of the troopers indicated they had used the telephone interpretive services in non-PREA related situation. The Lieutenant indicated that he takes sexual safety seriously. Interviews with the PREA Coordinator and the Agency Head's Designee indicated that the facility has developed a staffing plan that considers the physical layout of each lockup, composition of the detainee population and the prevalence of substantiated and unsubstantiated incidents of sexual abuse if there were any. The minimum staffing is always met but if exigent circumstances existed they would be documented. Interviewed staff related that the minimum staffing is always maintained.

G.L. c. 4, §7, cl. 26(n)(security)

Department will need to document annual reviews as required in the PREA Standards. There have been no allegations of sexual abuse or sexual harassment during the past twelve (12) months.

#### Standard 115.114 Juveniles and youthful detainees

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

Juvenile Operations, INV-05, requires that juvenile prisoners must be separated by sight and sound from any adult prisoners. The facility may have juveniles and youthful offenders who have been arrested and taken to the barracks for booking. Specific instructions for processing and housing juveniles are posted prominently in the booking rooms of each of the barracks. Staff interviews confirmed that juveniles are, as are the adults, released as expeditiously as possible either on bail, to parents or legal guardians or they are taken to a juvenile facility. The posted instruction and protocol requires that juveniles are kept sight and sound separation from any adult detainees. Interviews with staff confirmed that juveniles are

G.L. c. 4, §7, cl. 26(n)(security)

Any adults who might be incarcerated in a holding cell are not allowed out of the cells. If an adult is incarcerated, the juvenile would be kept in the booking room and if not released to his/her parents or guardians, the juvenile would be taken to a juvenile facility for housing. Although the procedures for handling juvenile and youthful offenders is posted in the booking area and available to troopers, it is recommended that this information and instructions be incorporated into Policy and describe how the agency achieves and ensures sight and sound separation at the lockup.

# Standard 115.115 Limits to cross-gender viewing and searches

Exceeds Standard (substanti	ally exceeds requirement of standard
-----------------------------	--------------------------------------

Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

	Does Not Meet Standard (requires corrective action)
deterr must a recom	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
	staff indicated that they are prevented from conducting cross gender strip or body cavity searches however tted to conduct cross gender pat/frisk searches. Staff also related that they had received training to enable

Interviews with staff indicated that they are prevented from conducting cross gender strip or body cavity searches however they are permitted to conduct cross gender pat/frisk searches. Staff also related that they had received training to enable them to conduct cross gender pat/frisk searches in a manner to minimize allegations from opposite gender detainees. Staff also related they are not allowed to search a transgender detainee for the sole purpose of determining the detainee's genital status and how to conduct searches of transgender and intersex detainees in a professional and respectful manner. Detainees are generally not held for more than a day except on long weekends and are not permitted to shower. There are no showering facilities in the barracks. Detainees are given a wash basin after a designated period of incarceration. They also are prohibited from changing clothing in the cells. A commode is in each cell.

G.L. c. 4, §7, cl. 26(n)(security)

The agency promulgated a policy, Department of State Police Division Commander's Order, Prison Rape Elimination Act-PREA, dated January 6, 2017, requiring that, absent any exigent circumstances, detainees will be allowed to perform bodily functions without members or employees viewing their breasts, buttocks, or genitalia of a detainee. There was also no policy requiring staff to announce their presence when entering a cell block housing detainees of the opposite gender. Following a corrective action period the Department issued the Division Commander's Order that requires, absent exigent circumstances, staff will announce their presence prior to entering the cell block area and that members shall not position themselves where they can view the breasts, buttocks, or genitalia of a detainee.

G.L. c. 4, §7, cl. 26(n)(security)

# Standard 115.116 Detainees with disabilities and detainees who are limited English proficient

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

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.

Correspondence from the Division Commander, dated February 3, 2014, Century Link Language/Interpreters Line, confirms that the Department has set up an account for language translation for the barracks. The dedicated number to use is identified and provided. Information needed to access the services is described. Documentation of the use of interpretive services should be made in the trooper's report and in the Daily Administrative Journal. Interviews with staff indicated that they would not ordinarily rely upon a detainee to provide interpretive services for a detainee in making a report or allegation of sexual abuse. Interviewed troopers were aware of the services available and although they have never used the services for reporting sexual abuse, most of them stated they had used the interpretive services for other reasons with detainees. Detainees are not allowed to serve as interpreters or translators except in exigent circumstances. Interviewed staff related they would not allow a detainee to translate for another detainee. Every interviewed trooper stated they would

use the agency's telephone interpretive services. They also related they have used those services in the past and know how to access them. They explained that they had used the interpretive services in non-PREA related situations. Staff also stated that in the event they had a detainee who was limited intellectually or could not read well, that they would read the PREA related information to the detainee to ensure they completely understood zero tolerance and how to report. It is recommended that the agency consider stating in policy how staff would provide interpretive services for detainees who are intellectually (such as reading information) and for hearing impaired or visually impaired detainees.

