

# PREA Facility Audit Report: Final

**Name of Facility:** North Central Correctional Institution

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 11/11/2022

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"/>
<b>Auditor Full Name as Signed:</b> Jennifer L. Feicht	<b>Date of Signature:</b> 11/11/2022

AUDITOR INFORMATION	
<b>Auditor name:</b>	Feicht, Jennifer
<b>Email:</b>	jennifer@jlfconsulting.net
<b>Start Date of On-Site Audit:</b>	08/03/2022
<b>End Date of On-Site Audit:</b>	08/05/2022

FACILITY INFORMATION	
<b>Facility name:</b>	North Central Correctional Institution
<b>Facility physical address:</b>	500 Colony Road, Gardner, Massachusetts - 01440
<b>Facility mailing address:</b>	P.O. Box 466, Gardner, Massachusetts - 01440

Primary Contact	
<b>Name:</b>	Christine Larkin
<b>Email Address:</b>	christine.larkin@doc.state.ma.us
<b>Telephone Number:</b>	978-630-6003

Warden/Jail Administrator/Sheriff/Director	
<b>Name:</b>	Matthew Divris
<b>Email Address:</b>	matthew.divris@doc.state.ma.us
<b>Telephone Number:</b>	978-630-6000 ext.

Facility PREA Compliance Manager	
<b>Name:</b>	Christine Larkin
<b>Email Address:</b>	Christine.Larkin@doc.state.ma.us
<b>Telephone Number:</b>	
<b>Name:</b>	Richard Stancombe
<b>Email Address:</b>	richard.stancombe@doc.state.ma.us
<b>Telephone Number:</b>	

Facility Health Service Administrator On-site	
<b>Name:</b>	Kelly Ryder
<b>Email Address:</b>	Keryder@wellpath.us
<b>Telephone Number:</b>	978-630-6000 ext. 37

Facility Characteristics	
<b>Designed facility capacity:</b>	973
<b>Current population of facility:</b>	673
<b>Average daily population for the past 12 months:</b>	719
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	19-83
<b>Facility security levels/inmate custody levels:</b>	Medium
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	292
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	98
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	30

AGENCY INFORMATION	
<b>Name of agency:</b>	Massachusetts Department of Correction
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	50 Maple Street, Milford, Massachusetts - 01757
<b>Mailing Address:</b>	
<b>Telephone number:</b>	5084223300

Agency Chief Executive Officer Information:	
<b>Name:</b>	Carol Mici
<b>Email Address:</b>	Carol.Mici@doc.state.ma.us
<b>Telephone Number:</b>	508-422-3300

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Russell Caissie	<b>Email Address:</b>	russell.caissie@doc.state.ma.us

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>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.</p>	
<b>Number of standards exceeded:</b>	
7	<ul style="list-style-type: none"> <li>• 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</li> <li>• 115.33 - Inmate education</li> <li>• 115.51 - Inmate reporting</li> <li>• 115.65 - Coordinated response</li> <li>• 115.71 - Criminal and administrative agency investigations</li> <li>• 115.86 - Sexual abuse incident reviews</li> <li>• 115.88 - Data review for corrective action</li> </ul>
<b>Number of standards met:</b>	
38	
<b>Number of standards not met:</b>	
0	

# POST-AUDIT REPORTING INFORMATION

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-08-03
2. End date of the onsite portion of the audit:	2022-08-05

### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	I communicated with the Boston Area Rape Crisis Center.

## AUDITED FACILITY INFORMATION

14. Designated facility capacity:	973
15. Average daily population for the past 12 months:	719
16. Number of inmate/resident/detainee housing units:	19
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

### Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

#### Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	689
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	21
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	400
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	135
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	11
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	9
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	21
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	14
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The facility does not place individuals in segregation for being at risk of being sexually abused. The facility confirmed that there were no blind or low vision inmates at the facility.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	284
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	30
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	98
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	The Superintendent stated during his interview that the facility has a large number of open positions and they have been unable to fill them.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	

53. Enter the total number of <b>RANDOM INMATES/RESIDENTS/DETAINEES</b> who were interviewed:	15
54. Select which characteristics you considered when you selected <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees: (select all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of <b>RANDOM INMATE/RESIDENT/DETAINEE</b> interviewees was geographically diverse?	I ensured that I interviewed an inmate from every housing unit in the facility. I choose my targeted interviews first and then fill in the housing units with the ones that I do not have.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	In trying to ensure diversity in the interviews that I did, I randomly selected two inmates that were LEP and I conducted their interviews using the translation line, Lionbridge.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
58. Enter the total number of <b>TARGETED INMATES/RESIDENTS/DETAINEES</b> who were interviewed:	15
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	4
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2

<p><b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>I confirmed with the facility on several occasions that they did not have any inmates at the facility who were blind or low vision.</p>
<p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>1</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>3</p>
<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>4</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>3</p>
<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>6</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>2</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>It is not that the facility has never had any blind or low vision individuals, there were just not any at the time of the onsite audit. I did ask medical staff if they could think of anyone. They indicated that they could not at the moment.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>There were no barriers to completing the inmate interviews. The facility was good about having individuals there so there was very little down time between interviews.</p>

## Staff, Volunteer, and Contractor Interviews

### Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Again there were no barriers to completing these interviews. The staff who were selected were knowledgeable and pleasant to speak with. There were a few more male staff interviewed in the random category than females. However, there were more female staff interviewed in the specialized staff than males.</p>

### Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>12</p>
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<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

<p><b>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Agency contract administrator</li> <li><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</li> <li><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</li> <li><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</li> <li><input checked="" type="checkbox"/> Medical staff</li> <li><input checked="" type="checkbox"/> Mental health staff</li> <li><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</li> <li><input checked="" type="checkbox"/> Administrative (human resources) staff</li> <li><input type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</li> <li><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</li> <li><input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations</li> <li><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</li> <li><input type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</li> <li><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</li> <li><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</li> <li><input checked="" type="checkbox"/> First responders, both security and non-security staff</li> <li><input checked="" type="checkbox"/> Intake staff</li> <li><input type="checkbox"/> Other</li> </ul>
<p><b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b></p>	<ul style="list-style-type: none"> <li><input checked="" type="radio"/> Yes</li> <li><input type="radio"/> No</li> </ul>
<p><b>a. Enter the total number of VOLUNTEERS who were interviewed:</b></p>	<p>1</p>

<p><b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Mental health/counseling</p> <p><input checked="" type="checkbox"/> Religious</p> <p><input type="checkbox"/> Other</p>
<p><b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>a. Enter the total number of CONTRACTORS who were interviewed:</b></p>	<p>2</p>
<p><b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input checked="" type="checkbox"/> Other</p>
<p><b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b></p>	<p>As noted in the report, MDOC contracts for all medical and mental health services provided at the facility. I interviewed both medical and mental health staff.</p>

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

<p><b>84. Did you have access to all areas of the facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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### Was the site review an active, inquiring process that included the following:

<p><b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	I was able to talk with staff and inmates during the tour of the facility. Staff throughout the facility were very pleasant and happy to discuss their area of the facility. When we were touring, there were a couple of new arrivals at the facility going through the intake process. I was able to ask the intake staff member some questions afterwards and he was helpful in clarifying some of my questions.

**Documentation Sampling**

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	I chose inmate and personnel files of individuals whom I interviewed as part of this audit process. Staff were happy to provide that information. I also randomly chose investigation files to review and staff were quick to provide the ones which I requested.

**SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

**Sexual Abuse and Sexual Harassment Allegations and Investigations Overview**

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	21	3	21	3
<b>Staff-on-inmate sexual abuse</b>	3	1	3	1
<b>Total</b>	24	4	24	4

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	2	0	2	0
<b>Staff-on-inmate sexual harassment</b>	4	0	4	0
<b>Total</b>	6	0	6	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
<b>Inmate-on-inmate sexual abuse</b>	5	3	0	0	0
<b>Staff-on-inmate sexual abuse</b>	2	0	0	0	0
<b>Total</b>	7	3	0	0	0

**95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	5	11	2	3
<b>Staff-on-inmate sexual abuse</b>	2	1	0	0
<b>Total</b>	7	12	2	3

**Sexual Harassment Investigation Outcomes**

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

**96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	2	0	0	0	0
<b>Total</b>	2	0	0	0	0

**97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:**

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	2	0	0
<b>Staff-on-inmate sexual harassment</b>	2	1	0	0
<b>Total</b>	2	3	0	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	1
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

**Inmate-on-inmate sexual abuse investigation files**

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
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<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	
<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>There were many more sexual abuse investigations and this Auditor felt that it was more important to review the sexual abuse investigations.</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	

109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	

**Staff-on-inmate sexual harassment investigation files**

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There were many more sexual abuse investigations and this Auditor felt that it was more important to review the sexual abuse investigations.

**SUPPORT STAFF INFORMATION**

**DOJ-certified PREA Auditors Support Staff**

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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**Non-certified Support Staff**

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	
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# AUDITING ARRANGEMENTS AND COMPENSATION

<b>121. Who paid you to conduct this audit?</b>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<b>Identify the name of the third-party auditing entity</b>	PREA Auditors of America

## Standards

### Auditor Overall Determination Definitions

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

### Auditor Discussion Instructions

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

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<p data-bbox="240 208 451 235"><b>Auditor Discussion</b></p> <p data-bbox="240 271 1417 331">The agency, the Massachusetts Department of Correction (MDOC), has appointed a PREA Coordinator to ensure the compliance with all PREA Standards. This position is charged to implement PREA Standards in all MDOC facilities.</p> <p data-bbox="240 360 1442 456">In order to ensure the compliance of facilities, MDOC has instituted a Zero Tolerance Policy regarding sexual abuse and sexual harassment. This Zero Tolerance Policy can be found in <b>Policy 519, Sexual Harassment/Abuse Response Prevention Policy (SHARPP)</b>. The Zero Tolerance Statement reads as follows.</p> <p data-bbox="240 486 1485 613"><b>519.02: POLICY STATEMENT - The Department has zero tolerance for all forms of sexual harassment/sexually abusive behavior and is committed to preventing, detecting, and responding to any such conduct. The Department shall embrace the standards set forth by the National Prison Rape Elimination Act (Public Law No. 108-79) and the American Correctional Association (ACA) for all state correctional jurisdictions.</b></p> <p data-bbox="240 642 1083 672">This policy was reviewed on June 1, 2021, and has an effective date of July 1, 2021.</p> <p data-bbox="240 701 1447 828">The Department has appointed a PREA Coordinator to oversee all PREA compliance for all institutions. In addition, the Department employs an Assistant PREA Coordinator. The PREA Coordinator answers directly to one of the Deputy Commissioners of the Department. The Deputy Commissioners answer directly to the Commissioner of the Department. This gives the PREA Coordinator authority to make changes which will ensure the compliance of the agency.</p> <p data-bbox="240 857 1458 918">However, there may be times when additional permissions are required for compliance measures. In these instances, the PREA Coordinator will enlist the assistance of the Deputy Commissioner.</p> <p data-bbox="240 947 1450 1043">Each institution has assigned one Deputy Superintendents who will perform duties of a PREA Manager for the institution. This role is in addition to other duties of the Deputy Superintendent. The PREA Manager of an institution is charged with ensuring the PREA compliance at the facility.</p> <p data-bbox="240 1072 1484 1133">As the agency employs more than one person at the agency level to ensure PREA compliance and utilizes a team approach at the facility level, this standard has been determine to Exceed The Standard.</p>

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="240 208 451 235"><b>Auditor Discussion</b></p> <p data-bbox="240 271 1473 396">The Department of Correction has an agreement with the state of Ohio through an Interstate Compact, dated October 5, 2016, to house inmates should they require separation or due to numbers of inmates exceeding the capacity of the facility. As required, there is a clause in the agreement which requires that both parties to adopt and comply with PREA standards. The agreement reads as follows.</p> <p data-bbox="240 427 1441 553"><b>16. Prison Rape Elimination Act - The contracting parties shall adopt and comply with the nation standards to prevent, detect, and respond to prison rape under the Prison Rape Elimination Act (PREA), 42 U.S.C. &amp;15601 et. seq., and applicable PREA Standards and permit parties to monitor this aspect of the agreement to ensure compliance with PREA.</b></p> <p data-bbox="240 584 1477 678">The MDOC provided a memo to this Auditor outlining the steps followed to monitor the compliance of facilities which MDOC inmates are housed in. This monitoring process includes monitoring PREA audit reports and the DOJ Dashboard. This memo was dated May 3, 2022 and was in response to a prior PREA audit.</p>

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The MDOC has implemented a policy which states that the facility must review its staffing plan on a minimum of an annual basis to ensure that PREA is being considered when staffing the facility. The agency policy is **510 - Security Staffing and Analysis**. The policy reads as follows.

**A. Prison Rape Elimination Act (PREA 115.13 - "Supervision and Monitoring")**

**1. At least annually, each facility and special unit in consultation with the PREA Coordinator, shall assess, determine, and document whether adjustments are needed to:**

**(a) The official staffing analysis (maintained by the Policy Development and Compliance Unit).**

**(b) The deployment of video monitoring systems and other monitoring technologies; and**

**(c) Resources the facility/special unit has available to commit to ensure adherence to the staffing plan.**

**2. The staffing plan must provide for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:**

**(a) Generally accepted detention and correctional practices;**

**(b) Any judicial findings of inadequacy;**

**(c) Any findings of inadequacy from Federal investigative agencies;**

**(d) Any findings of inadequacy from internal or external oversight bodies;**

**(e) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);**

**(f) The composition of the inmate population;**

**(g) The number and placement of supervisory staff;**

**(h) Institution programs occurring on a particular shift;**

**(i) Any applicable State or local laws, regulations, or standards;**

**(j) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and**

**(k) Any other relevant factors.**

**3. In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.**

The facility provided two examples of the staffing plan for review. All information required to be a part of this assessment is included in the staffing plan.

As with many other correctional institutions across the country, staffing shortages affect NCCI Gardner as well. Should there be a shortage on any given shift, the administration will ask for volunteers from other shifts to cover the mandatory posts. If there are not enough volunteers to cover these posts, the administration will mandate overtime.

The facility provided documentation of the unannounced rounds conducted by the upper-level staff members. Interviews with staff and inmates confirmed that these are being conducted. The documentation reviewed showed that these administrative rounds are being conducted throughout the day and night. These are random and occur on each shift.

Additionally, as required by the standard, staff are trained that they should not announce that upper-level staff are making unannounced rounds. This is part of the training to staff. During interviews, staff confirmed that this is prohibited.

During the tour of the facility, there were several areas which were identified as areas which needed additional supervision due to blind spots. These areas included the following.