#### Standard 115.117 Hiring and promotion decisions

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

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.

Interviews with the Agency Personnel Director and an assistant, as well as reviewed personnel files, confirmed that the facility has a very thorough process for conducting background checks. Multiple checks are made and these include the following: AFIS (FBI and Fusion Checks); LEAPS (Law Enforcement Processing System); NCIC (National Check); BOP (Probation Check); COP LINK (Information Sharing); Q-5 (Suicide Check); III (Interstate Identification Index); Local Police Department Checks; SOR (Sex Offender Registry), Local Courts Check; Licensing Boards Checks; KQ (Drivers Query); and the WMS (Warrant Management System). In addition, the process includes Checks for Child Support Records, Military Records, Firearms Licensing Data, Employee Interviews, Reference Interviews, Neighborhood Interviews, Tax Checks and Spousal Interviews. These background checks are conducted by the Massachusetts State Police Certification Unit. Samples of background checks were reviewed and found to be extensive and documented multiple checks as well as extensive interviews with the applicant former employers, applicant's spouse and neighbors.

The agency was not yet asking applicants the PREA related questions. Applicants were asked if they have ever had sexual contact with someone against their will; had sexual contact with someone mentally incapacitated or unable to give consent; had sex with a minor; or if they have ever paid for or been paid for engaging in sexual contact with another person. It was recommended that the PREA related questions be added to these. The agency was not conducting the required 5-year background checks but they do some form of background check when each trooper's firearm certification renewal is due. Following the interim report, the agency added these questions to the Background Investigation Questionnaire: Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution; Have you ever been convicted of engaging in 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?

Too, the agency was not conducting 5 year background checks. Since that time the agency provided documentation to indicate they are implementing the 5 year background checks. It should be noted, however that additional background checks being conducted during firearms recertification for each trooper. The agency has determined to accomplish the checks through a review of each members board of probation records which show any criminal charges.

#### Standard 115.118 Upgrades to facilities and technologies

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

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.

G.L. c. 4, §7, cl. 26(n)(security)

## Standard 115.121 Evidence protocol and forensic medical examinations

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

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.

General Order, PRI-07A, Detainee Sexual Abuse and Sexual Harassment Investigations, requires that the Department of State Police ensure full compliance with the standards found within federal laws and mandates regarding the Prison Rape Elimination Act (2003). The policy is also available on the Department's website and upon request. Policy requires the Department to investigate allegations of sexual abuse and sexual harassment from within the Department of State Police; follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence, development of an internal protocol appropriate for juveniles where applicable, offer all victims access to forensic medical examinations performed by a Sexual Assault Forensic Examiner or a qualified medical practitioner; attempt to make a victim advocate from a rape crisis center available to the detainee; accompany the victim through the forensic medical examination process and interviews and take appropriate measures to prevent retaliation against individuals who report and/or cooperate with an investigation. PRI-07A also requires the department investigators, when conducting an investigation into allegations of detainee sexual assault and/or sexual harassment, to gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; review prior complaints and reports of sexual abuse and/or sexual harassment involving the

suspected perpetrator; notify their Division Commander through channels of the possible outcome when the evidence appears to support criminal prosecution; and make relevant information regarding the status of the investigations available to the Department and/or requesting agency so that the detainee may be kept apprised of the investigation. When the evidence appears to support criminal prosecution, the Department Investigator consults with prosecutors about conducting compelled interviews. General Order, INV-01, Criminal Investigations, requires that investigations will be conducted in all matters of a criminal nature that fall within the jurisdiction of the Department. The Division of Investigative Services (DIS) investigates crimes and/or criminal activity as determined by the Colonel/Superintendent, District Attorney or Attorney General. The DIS is comprised of the State Police Detective Units, Statewide Investigative Units, Forensic Services and the Commonwealth Fusion Center. DIS members conduct investigations in accordance with their section/unit operating procedures. INV-01, also provides detailed instruction for actions to take by the first member arriving at a crime scene. General Order ADM-15, Internal Affairs, requires the Internal Affairs Section to investigate allegations of serious misconduct by employees of the Department or as ordered by the Office of the Superintendent or the Division of Standards and Training. ADM-15 also enumerates procedures for internal affairs cases. Interviews with two investigators confirmed that they have received specialized training through the Department of Corrections in conducting sexual abuse investigations in confinement settings. Additionally, the facility provided samples of Certificates of Training for conducting sexual assault investigations in confinement setting. Investigators follow a prescribed protocol in conducting investigations. They are also attached to the local District Attorney's Office enabling them to work hand in hand with the DA during the investigative process. Medical exams for victims of sexual assaults are conducted at the local emergency room by a Sexual Assault Nurse Examiner or a Sexual Assault Forensic Examiner.