T-3 Dorm - This dormitory area houses inmates for approximately 30 days for an orientation period. Due to the layout of the

dormitory, it was highly recommended to place cameras in this area for additional supervision. At the time of this report, cameras have not been able to be installed. Therefore the mirrors have been ordered and will be installed as soon as they are delivered. This will allow staff who are walking into the dormitory to have full view of the room.

Laundry - There is a blind spot behind the dryers in the laundry area. Again, the facility has ordered these mirrors and will be installed as soon as they are delivered.

A-Building - Upstairs Dormitory - When touring the facility, it was noted in the upstairs dormitory of A-Building, that inmate lockers were set up in such a manner that it created a blind spot in the corners of the rooms. This was discussed with staff, and it was decided that those lockers would be moved, and the inmates would be given a footlocker type storage. Mirrors were discussed to try to correct this option, however, after looking at the area, a mirror would not be able to see the area in question. This was immediately corrected, and this Auditor was able to go and see that the lockers had been moved and the corners were in the line of site of the staff.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	North Central Correctional Institution does not house youthful offenders.

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="240 210 451 237"><b>Auditor Discussion</b></p> <p data-bbox="240 271 1484 331">Interviews with staff and inmates made it clear that policies prohibit staff members of the opposite sex from performing cross gender searches except in exigent circumstances.</p> <p data-bbox="240 360 1458 456">MDOC has policies in place which are clear regarding searches, with specifics regarding who conducts searches and how those searches are to be conducted. The policy for the department which guides searches is 506: Search Policy. Specific portions of the search policy which address PREA issues are as follows.</p> <p data-bbox="240 486 595 512"><b>506.04 UNCLOTHED SEARCHES</b></p> <p data-bbox="240 542 1490 669"><i>Searches or physically examining a gender non-conforming inmate for the sole purpose of determining the inmate's genital status shall not be permitted. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or if necessary, by learning that information as part of the broader medical examination conducted in private by the contracted medical provider.</i></p> <p data-bbox="240 698 1490 795"><i>Gender non-conforming inmates shall have an unclothed search conducted by officers of the gender with which the inmate has identified as the search preference in accordance with 103 DOC 402, Inmate Identification Policy, except in exigent circumstances.</i></p> <p data-bbox="240 824 1481 952"><i>Except for gender non-conforming inmates, cross-gender unclothed searches shall not be conducted except in exigent circumstances or when performed by medical practitioners. Should such a situation arise, permission from the Superintendent must be obtained prior to the search. The search must be documented in writing through a confidential incident report.</i></p> <p data-bbox="240 981 807 1008"><b>506.05 FULLY CLOTHED SEARCHES (PAT SEARCH)</b></p> <p data-bbox="240 1037 539 1064"><b>1. Pat Searches of Inmates:</b></p> <p data-bbox="240 1093 1449 1153"><i>General - Fully clothed searches (pat search) should be employed for the relatively quick scrutiny of an inmate's person. ....Cross-gender pat searches of female inmates shall not be permitted absent exigent circumstances.</i></p> <p data-bbox="240 1182 802 1209"><b>2. Recommended Fully Clothed Search Techniques:</b></p> <p data-bbox="240 1279 1418 1375"><i>B. Clothed searches of gender non-conforming inmates shall be conducted in a professional and respectful manner, and in the least intrusive manner, and in the least intrusive manner possible consistent with security needs.</i></p> <p data-bbox="240 1404 1490 1532"><i>It is also the policy of the agency that opposite gender individuals announce themselves when entering a housing unit and the status quo of gender changes. During the tour of the facility, this Auditor observed staff members announcing themselves when entering all housing units. Inmates did indicate during the confidential interviews that male staff members almost always announced themselves when they entered a housing unit.</i></p> <p data-bbox="240 1561 1490 1720"><i>The requirement of cross gender announcements and the ability for inmates to shower, change clothes and perform bodily functions is included in the Policy 519: Sexual Harassment/Abuse Response and Prevention Policy. The policy reads as follows.</i></p> <p data-bbox="240 1785 1485 1980"><i>F. Superintendents shall implement procedures which enable inmates 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. Inmates who are housed in a dormitory setting shall be informed that there is no expectation of privacy, but, in order to afford some privacy when necessary, they may change clothing in the inmate bathroom. Inmates shall be informed of this during their orientation to the institution, as well as through a posting of this requirement within the dormitory itself.</i></p> <p data-bbox="240 2009 1453 2136"><i>G. Pursuant to 103 DOC 512, Post Orders, Superintendents shall require staff of the opposite gender to verbally announce, or have verbally announced for them, their presence when entering an inmate housing unit whenever such entry changes the status quo of the gender of staff on duty in that area. Such announcements shall also be entered into the IMS Unit Log. In the event that there is no PA system available within an inmate housing unit,</i></p>

***announcements shall be made as the staff member goes floor-by-floor.***

During this audit period, there were no exigent circumstances in which an opposite gender staff member had to perform any type of search.

Staff members have received training on searches. The facility has provided the curriculum used for staff training regarding searches and how to perform clothed (pat) searches of an opposite gender inmate.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="229 192 1509 255"><b>Auditor Discussion</b></p> <p data-bbox="229 255 1509 421">MDOC provides multiple methods of delivering information to inmates who may have a disability which requires assistance in receiving/understanding the PREA information. This Auditor observed PREA documentation throughout the facility which was provided in both English and Spanish. The facility also uploaded Inmate Handbooks in both English and Spanish. The PREA video which the agency uses to educate inmates is available in both English and Spanish.</p> <p data-bbox="229 421 1509 539">During the inmate interviews, there were multiple interviews conducted which required the use of the translation line. The staff provided a phone with an outside line and speaker phone. All interviews which utilized this service were done in Spanish.</p> <p data-bbox="229 539 1509 696">During the staff interviews, questions were asked how they would handle a situation where individuals were unable to read or understand what they were reading. Multiple staff members indicated they would read the information to the inmate. Additionally, the majority of staff members indicated they would not utilize inmate interpreters once they realized that a conversation was leading to a report of sexual abuse or sexual harassment.</p>

## 115.17 Hiring and promotion decisions

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

MDOC has implemented appropriate requirements of PREA standards regarding hiring and promotions for staff, contractors and volunteers who work within the system. The process for hiring and background checks is coordinated by staff working in the headquarters of MDOC. The staff member who is specifically responsible for the background checks was interviewed over the phone as part of this audit process.

If an applicant has worked at any other confinement facility, staff indicated that those facilities would be contacted as part of the background check process and applicable questions related to PREA are asked. Additionally, staff indicated they would respond to any requests from other correctional facilities who are inquiring about any PREA related information for applicants.

Staff interviews indicated that background checks are required of all new applicants and ongoing background checks are required for anyone who works in the facility in any capacity. In order to ensure compliance with the requirement of this standard, background checks are conducted every four years on all staff members. This ensures the requirement of every five years is met.

When someone applies for a position with the MDOC, they are required to go through several different background checks. They include the following.

1. Criminal Offender Record Information (C.O.R.I.)
2. Sex Offender Registry Information (S.O.R.I.)
3. The Central Registry of Child Abuse/Neglect reports maintained in accordance with M.G.L. Chapter 119, Section 51 B.

In addition to these background checks, all candidates for employment will be subject to several items related to the disclosure of sexual abuse. Policy 201 Selection and Hiring states the following.