# Standard 115.122 Policies to ensure referrals of allegations for investigations

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

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.

General Order, PRI-07, Detainee Sexual Abuse and Sexual Harassment, requires all employees to immediately report to their immediate supervisor any knowledge, suspicion, or information regarding an incident of detainee sexual abuse and/or sexual harassment that occurred within a Department lockup, any retaliation against detainees or Department employees who reported such an incident and employee neglect or violation of responsibilities that may have contributed to an incident or retaliation. The General Order also requires that an administrative or criminal investigation is completed for all allegations of sexual abuse and/or sexual harassment; that alleged detainee sexual abuse and/or sexual harassment incidents, including third-party and anonymous reports are reported to designated investigators. Investigators are required to have received special training in sexual abuse investigations pursuant to Code of Federal Regulations (CPR) 28 115.34. Multiple examples and Certificates of Training were provided confirming that staff were trained to conduct sexual abuse investigations in confinement settings. Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA) Your Responsibilities Under PREA, requires mandatory reporting as a result of any knowledge, suspicion, or information about an incident of sexual abuse. Staff must also report any neglect or violation of responsibilities that may have contributed to such incidents. Interviews with troopers, barracks commanders and two investigators confirmed that staff are required to report any allegation, knowledge, suspicion or report of sexual abuse, sexual harassment, or retaliation for investigation. Massachusetts State Police Investigators are attached to the local district attorney and conduct investigations in compliance with PRI-07, Detainee Sexual Abuse and Sexual Harassment Investigations. Investigators follow a uniform evidence protocol that maximizes the potential for obtaining usable physical

evidence. There have been no allegations of sexual abuse, sexual harassment or retaliation during the past 12 months however staff are aware of and knowledgeable of their responsibilities to report and have all allegations investigated.

# Standard 115.131 Employee and volunteer training

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

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.

Troopers were trained in PREA through the Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA. This bulletin discusses Zero Tolerance for all forms of sexual conduct between detainees, or detainees and staff, volunteers, contractors or visitors and the MSP will investigate all complaints of sexual assault or harassment. It discusses detainee rights to be free from sexual abuse and sexual harassment and the duty of the administrators of the lockups to uphold those rights. The dynamics of sexual abuse are briefly discussed. Assessing detainees for vulnerability to victimization and for those likely to abuse is required and discussed. Reporting, retaliation, investigation, and first responding are also covered in the bulletin. The facility provided a training roster indicating that staff had read and understood the contents of MSP Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA. General Order PRI-07, Detainee Sexual Abuse and Sexual Harassment, requires that employees who may have contact with lockup detainees adhere to the Department's Zero Tolerance Policy and ensure the detainee's rights to be free from sexual abuse and sexual harassment; ensure compliance with relevant laws related to mandatory reporting of sexual abuse and annually review the PREA Standards Bulletins posted to Docushare. Interviewed staff at Norwell Barracks were very knowledgeable of the Zero Tolerance Policy, their duty to report, first responding, the dynamics of sexual abuse and investigation. Most troopers related they received PREA training in the academy and then via the training bulletins.

# Standard 115.132 Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy

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

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.

Detainees are informed of the agency's zero tolerance policy and how to report sexual assault or sexual harassment. In the booking area is a prominently posted placard entitled "Sexual Assault is An Act of Violence". This poster advises viewers of Zero Tolerance for all forms of sexual conduct between detainees or detainees and staff, volunteers, contractors or visitors.

It also informs viewers that all complaints will be investigated and provides information on how to report sexual assault or sexual harassment. Numbers to the Attorney General's Office for reporting to an outside agency as well as an additional outside reporting number is provided. Lastly it also advises that family and friends may report on a detainee's behalf and gives a phone number and website address to visit the PREA link on the agency's website. The auditor heard that a detainee was enroute to the barracks for booking. Upon arrival at the barracks it was evident that the female detainee, just arrested as a result of a vehicle accident, was not emotionally able to be interviewed at that time. The auditor decided to wait until she calmed down however she was released within the hour and the auditor was not aware she was being released at that time. The auditor did go to the booking room to observe the admissions/booking process. The trooper arresting and booking the detainee was observed to provide a very thorough orientation during which he specifically read and explained every item on the PREA Placard. He read the information slowly and explained each item. Additionally, after completing his orientation to PREA, he asked the detainee if she had any questions or needed additional information. This process should be the model for providing that information. However, it is recommended that following provision of the information, the detainee sign an acknowledgment, either in writing or via electronic signature etc. It was noted that the Trooper conducted the PREA vulnerability screening and documented that in the database.

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

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.

General Order PRI-07A, Detainee Sexual Abuse and Sexual Harassment Investigation, requires the Department Investigators to receive special training in detainee sexual abuse and sexual harassment investigations according to the standard to include: techniques for interviewing sexually abused and sexually harassed 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. Interviews with the PREA Coordinator and two investigators confirmed that they received the specialized training required by the standard. They received it through the Department of Corrections. The Department also provided a sample of Certificates of Training to confirm that investigators received specialized training by the Department of Corrections to conduct sexual abuse investigations in confinement settings. There have been no allegations of sexual abuse or sexual harassment during the past twelve (12) months therefore there have been no investigations.

# Standard 115.141 Screening for risk of victimization and abusiveness

<ul> <li>✓ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)</li> <li>✓ Does Not Meet Standard (requires corrective action)</li> </ul>	Exceeds Standard (substantially exceeds requirement of standard)	
□ Does Not Meet Standard (requires corrective action)		r the
	Does Not Meet Standard (requires corrective action)	

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.

A memo dated May 23, 2016, to all Barracks Commanders (Lieutenants) addresses the PREA screening requirements for lockups. The section entitled Responsibilities, Prevention and Detection of Sexual Abuse, requires that the Department staff assess all detainees for both those vulnerable to victimization and for those likely to abuse. Staff are required, at booking or intake, to assess whether based on the information that the troopers have access to, which is most often minimal at best, a detainee may be at a high risk of being sexually abused and when appropriate, to take necessary steps to mitigate any such danger to the detainee. Troopers are required then, at booking, to screen all detainees to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees. Screening consists of asking the detainee about his or her own perception of vulnerability and assessing the detainees risk of being sexually abused or sexually abusive by considering the following: whether the detainee has a mental, physical or developmental disability; age of the detainee; physical build and appearance of the detainee; whether the detainee has previously been incarcerated; and the nature of the detainee's alleged offense and criminal history. After the screening process, the trooper has to document "PREA Screening consistent with PRI-07", in the RAM (Agency Database System). Interviews with barracks staff indicated that screening is taking place. They described a screening process that considers the elements described in the memo and the PREA Standard. The screening process would be better included in a standalone PREA Policy and training might be provided in shift briefings if classroom training is impractical. However, the auditor observed a Trooper conduct the vulnerability screening and document it in the database. Staff in all the audited barracks need more training to become consistent in the screening process. The barracks has some excellent practices related to housing detainees that ensures they are protected from other detainees regardless of whether they are higher risks for either victimization or abusiveness. All the interviewed troopers related that detainees are never "double bunked" or housed in "double occupancy" housing. All detainees are housed in single occupancy cells. Practice also requires that males are separated from females by having an empty cell in between them. If two females were detained and only one female cell was available, one of the females would be transported to a neighboring barracks for housing. Too, detainees are not allowed out of their cells, therefore they would never have contact with each other. G.L. c. 4, §7, cl. 26(n)(security)