***All candidates for employment, regardless of whether for initial employment or promotion, who may have contact with inmates, shall be asked, in either written application(s) or interview(s), about whether he/she/they has/ve:***

***a. Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution.***

***b. Been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victims did not consent or was unable to consent or refuse; or***

***c. Been civilly or administratively adjudicated to have engaged 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.***

***d. If a candidate for employment answers yes to 201.06 Section 9, subsections a), b), or c) they will be prohibited from being hired to promoted by the MA Department of Correction.***

***Note: Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.***

The three required questions are asked as part of the application process. As per an interview with MDOC staff, should any of those questions be answered as "yes", this will disqualify the applicant for employment with the department.

## 115.18 Upgrades to facilities and technologies

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

MDOC has established agency policy which directs that any construction or major renovations include consideration of how the changes will impact the facility's ability to prevent sexual harassment and abuse. This is in **Policy 703 Design Criteria and Planning Guidelines**. It reads as follows.

**703.01: NEEDS EVALUATION - .....When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities the agency shall consider the effect of the design, or modification upon the agency's ability to protect inmates from sexual abuse.**

This policy also discusses that the same consideration should be given to any changes to the electronic surveillance system. It reads as follows.

**4. Electronic Surveillance - Where audio or visual electronic surveillance is used, it shall be located primarily in hallways, elevators, corridors, and perimeter security points such as entrances and exits. All such systems are generally monitored at the central control room. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.**

NCCI conducts a monthly PREA meeting chaired by the Deputy Superintendent/PREA Manager. During these meetings, anything related to PREA is discussed such as allegations, investigations, incident reviews, vulnerable areas, etc. This would be the place where staff would discuss any changes needed to the physical plant of the facility and the surveillance system of the facility.

During this audit timeframe, there was no construction or additions at the facility.

## 115.21 Evidence protocol and forensic medical examinations

**Auditor Overall Determination:** Meets Standard

### Auditor Discussion

The MDOC has a policy which requires that all allegations be investigated. **Policy 519 - Sexual Harassment/Abuse Response and Prevention Policy** states the following.

#### ***D. Investigation Response to Sexual Harassment/Sexually Abusive Behavior Allegations***

***(1) The Department shall ensure that an administrative or criminal investigation is completed for all allegations of sexual harassment/abuse utilizing those staff members who have received specialized training as it relates to a PREA investigation.***

Additionally, the policy states the following regarding the investigation of allegations.

#### **519.07 INVESTIGATION OF SEXUALLY ABUSIVE/HARASSING BEHAVIOR COMPLAINTS**

***The Department shall ensure that all available means are used to fully investigate the allegations of sexual abuse and/or sexual harassment. Within seventy-two (72) hours of the reported incident, the site's Superintendent will review and assess all reported allegations of sexual harassment/sexually abusive behavior and determine the appropriate course of action.***

If the allegation is an inmate-on-inmate allegation, the investigation will be completed by the IPS (Inner Perimeter Security Team) Office and its investigators. Should the investigator feel that the situation may have a criminal element to it, the investigator will reach out to the Massachusetts State Police (MSP) to discuss the situation and ask for their assistance to investigate it criminally. The agency provided a copy of the MOU between the MDOC and the MSP which was signed by both parties in 2021 for the criminal investigative services of the State Police when needed. All proper evidence collection procedures will be followed by both parties to ensure the preservation of any evidence connected with the allegation.

Should the allegation involve a staff member, volunteer, or contractor or a "larger" PREA issue, it will be referred to the Professional Standards Unit (PSU) for investigation. The PSU is based out the headquarters for the MDOC. The investigators at PSU have the training and credentials to conduct criminal investigations as well as the administrative investigation.

During interviews with staff members, there was a discussion regarding the categories which allegations are placed in. There are two which the agency utilizes. The first is a Category 2 incident. This is a would include sexual harassment, diversity issues, harassment of protected classes, etc. Category 1 allegations are those which are "larger" PREA issues such as staff misconduct, excessive force, off duty misconduct, contraband, etc. Through the investigation process, the category of the allegation can change.

If a sexual abuse allegation meets the criteria and professional opinion of the medical staff, an inmate can be sent out of the facility for a forensic medical examination. The inmate would be taken to the Beth Israel Hospital in Boston for the forensic examination. This is approximately one hour away from the facility. The medical staff will call the hospital if they determine the examination is needed and the inmate agrees to have it, to provide advance notification that an inmate is being sent for an examination.

Nurses at the Beth Israel Hospital are specifically trained to conduct forensic medical examinations. This training provides the nurse with the skills to collect evidence, work in a trauma informed manner with victims of sexual abuse and testify in a court of law as a Subject Matter Expert (SME). The hospital is approximately 1.5 hours away. This is the closest hospital which has specially trained forensic examiners for sexual assault situations.

All inmates who are transported to the hospital for a forensic medical examination are offered the services of a community-based victim advocate, from the Boston Area Rape Crisis Center (BARCC), to assist in the process. This is outlined in the 519 policy. It reads as follows.

***(9) Community based victim advocacy services are offered to the inmate as part of the SANE examination at the outside hospital/rape crisis center. Any contracted advocate or community-based advocate assigned shall be coordinated by the Director of the Victim Services Unit. The advocate assigned shall accompany and support the victim through the forensic medical examination process and investigatory interviews, informational meetings and referrals.***

Interviews indicated that the rape crisis advocate comes directly to the hospital and the victim is asked if they would like to speak with the advocate. The victim has the right to refuse the services of the advocate.

This examination shall be provided free of charge to the alleged victim, according to the staff members, however, when reading the policy on this topic, there is a bit of confusion. **Policy 519 - Sexual Harassment/Abuse Response and Prevention Policy** states the following regarding payments.

***(10) Rape crisis services shall be provided at no cost to the alleged victim unless the claim of being sexually assaulted was knowingly false.***

Common language for forensic medical examinations is usually that specific or indicates medical attention. The term "rape crisis services" commonly refers to services provided by a Rape Crisis Center, the Boston Area Rape Crisis Center (BARCC) in this case. Rape crisis centers typically do not charge for their services to those who are victims of sexual abuse. Therefore, it is recommended that this language be changed to more clearly convey that the services being discussed in this portion of the policy refers to the forensic medical examination performed by a SANE nurse at the hospital.

Should the inmate determine they do not want to speak with a rape crisis advocate from the Boston Area Rape Crisis Center (BARCC), they always have the ability to request to speak with a mental health professional at the institution when they return from the hospital.

## 115.22 Policies to ensure referrals of allegations for investigations

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

The facility staff will conduct the initial interviews to determine what the situation is. Once information is obtained and the shift commander has been alerted, it is the responsibility of the specially trained investigators to do a preliminary interview and then start the case in the electronic database for PREA investigations.

This database not only becomes the repository for all elements of the investigation, but it also helps the investigators to track the progression of the cases and stay on top to ensure that all elements required by standard are being completed as required.

Again, should the case have a criminal element to it, the state police will be contacted to determine if there are grounds to conduct a criminal investigation as well.

As required, PREA policies on investigations is available on the MDOC website at the following address.

<https://www.mass.gov/doc/doc-519-sexual-harassmentabuse-response-prevention-policy/download>

This information can be downloaded and reviewed by the public at any time.

## 115.31 Employee training

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Policy review, documentation review and interviews with staff members confirmed that all staff members receive PREA training on a minimum of an annual basis. Many staff indicated that they believed that PREA training was provided more than once a year.