# Standard 115.151 Detainee reporting

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA, Responsibilities -Reporting A Sexual Abuse, describes ways to report. These include telling any State Police staff member; by submitting a written complaint; or by having a friend, relative or third party report the incident. A detainee or someone in his/her behalf can also report an alleged incident of sexual abuse or sexual harassment to the Massachusetts Attorney General's Office, a third-party entity not affiliated with the Department. Detainees are advised of these reporting methods through a posted placard in the booking area of each barracks. The training bulletin

allows a detainee to remain anonymous when reporting a sexual assault. Staff must accept and promptly document reports made verbally, in writing, anonymously or from third parties. Staff were knowledgeable of multiple ways detainees could report sexual abuse, sexual harassment and retaliation. These included, tell a staff, call the attorney general's office, call the citizen response hotline, tell a friend or relative. These detainees are rarely locked up over the weekend. Most detainees can "make/post bail" and are released as soon as those arrangements are made. All the interviewed troopers related that they allow the detainee to use the phone to attempt to make bail. They also said if an inmate needed to access a phone to report sexual abuse they would provide them with one. Because of the short period of time they are detained, detainees can report it as soon as they go to court or out of the facility. If a detainee is in the cell they are can call the desk if they have any needs or need to report.

G.L. c. 4, §7, cl. 26(n)(security)

It is recommended that staff are refreshed in ways that detainees can report however their responses met the minimum requirements. This can be done during shift briefings or through additional training bulletins from the academy. It is also recommended that the Department have a consistent method for troopers to provide information to detainees on how to report sexual abuse, sexual harassment or retaliation for reporting. It is also recommended that detainees be required to sign a document acknowledging that they have received the required PREA information. An excellent way to ensure detainees have information on multiple ways to report could be a simple handout or brochure that is read or explained to the detainee during booking and that the detainee sign an acknowledgment that they have received the brochure or handout, have had the information read/explained and that they understand the information provided related to PREA. There have been no allegations of sexual abuse or sexual harassment during the past twelve (12) months.

# Standard 115.154 Third-party reporting

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

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.

Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA, Responsibilities -Reporting A Sexual Abuse, addresses third party reporting, including having a friend or relative make a report for the detainee. The bulletin also provides for detainees to report by calling the Massachusetts Attorney General's Office, a third-party entity not affiliated with the State Police. Staff are also trained to accept third party reports. The agency website also provides a method for third parties to report sexual abuse and sexual harassment or retaliation for reporting. Interviewed troopers were aware that third parties may make reports on behalf of detainees. Each interviewed trooper also related they would accept reports from third parties and treat them the same as any other report or allegation. They would report it immediately to the shift commander and follow up with a written report. Detainees are advised that third parties can make reports of sexual abuse, sexual harassment or retaliation on their behalf. This information is provided on the placard posted in the booking area. It is also available to detainees and third parties on the agency website. The website describes third party reporting and states that reports may be made to the Massachusetts Attorney General and the contact phone number is provided. This also advises viewers and third parties that they may make reports and describes how outside entities may report and allowing them to remain anonymous. All the interviewed staff were aware that third parties may make reports on behalf of any detainee. They also stated they would take a third-party report seriously like any other report and report it immediately to their immediate supervisor, followed by a report in the log or other written report. There have been no allegations of sexual abuse or sexual harassment during the past twelve (12) months.

Standard 115.161 Staff and agency reporting duties
--

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

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.

Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA), Your Responsibilities Under PREA, requires staff to report immediately any knowledge, suspicion, or information about an incident of sexual abuse at any MSP facility or which occurred at another confinement facility. Staff are also required to report any neglect or violation of responsibilities that may have contributed to such incidents. This training bulletin requires staff to accept and promptly document reports that are made verbally, in writing and anonymously or from third parties. All the interviewed staff confirmed that the agency requires that they take all allegations, knowledge, reports or suspicions seriously and report them so they can be investigated. Staff reported they would report an allegation immediately to their supervisor and in his absence, the Lieutenant. They also stated they could report, if needed, to the Troop Duty Officer, who is on duty 24/7, if others were not readily available. There have been no allegations of sexual abuse, sexual harassment or retaliation during the past 12 months but it is evident from interviews that staff take their responsibilities for reporting seriously and that they would report every report, allegation, or suspicion that sexual abuse or sexual harassment has occurred.

#### Standard 115.162 Agency protection duties

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

Every interviewed staff reported that the cells in the cell block are single occupancy and there would not be a time when detainees are "doubled up". Troopers related that if a cell was not available and an arrest had been made, the detainee would be taken to another barracks with an open cell. These staff were adamant that they would not place two detainees in the same cell nor would they place a female in a cell next to a male. Detainees do not come out of their rooms unless there was an emergency. They take their meals in the cells, do not come out of the cell for showers (but are provided wash basins), or change clothes in the cell. Detainees are never together outside the cells with any other detainee. Interviewed staff reported that if a detainee was at substantial risk of imminent sexual abuse the potential perpetrator would be moved to another facility. If the potential aggressor was a staff member, the staff member could be placed on "no contact" status or assigned to another barracks.