PREA curriculum was provided in the pre-audit information for review. This curriculum contains all the required elements listed in this standard under 115.31 (a).

During interviews with staff members, all were able to answer specific questions about the content of the PREA training they have received. Due to COVID-19, most training is provided via computer and staff members are tested on the knowledge they have gained. Additionally, staff members are provided with pocket cards which have basic PREA information in the event the staff member would receive an allegation and quickly need the initial steps to be taken.

Documentation of staff training, test scores and an example of a signed acknowledgement form were provided for review prior to the onsite audit. The acknowledgement form has the staff member attest they not only received the training, but they also understood the information they were provided. Specifically requested training documents were provided as part of the onsite audit and uploaded to this Online Audit System (OAS).

Training policy of the Department, ***Policy 216 Training and Staff Development***, contains information about required PREA training. It states the following.

#### ***216.13 PRISON RAPE ELIMINATION ACT (PREA) TRAINING***

***All employees shall receive training on PREA. The employee shall receive additional training if the employee is reassigned from an institution that houses only male inmates to an institution that houses only female inmates, or vice versa, as well as training on the requirement of 103 DOC 652, Identification, treatment and Correctional Management of Inmates with Gender Dysphoria and 103 DOC 653, Identification, Treatment and Correctional Management of Gender Non-Conforming Inmates regarding the care and treatment of Gender Non-Conforming inmates.***

***Employees with inmate contact shall receive refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.***

## 115.32 Volunteer and contractor training

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

The MDOC and North Central Correctional Institution (NCCI) utilize both contractors and volunteers. The medical and mental health staff at the facility are contractors. The MDOC contracts with a company, WellPath, for these services. Upon completing required training, each individual signs a form which indicates they have received the training and understand the information which was provided to them.

All contract staff are provided PREA training through the facility. Contract staff are also provided training by their company (WellPath) in relation to PREA.

During the onsite audit, two contract staff members were interviewed and were able to confirm the PREA related training they received from both the facility and their company, WellPath.

Volunteers are used in different capacity, with the majority providing religious service support. During the onsite audit visit, this Auditor was able to interview a religious volunteer prior to the start of his group. This volunteer confirmed that he has been provided PREA training and was able to answer PREA related questions. The volunteer walked through the initial steps that he would take should an inmate disclose to him that they were being sexually abused or harassed at the facility.

Two policies provide direction regarding the training provided to contractors and volunteers. The first policy is **519 Sexual Harassment/Abuse Response and Prevention Policy**. It reads as follows.

#### **519.04 PREVENTION**

##### **A. Training and Education**

*The Division of Staff Development and the PREA Coordinator shall provide ongoing training to ensure that all Department employees and contractors are educated regarding their responsibilities to prevent and report incidents of sexual harassment/sexually abusive behavior. In addition, specialized training shall be provided for those employees who respond to and investigate PREA incidents. The Director of Program Services is responsible for educating volunteers regarding their responsibilities to prevent and report incidents of sexual harassment/sexually abusive behavior.*

The second policy is **216 Training and Staff Development**. It reads as follows.

#### **216.13 PRISON RPAE ELIMINATION ACT (PREA) TRAINING**

*Volunteers and contractors who have contact with inmates shall be trained on their responsibilities under the sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training provided shall be based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. Appropriate documentation shall be maintained indicating they have received the training.*

## 115.33 Inmate education

**Auditor Overall Determination:** Exceeds Standard

### **Auditor Discussion**

All inmates are required to receive information on PREA including definitions of sexual abuse and sexual harassment and how to report incidents at the facility. Twenty inmates were interviewed as part of the onsite audit. The majority of these individuals indicated they recalled being provided information and watching a video on PREA shortly after arriving at the facility. All inmates discussed all the PREA information that is posted throughout the facility. In addition, all were able to provide specific information on how they could report sexual abuse or harassment. And all were able to discuss more than one way to make a report.

Staff interviewed were able to provide information into where documentation is retained verifying an inmate's reception of PREA information. This information is kept in the inmate's electronic file. Additional documentation was provided during the onsite audit visit when specific files were requested.

Additionally, during the onsite visit, this Auditor was able to observe PREA materials in English and Spanish versions and additional PREA information in alternate formats was provided in the pre-audit materials.

The requirement for inmate education is described in the agency's PREA policy. It reads as follows.

### **C. Inmate Education**

***(1) Each Superintendent shall ensure that new inmates to the Department receive gender specific verbal, written and video presentations about inmate sexual violence in English and/or Spanish. Videos shall also be available in closed caption for the deaf and hard of hearing. All written orientation materials about sexual harassment/sexually abusive behavior shall be provided in English and/or Spanish. Other limited or non-English speaking inmates shall receive translation into their own language(s) via the telephonic interpreter service. When a literacy problem exists, a staff member shall assist the inmate in understanding the material.***

***(4) Each institution shall take the necessary and appropriate steps to ensure inmates with disabilities (including, but not limited to, inmates who are hard of hearing or deaf, have low vision, are blind, or those who have intellectual, psychiatric, or communication disabilities), have an equal opportunity to participate in, or benefit from, all aspects of the Department's efforts to prevent, detect, and respond to any and all allegations of sexual harassment and/or sexual abuse.***

Additionally, Policy 401 Booking and Admissions, Attachment #2, includes extensive information about PREA, definitions, reporting, victimization, the Boston Area Rape Crisis Center, who at the facility is in charge of PREA, etc. This attachment has areas for personalization for each institution.

This facility has gone above and beyond the basic inmate education by establishing a section of the inmate library which is dedicated to PREA related issues. This section is in the center of the library and contains a large number of publications which inmates may read at any time. The PREA Manager indicated that she has looked at recommendations from the PREA Resource Center and from the National Institute of Corrections.

## 115.34 Specialized training: Investigations

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Facility investigators are required to participate in the yearly PREA training, and they are required to participate in a specialized PREA investigations training. Information was provided by the agency PREA Coordinator regarding the annual Sexual Assault Investigative Training (SAIT). The PREA Coordinator conducts a portion of the training. This training is approximately twenty-four

hours in length and covers a variety of topics such as interviewing versus interrogating victims of sexual abuse, dynamics of sexual abuse, specific criminal laws associated with PREA in Massachusetts, the use of Miranda and Garrity rights, and collection of evidence.

This training is provided to the Massachusetts State Police, Inner Perimeter Security (IPS) or facility investigators, and Professional Standards Unit (PSU) investigators. His office also provides assistance and technical assistance to the facilities investigating allegations.

Documentation of this specialized training for the facility investigators was provided in the pre-audit information. Two investigators were interviewed during the course of this audit. Both were able to answer specific questions about required elements of specialized investigations training.

**115.35 Specialized training: Medical and mental health care**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The Massachusetts Department of Correction contracts with WellPath for medical and mental health services at its facilities. Several of these contractors in both departments were interviewed as part of the onsite audit process. These staff members are required to participate in training from both WellPath and the MDOC on a variety of topics, including PREA. These contractors participate in the annual, basic PREA training provided by the MDOC. Additionally, contracted staff are required to participate in department meetings which periodically includes specific discussions about PREA and the requirements of their department with PREA.

In addition to the annual PREA training and periodic department meeting discussions, medical and mental health staff are also required to participate in an advanced, specialized PREA training about what the responsibilities of each department are in the prevention, detection and response to PREA in the facility. Contracted staff members were able to answer questions about specialized training elements for medical and mental health practitioners.

The facility provided listings of all the medical and mental health professionals who work at the facility for WellPath. In addition, training documentation was provided for all the requested individuals.

**115.41 Screening for risk of victimization and abusiveness**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

NCCI Gardner assesses inmates for their vulnerability as a victim of sexual abuse and propensity towards sexual abusiveness towards others. The staff use an assessment tool developed to assess these two items. The assessment contains questions which cover all the required items in this standard.

The agency includes the requirement to conduct all risk assessments in the **103 DOC 650 Mental Health Services** policy. The policy reads as follows.

#### **650.04 ADMISSIONS**

##### **A. Mental Health Screen**

##### **3. Screening for risk of victimization and abusiveness:**

**a. All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.**

**b. Intake screening shall ordinarily take place within seventy-two (72) hours of arrival at the facility.**

**c. Such assessments shall be conducted using an objective screening instrument.**

**d. The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:**

**i. Whether the inmate has a mental, physical, or developmental disability;**

**ii. The age of the inmate;**

**iii. The physical build of the inmate;**

**iv. Whether the inmate has previously been incarcerated;**

**v. Whether the inmate's criminal history is exclusively nonviolent;**

**vi. Whether the inmate has prior convictions for sex offenses against an adult or child;**

**vii. Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming;**

**viii. Whether the inmate has previously experienced sexual victimization;**

**ix. The inmate's own perception of vulnerability; and**

**x. Whether the inmate is detained solely for civil immigration purposes.**

**e. Within a set time period, not to exceed thirty (30) days from the inmate's arrival at the facility, the institution will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the institution since the intake screening.**

**f. An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.**

**g. Inmates may not be 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) or this section.**

**h. The agency shall implement appropriate controls on the dissemination within the facility or responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.**

Discussions with staff and inmates confirmed that these assessments are being administered and they are not required to answer all the questions on the assessment.

Additionally, the staff were able to provide the requested inmate files to verify that these assessments are being done as appropriate.

## 115.42 Use of screening information

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

In interviews with the PREA Coordinator and staff members at the facility, information was provided regarding the use of the risk assessment information to determine placements in housing and bed, work, programming and education assignments. The risk assessment is heavily utilized in the placement of housing and bed assignments. The risk assessments are used in conjunction with other information about the inmate and determinations are made on a case-by-case basis.

MDOC Policy **519 Sexual Harassment/Abuse Response and Prevention Policy** state the following.

### **B. Identification and Reporting**

*(1) (b) Once an inmate is identified as having been a victim, or as being at risk for such, the Superintendent shall carefully assess the immediate needs and housing assignment of that inmate. Where double bunking is necessary, the staff members making assignments shall rely upon standard guidelines for cell matching, and upon good judgment, in selecting a cellmate for the inmate, keeping in mind the inmate's victimization history and/or the inmate's "at risk" status. Similar consideration shall be given for placement of an inmate in a dormitory setting.*

*(2) (c) The Department shall utilize the internal housing risk placement screen on IMS to help identify inmates with a risk of sexual harassment/sexually abusive behavior. Those inmates identified shall be referred to appropriate institutional programming. The program referral shall be made part of the inmate's individualized program plan and shall be monitored in accordance with 103 DOC 652, Identification, Treatment and Correctional Management of Gender Non-Conforming Inmates. Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.*

*(2) (d) Upon learning that an inmate has been identified as a predator, or is at risk for such, the Superintendent shall carefully assess the immediate needs and housing assignment of each inmate. Where double bunking is necessary, the staff members making assignments shall rely upon standard guidelines for cell matching, and upon good judgement, in selecting a cellmate for the inmate, keeping in mind the inmate's predatory history and/or the inmate's "at risk" status. Similar consideration shall be given for placement of an inmate in a dormitory setting.*

NCCI Gardner also houses a number of inmates diagnosed with Gender Dysphoria. In order to meet the PREA standards and provide a safer environment for this population, the agency has implemented policy to address this issue, **103 DOC 652, Identification, Treatment and Correctional Management of Gender Non-Conforming Inmates.**

### **652.06 TREATMENT PLANNING FOR INMATES WITH GENDER DYSPHORIA**

#### **A. Development of Gender Dysphoria Treatment Plan:**

*Following a confirmed Gender Dysphoria diagnosis, the inmate's PCC shall prepare an individualized initial treatment plan, and/or review and revise an existing treatment plan, which incorporates the diagnosis, along with all other outstanding co-occurring mental health issues.*

#### **C. Essential Elements of the Treatment Plan for Gender Dysphoria Diagnosed Inmates:**

*1. The goal of Gender Dysphoria-related modifications to the individualized mental health Treatment Plan is to assist the Gender Dysphoria-diagnosed inmate in exploring and managing his/her/their issues related to Gender Dysphoria as well as any co-occurring mental health disorders.*

### **652.09 MANAGEMENT AND PLACEMENT**

#### **Initial Classification and Placement:**

*A. At the time of commitment, adjudicated individuals are court ordered into Department of Correction custody and are transported to the reception institution based upon said court order. For all new commitments, an Internal Housing Risk Factor Assessment (Attachment #2) is completed and examines issues of risk of victimization and risk of violence/predatory behavior and/or abusiveness. Should an individual identify as Gender Dysphoric or appear to need additional clinical assessment, the process of confirmation will commence as outline in 103 Doc 652.05. An assessment will inform housing, work, education and program assignments and will focus on individual safety. These assessments will occur on a case by case basis and will include security level, criminal and discipline history, medical and mental health needs, vulnerability to sexual victimization and potential of perpetrating abuse based on prior history. A Gender Dysphoric inmate's own views with respect to his/her/their own safety shall be given serious consideration. In addition, consideration of specific cases with partial completion*

***of sex reassignment surgery, removal or augmentation of breasts, removal of testicles, etc. shall be evaluated on a case-by-case basis by the Program Medical Director and reported to the Assistant Deputy Commissioner of Classification for consideration of any safety, security and/or operation concerns presented. Consideration of these clinical recommendations should be given by the Department of Correction when making determinations regarding such issues. Final determination as to the most appropriate housing, however, is the responsibility of the Department.***

Interviews with inmates at the facility who identified as transgender were conducted during the onsite audit process. These individuals did indicate that they are able to shower at different times from cisgender inmates. They did say that they were met with by mental health staff on a regular basis and felt that staff were good about asking if they felt safe where they were being housed at.

One item noted by this Auditor when initially touring the facility was the fact that those who identify as GD or Transgender were made to wear green shirts. This practice should be reconsidered for the safety of the inmates at the facility. There may be transgender individuals who are different stages of their transition. If they ask for female undergarments, they are forced to wear the green shirts that female offenders of the Department wear. If that individual was not ready to fully disclose that status to the entire world, they also may not be ready for the types of assaults that they may be subjected to and having to wear this item of clothing makes them quite a target. It is recommended by this Auditor that this practice is suspended immediately to help protect the safety of those individuals in the facility.

## 115.43 Protective Custody

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

NCCI Gardner does not place inmates at high risk in protective custody. The facility does not have a "restricted housing unit" or RHU. During conversations with staff, they are the first facility in the state that no longer has a restricted housing unit. Therefore, they cannot place inmates in a restricted unit.

The staff indicated they pay particular attention to the risk assessments in order to make appropriate placements for each individual. And because there is no longer a segregation unit at the facility, the staff recognize that these assessments are even more important to utilize when they are working with the individual.