G.L. c. 4, §7, cl. 26(n)(security)

# Standard 115.163 Reporting to other confinement facilities

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

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.

General Order PRI-07, Detainee Sexual Abuse and Sexual Harassment, Abuse Reports from Outside Facilities/Agencies, requires that the Department ensure that when an employee receives an allegation that a detainee was sexually abused and/or sexually harassed while in confinement at a non-Department facility, the employee must notify, through channels, the Colonel/Superintendent and Department PREA Coordinator. The Colonel or Superintendent will then notify the head of the facility or appropriate office of the agency where the alleged abuse occurred and make that notification as soon as possible, but no later than seventy-two (72) hours after receiving the allegation and document the notification. An interview with the agency head designee indicated that he is knowledgeable of the standard and indicated that notification would be made within 72 hours and an investigation would be initiated just as any other report or allegation. There have been no allegations made by a detainee that they were sexually abused or sexually harassed at another confinement facility. Nor have there been any allegations that a detainee moved to another facility was sexually assaulted or sexually harassed while at this facility. The Department would fully and completely investigate any allegations made by any detainee.

#### Standard 115.164 Staff first responder duties

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

Training Bulletin 2016-09, Prison rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA, requires that first responders take appropriate steps when responding to incidents of sexual abuse. These steps include the following: ensuring the safety of the victim; requesting the victim not take a shower, change clothes or use the bathroom; moving the alleged offender to a secure location to ensure the alleged offender is not able to destroy physical evidence; and securing the area to make sure it is inaccessible to unauthorized personnel The first staff member to respond to a sexual abuse report within a time period that allows for collection of physical evidence must separate the alleged victim and abuser; preserve and protect the crime scene, request the victim not take any actions that could destroy physical evidence and ensure no evidence is destroyed. Victims, if requested, must be provided with prompt access to emergency medical treatment,

regardless of whether they cooperate with an investigation or name an abuser. Detainees requiring treatment for injuries because of a sexual assault or requiring a forensic examination would be transported to the local hospital emergency room via the local EMS, staff first responders must also notify the appropriate supervisor and victim services staff, if appropriate, document the incident, staff actions and consider transporting the victim to a local hospital or medical center. Interviews with staff indicated that they are very knowledgeable of actions to take as First Responders in response to reports or knowledge of a case of sexual abuse. Each interviewed staff could articulate, without hesitation, most or all the steps they would take as first responders. Staff stated they would separate the victim from the abuser, keep the victim safe, notify their supervisor, secure any crime scene and protect the evidence. Most of the interviewed troopers articulated that they would ask the victim not to take any actions that would compromise the evidence. They also indicated they would secure medical attention for the victim. There have been no allegations of sexual abuse of sexual harassment during the past twelve months requiring first responding.

# **Standard 115.165 Coordinated response**

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

Training Bulletin 2016-09, requires the facility to have a coordinated response plan in the event of a sexual assault. The bulletin instructs the trainee to familiarize themselves with the role of medical and mental health staff and conduct an incident review after every sexual abuse investigation. It is recommended that the Coordinated Response Plan be formatted in a manner similar to the other agency response plans, such as the suicide plan. This provides essentially a check list. Duties and expectation (specific) and instructions are listed for each staff position responding to an incident of sexual assault. When the Coordinated Response Plan is in an emergency plan response plan format, it is recommended that the agency train all staff in its content and document that training.

#### Standard 115.166 Preservation of ability to protect detainees from contact with abusers

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

Interviews with the PREA Coordinator and personnel staff indicated that there is nothing in any contract with the union that would prohibit the administration from removing a staff member alleged to have committed sexual abuse from the facility.

# Standard 115.167 Agency protection against retaliation

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

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.

Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA, requires that detainees and/or reporting parties must be free from retaliation for reporting sexual abuse and sexual harassment. Retaliation is described for staff and the training bulletin requires the Department take appropriate action to protect individuals from retaliation. Staff are required to report any retaliation against a detainee or Department employees who reported such an incident. This report is to a supervisor. Detainees are housed on a short-term basis. They are often in the barracks only until bail is posted, which could be from a few hours and occasionally overnight and even more rarely over a long weekend. They are not taken from their cells or any reason other than an emergency and are housed in single occupancy cells. The facility needs to designate a retaliation monitor in each facility and develop policy and procedures consistent with the verbiage of the standard describing how retaliation will be monitored.