The agency has included this information in the policy directing PREA, **Policy 519 Sexual Harassment/Abuse Response and Prevention Policy**. The policy reads as follows.

***(c) inmates at high risk for sexual harassment/abuse victimization, and those who have reported being a victim of sexual abuse/harassment in the past either while housed in a prison setting or in the community shall not be placed in involuntary segregated housing unless an assessment of all available alternative has been made, and there has been a determination that there is no available alternative means of separating the inmate from likely abusers. If an institution cannot conduct such an assessment immediately, the institution may hold the inmate in segregated housing for less than twenty-four (24) hours while completing the assessment. Interviews with inmates and staff members confirmed that segregation is not used for those considered to be at a high risk for sexual victimization.***

Additionally, NCCI Gardner provided information from the **Policy 423 - Restricted Housing**. It reads as follows.

***Protective Custody/Special Housing Units: A form of separation from the general population for inmates requesting or requiring protection from inmates for reasons of health or safety. The inmate's status is reviewed periodically in accordance with 103 DOC 422.00: Department Protective Custody Units, by the classification committee or designated group with the goal of terminating the separate housing assignment as soon as possible.***

***such inmates shall be reviewed thereafter by the Placement Review Committee at least every Monday, Wednesday and Friday.***

***(b) Inmates with Safety Needs. Upon verification that an inmate requires separation from general population to protect the inmate from harm by others, the inmate shall not be placed in Restrictive Housing, but shall be placed in a housing unit that provides approximately the same conditions, privileges, amenities and opportunities as in general population; provided however, that the inmate may be placed in Restrictive Housing for no more than 72 hours while suitable housing is located. An inmate shall not be held in Restrictive Housing to protect the inmate from harm by others for more than 72 hours, unless the Commissioner or designee certifies in writing:***

- 1. the reason why the inmate may not be safely held in the general population;***
- 2. that there is no available placement in a unit comparable to general population;***
- 3. that efforts are being undertaken to find appropriate housing and the status of the efforts; and***
- 4. the anticipated time frame for resolution.***

During the onsite audit, this Auditor was able to tour the Special Housing Unit. This is a unique unit where inmates may be housed for a period of time in single cells. They are restricted to that unit, however, they are able to come out of their cells for programming, groups, video visits and court appearances. There were some informal conversations at cell doors with these individuals. Some were not happy to be there as they felt that it was still a punishment of Restricted Housing, just called something else. Others felt that this was good for protective custody since they were permitted privileges they would not have been permitted in a traditional RHU.

## 115.51 Inmate reporting

**Auditor Overall Determination:** Exceeds Standard

### **Auditor Discussion**

The MDOC has established multiple ways for inmates, staff and the general public to report sexual abuse and sexual harassment occurring inside the Department of Correction. Internally, inmates are able to make reports directly to staff members, through staff requests, by submitting a sick call slip, requesting to speak with mental health, and by calling an internal reporting line. All of these methods were provided by inmates interviewed as part of the audit process.

An item that should be considered a best practice that MDOC has implemented throughout its system is to include PREA reporting information on the back of the inmate name badge. Inmates are required to have their name badges with them at all times and this provides a quick reference should an inmate feel they need to report a PREA incident.

During the tour of the facility, this Auditor tested the inmate phones and called the internal reporting line. The message was received as verification was provided by the PREA Coordinator.

Additionally, a copy of the inmate handbook was provided to this Auditor. It contains the address for the Massachusetts State Police. This is an outside third party which takes reports of sexual abuse and harassment and provides those reports to the MDOC for investigations to be conducted.

Staff members indicated they also have reporting methods they are able to use. Staff can go to their direct supervisor, the facility PREA Manager, or use the outside reporting methods that inmates have access to as well. The MDOC website has an online form that is sent directly to the PREA Coordinator's office for anyone in the public to utilize.

During interviews with investigators, they indicated they are required to take reports of sexual abuse whether they are anonymous, from a third party and regardless of how long ago the incident occurred.

Reporting requirements are found in the agency's PREA policy on pages seven through nine.

## 115.52 Exhaustion of administrative remedies

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

The MDOC has implemented a grievance procedure for inmates to utilize for the resolution of their complaints. The process can be complicated to understand with all the timeframes and regulations. However, when inmates were interviewed, they understood that the grievance process.

Most inmates who were interviewed indicated that this was a method that is able to be utilized for reporting sexual abuse and sexual harassment. In addition, most inmates were clear there were timeframes attached to the grievance process, but they were not sure of the specifics in terms of PREA allegations.

MDOC Policy **491 Inmate Grievances** covers all aspects of the inmate grievance process, include the specifics regarding rules about PREA reporting. The policy reads as follows.

#### **419.13: Sexual Abuse Grievances**

*(1) Time limits established in 103 CMR 491.14(1) shall not apply to grievances alleging sexual abuse.*

*(2) Inmates shall not be required to exhaust informal processes with regard to allegations of sexual abuse.*

*(3) Inmates shall submit grievances regarding sexual assault/abuse in accordance with 103 CMR 491.13(4). An inmate shall not be required to submit their grievance to a staff member who is the subject of the grievance.*

*(4) All grievances containing allegations of sexual assault/abuse for inmate-on-inmate allegations will be investigated in accordance with 103 DOC 519: Sexually Abusive Behavior Prevention and Intervention. Staff on inmate allegations will be addressed in accordance with 103 DOC 522: Internal Affairs Unit, and/or 103 DOC 519. Additionally, whenever a grievance pertaining to sexual abuse has been referred for investigation, inmates will be notified of the action taken within the grievance decision. A separate response from the Commissioner's designee will be provided upon conclusion of the indicated investigation.*

*(5) Allegations of sexual abuse reported by third parties, including, but not limited to, other inmates, staff members, family members, attorneys, and outside advocates, shall be addressed in accordance with 103 DOC 522: Internal Affairs Unit. Teh Department of Correction shall document if an inmate declines to have the request processed on his or her behalf.*

*(6) Whenever an inmate files an emergency grievance alleging that he or she is at a substantial risk of imminent sexual abuse, the grievance shall be responded to within 48 hours of receipt. Emergency grievance appeals shall be responded to within five calendar days of receipt. Responding staff should take into consideration weekends and holidays and shall respond on the business day prior to the weekend and/or holiday when necessary to ensure timely response. No timeframe extensions shall be authorized for grievance and grievance appeal responses for sexual abuse grievances.*

*(7) During non-business hours, inmates shall report allegations of sexual abuse verbally to institution staff, who shall promptly report the allegations to the Shift Commander. Upon receipt of information that an inmate has been sexually abused, the Shift Commander shall ensure that proper protocol is followed in order to protect the potential victim and preserve and evidence.*

*(8) The absence of a grievance response after six months shall be deemed a denial of the grievance.*

#### **491.15: Grievance Processing, Investigation, and Decision**

*(1) Employees named in a grievance shall not participate in any capacity in the processing, investigation, or decision of the grievance.*

#### **491.21: Abuse of the Grievance Process**

*(3) Inmates who misuse the grievance process by knowingly submitting false documents, intentionally and in bad faith misrepresenting or omitting material information or utilizing threatening or abusive language or language that otherwise constitutes a violation of 103 CMR 430.00: Inmate Discipline, are subject to suspension of grievance privileges and/or disciplinary action.*

**115.53 Inmate access to outside confidential support services**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The MDOC provides the contact information for the local rape crisis center, the Boston Area Rape Crisis Center. Contact information is provided in the inmate handbook and on posters throughout the facility.