The MSP Division Commander issued a General Order designating each station/barracks commander to serve as the designated PREA Monitor for purposes of monitoring for retaliation against any detainee or staff. Multiple protection measures are provided and include monitoring cell changes or transfers of victim detainees or abusers and removal of staff from contact with alleged victims. Staff, as well, will be monitored to ensure that they are not subject to retaliatory actions by other employees.

# Standard 115.171 Criminal and administrative agency investigations

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

General Order, PRI-07, Detainee Sexual Abuse and Sexual Harassment, Department Custody Investigations, requires that Department investigators investigate an allegation that a detainee was sexually abused and/or sexually harassed in Department custody. Department investigators are required to investigate allegations of detainee sexual abuse or sexual PREA Audit Report

harassment in compliance with PRI-07A, Detainee Sexual Abuse and Sexual Harassment Investigations; gather and preserve direct and circumstantial evidence, including available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators and witnesses; review prior complaints and reports of sexual abuse and/or sexual harassment involving the suspected perpetrator; notify their Division Commander of the possible outcome when the evidence appears to support criminal prosecution; and make relevant information regarding the status of the investigation available to the Department and/or other requesting agency so that the detainee may be kept apprised of the investigation. If an investigation into allegations of detainee sexual abuse and/or sexual harassment results in a possible outcome that may support criminal prosecution, the Colonel/Superintendent will ensure the Department's investigation is turned over to the District Attorney's Office of jurisdiction. General Order, PRI -07A, Detainee Sexual Abuse and Sexual Harassment Investigations, discusses sexual abuse investigations and indicates that investigators will follow uniform evidence protocol to maximize the potential for obtaining usable physical evidence. It also requires specialized training for Department investigators in investigating sexual abuse investigations in confinement settings in compliance with the standard. Additional General Orders address Criminal Investigations (INV-01) Criminal Investigations, ADM-14, Personnel Investigations and ADM 15, Internal Affairs. Interviews with Department Investigators confirmed the processes for investigating sexual abuse investigations. Department Investigators would investigate criminal allegations while Internal Affairs would be responsible for conducting investigations involving staff. There have been no allegations or reports of sexual abuse or sexual harassment in any of the Department "Lock-Ups" during the audit period.

# Standard 115.172 Evidentiary standard for administrative investigations

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

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.

Interviews with facility investigators indicated that the standard for determining whether allegations of sexual abuse or sexual harassment are substantiated is a standard no higher than the "preponderance of the evidence" as required by the standard. Investigators were articulate, knowledgeable, informed and described a uniform and thorough for conducting an documenting investigations.

#### Standard 115.176 Disciplinary sanctions for staff

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

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.

Department of State Police Rule and Regulations, Appendix A, Discipline Guidelines, provides a framework for disciplining staff as the result of a substantiated case of sexual abuse or sexual harassment. Sanctions are based on the category of the offense and suggested sanctions for the first, second and third offenses are provided. If the allegations were criminal, General Order PRI-07, Detainee Sexual Abuse and Sexual Harassment, Departmental Custody Investigations, requires that when an investigation into allegations of sexual abuse and/or sexual harassment results in a possible outcome that may support criminal prosecution, the Colonel/Superintendent will ensure the Department's investigation is turned over to the District Attorney's Office of Jurisdiction. Interviews with two investigators indicated that investigators work in the office of the district attorney in the jurisdiction and that the district attorney would be involved throughout the investigation, as needed and informed of the progress of the investigation. There have been no allegations of either sexual abuse or sexual harassment involving staff during the audit period.

Standard 115	177	Corrective	action	for contractors	and volunteers
Stanuaru i is		COLLECTIVE	action	ioi contractors	anu volunteers

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

General Order PRI-07, Detainee Sexual Abuse and Sexual Harassment, Department Custody Investigations, require that when an investigation into allegations of detainee sexual abuse and/or sexual harassment results in a possible outcome that may support criminal prosecution, the Colonel/Superintendent will ensure the Department's investigation is turned over to the District Attorney's Office of jurisdiction. Interviews with Department investigators confirmed that if the evidence appears to support criminal prosecution the case would be referred to the district attorney for prosecution. They also indicated the district attorney would have already been involved in the case prior to referral. There have been no allegations of sexual abuse or sexual harassment involving any contractor or volunteer during the audit period.

# Standard 115.178 Referrals for prosecution for detainee-on-detainee sexual abuse

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

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.

General Order PRI-07, Detainee Sexual Abuse and Sexual Harassment, Department Custody Investigations, requires that when an investigation into allegations of detainee sexual abuse and/or sexual harassment results in a possible outcome that may support criminal prosecution, the Colonel/Superintendent will ensure the Department's investigation is turned over to the District Attorney's Office of jurisdiction. Interviews with Department investigators confirmed that if the evidence appears to support criminal prosecution the case would be referred to the district attorney for prosecution. They also indicated the district attorney would have already been involved in the case prior to referral. There have been no allegations of sexual abuse or sexual harassment involving a detainee during the audit period. Detainees are not allowed out of their cells during their incarceration and are housed in single occupancy cells.

#### Standard 115.182 Access to emergency medical services

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

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.

The Prison Rape Elimination Act and Standards Training Bulletin, Medical and Mental Care, requires providing the victim of sexual abuse access to emergency medical treatment at no cost to the victim, regardless of whether they cooperate with an investigation or name an abuser. General Order PRI-07, Detainee Sexual Abuse and Sexual Harassment, requires that the Department offer all victims of sexual abuse access to forensic medical examinations performed by a Sexual Assault Forensic Examiner or qualified medical practitioner and attempt to make available a victim advocate from a rape crisis center to accompany the victim through the forensic medical examination process and interviews. Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA) Your Responsibilities Under PREA, in discussing the role of the first responder, required that staff must provide, if requested, prompt access to emergency medical treatment (at no cost to the victim, regardless of whether they cooperate with an investigation or name an abuser). First responders are charged with considering transporting the victim to a local hospital or medical center. Interviews with staff at the barracks confirmed that in the event of sexual assault they would contact the Emergency Medical Services to transport the victim to the hospital. There have been no allegations of sexual abuse or sexual harassment that have occurred during the past 12 months. Staff are aware of how to access emergency medical services when and if needed, as a result of a sexual assault.

# Standard 115.186 Sexual abuse incident reviews

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

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.

Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA, Data Collection and Audits, requires that the Department conduct an incident review after every sexual abuse investigation. The Department reviews sexual abuse incidents and documents the review on the form entitled, "PREA Sexual Abuse Incident Report (PRI-07A). It requires that in accordance with PRI-07A, the State Police PREA Sexual Abuse Incident Review Team will meet monthly and conduct a sexual abuse incident review after every facility or OIG sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The review will normally occur within 30 days of the conclusion of the investigation. The Incident Review Form addresses all the items required by the standards. Interviews with randomly selected and administrative staff indicated that there have been no allegations of sexual abuse or sexual harassment during the past 12 months. Staff were aware that following every major incident they would review the incident to determine if there was anything that could have been done differently and how they can avoid an incident in the future, if anything.

#### Standard 115.187 Data collection

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

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.

Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA, Data Collection and Audits requires the Department to collect and keep data for every allegation using a standardized instrument and set of definitions, review data for areas for improvement, and store data collected for at least 10 years. The annual report must be made available to the public. There have been no allegations of abuse in the past 12 months. The PREA Coordinator was knowledgeable of the requirement for collecting data. It is recommended that the agency spell out the definitions as required in the standards so that the data collection and reporting is consistent with the definitions addressed in the standards.

#### Standard 115.188 Data review for corrective action

	Exceeds Standard (substantially exceeds requirement of standard)
$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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.

Massachusetts State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your Responsibilities Under PREA, Data Collection and Audits, requires the Department to review data for areas of improvement. The PREA Coordinator is knowledgeable of the requirement to review data however there have been no allegations of sexual abuse or sexual harassment. The administration understands the purpose of the review and would develop a corrective action plan as needed to respond to sexual safety in the Department's barracks.

Standa	rd 115	.189 Data storage, publication, and destruction
		Exceeds Standard (substantially exceeds requirement of standard)
	$\boxtimes$	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	deterr must a recom	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
Respons	sibilitie	State Police Academy Training Bulletin 2016-09, Prison Rape Elimination Act of 2003 (PREA): Your s Under PREA, Data Collection and Audits, requires the agency to make it's annual report available to the annually through it's website. Data is required by policy to be kept for at least 10 years.
<b>AUDITO</b> I certify		RTIFICATION
	$\boxtimes$	The contents of this report are accurate to the best of my knowledge.
	$\boxtimes$	No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
		I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.
Robert I	Lanier	March 26, 2017
Auditor S	Signatu	re Date