The facility provided a copy of the agreement with BARCC as part of the pre-audit information. This contract was signed in May/June 2020.

The agency has an MOU with the BARCC to provide services to inmates who allege sexual abuse at the facility. The BARCC will provide supportive services to those that are transported to the Beth Israel Hospital for a forensic rape examination. The advocates will provide support throughout this process and the legal process that follows, including interviews, and testimony if required. These services are provided free of charge to the inmates at NCCI Gardner.

When interviewed, most inmates were aware of the BARCC as they indicated they saw their information on posters. However, not as many knew about the services that BARCC provides.

## 115.54 Third-party reporting

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Several options are available for individuals to make third party reports of sexual abuse or harassment of inmates at NCCI Gardner. These reporting methods are mentioned throughout this report. The MDOC website has an online form that anyone can fill out and submit to report sexual abuse or harassment in any MDOC facility. This form goes to the PREA Coordinator's office who will then distribute this information to the facility where the abuse is occurring so that an investigation can be conducted.

The agency developed a "family" poster which has information about PREA and the agency reporting phone number. Anyone is able to call this number to report sexual abuse and/or harassment in any MDOC facility. As noted earlier, this Auditor was able to call and leave a message on this line during the tour at NCCI Gardner.

During interviews at the facility, inmates and staff members both were aware of the third-party reporting methods available for reporting PREA related incidents at the facility.

## 115.61 Staff and agency reporting duties

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Staff members were interviewed as part of this PREA audit. Staff members were chosen randomly and some were chosen due to the role that they have in responding to sexual abuse and sexual harassment in the facility.

All staff were asked questions about how they would respond if they were to receive a disclosure of sexual abuse. All staff members interviewed from randomly chosen to specifically selected were able to articulate the important steps they would take from the separation of the inmates, preserving the crime scene, and notifying their supervisor to being with.

Most staff were able to provide further information regarding ensuring the victim and abuser did not destroy any evidence on their person and getting them to the medical department.

Staff members have been provided with pocket cards from the agency which details the initial steps that they are required to take when there is an allegation of sexual abuse.

Staff members were also asked during interviews about documentation required with allegations of sexual abuse and sexual harassment. All indicated that if they were the ones to receive the report, they would be required to write an incident report before the end of their shift. This will get submitted to the investigator who will upload that to the PREA database and it will become part of the investigation.

Review of MDOC policy shows the guidance provided to staff members regarding their responsibilities in the event that there is an allegation of sexual abuse made to them. The PREA policy reads as follows.

### **519.03 REPORTING REQUIREMENTS**

#### **A. Staff Reporting**

***Allegations of inmate-on-inmate or staff-on-inmate sexual harassment/sexually abusive behavior shall immediately be reported by staff members to the Shift Commander verbally and followed up with a confidential incident report to the Superintendent before the end of the staff member's shift.***

***Apart from reporting to designated supervisors and/or officials, staff members shall not reveal any information related to an allegation of sexual harassment/abuse to anyone other than to the extent necessary to provide treatment, to conduct an investigation, and/or to make other security and management decisions.***

***Staff members shall accept reports made verbally, in writing, anonymously, and/or from third parties. All verbal reports shall be promptly documented using the IMS's Confidential Incident Report.***

***The Superintendent shall ensure that the Duty Station is notified of all allegations of sexual harassment/sexually abusive behavior. If the allegations involve a possible violation of the law, the Chief of OIS/IAU shall be promptly notified and shall then notify the jurisdictionally appropriate District Attorney's office once it is determined that sufficient probable cause exists to warrant such notification.***

**115.62 Agency protection duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Staff were asked during the audit interviews what they would do if they learned that an inmate was at risk of being sexually abused. Most line staff indicated they would keep the inmate with them as they contacted their supervisor. When supervisory staff were asked this question, they indicated they would look at housing assignments and where the inmate would be safer in the facility. In the housing unit, they could also look placing the inmate closer to the officer's station.

Policy 519 does state that the inmate will be moved to where they will be the safest.

## 115.63 Reporting to other confinement facilities

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Document review, policy review and staff interviews support the compliance of this standard by the facility. Staff answered that if there was a report of sexual abuse at another facility, they would make a confidential report to the Superintendent who would then forward that report to the facility named in the report. At the time of the audit, the facility has received two allegations of abuse which were alleged to have happened at the facility.

The **519 Sexual Harassment/Abuse Response and Prevention Policy** states the following.

#### **C. Outside Agencies**

***Upon a Superintendent's receipt of an allegation that an inmate was sexually harassed/abused while confined at another institution or agency, the Superintendent shall notify the appropriate Superintendent or Chief Administrative Officer of the agency where the alleged abuse occurred. Such notifications shall be provided as soon as possible, but no later than seventy-two (72) hours after receiving the allegation, and shall be documented in writing. The Superintendent or agency office receiving such notification shall ensure that the allegation is investigated, and shall provide periodic updates and a copy of the final investigation report to the notifying institution which currently houses the alleged inmate victim.***

## 115.64 Staff first responder duties

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

As noted in a prior standard, staff members interviewed as part of the audit process, were able to articulate the steps they are required to take should they receive a report of sexual abuse or sexual harassment. All staff outlined the basic steps they would take including separation from the alleged perpetrator, notifying the supervisor and/or Shift Commander, securing the crime scene and preserving any potential evidence.

Also noted in other standards, staff were provided with pocket informational cards with these basic initial steps printed on them. This provides the staff with a quick reminder of what they need to start with if/when they receive a report of sexual abuse or sexual harassment.

The PREA policy states the following about receiving reports of sexual abuse.

### **519.06 INTERVENTION**

***The fundamental objective of the Department is to ensure the safety of all persons, whether Department employees, contractors, volunteers, inmates, or third parties. To this end, it is an integral part of everyone's role with the Department to report and respond to all allegations of sexual harassment/sexually abusive behavior in accordance with the assigned duties of each person's respective post and assigned responsibilities.***

#### ***A. Immediate Response to Sexually Abusive Behavior Allegation***

***Each institution shall maintain an Emergency Response Plan and sexual assault response kits containing the items necessary to facilitate their response to sexual assault allegations. Response plans shall be maintained in the Shift Commander's office and the IPS office, and shall contain the following actions:***

- (1) Separate alleged victim and perpetrator;***
- (2) Immediately notify the Shift Commander;***
- (3) Secure the scene, if warranted, for subsequent crime scene processing;***
- (4) Ask the victim and ensure that the perpetrator does not take any action that would destroy physical evidence (e.g., washing, eating, drinking, brushing teeth, changing clothes, etc.);***
- (5) Receive the reporter's information on what took place. Make note of the behavior and appearance of the inmate(s) involved and identify any witness(es) to the incident;***
- (6) Immediately escort the inmate victim to the institution's Health Services Unit for emergency medical care/mental health treatment;***
- (7) Enter detailed information on an IMS incident report before the end of the shift;***
- (8) Remain on shift until debriefed by the Sexual Assault Investigator.***

**115.65 Coordinated response**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

NCCI Gardner staff has prepared a separate/stand alone coordinated response plan which is an excellent example of a Coordinated Response Plan. This plan, titled "**North Central Correctional Institution (NCCI) PREA Response Plan in accordance with Sexually Abusive Behavior Prevention and Intervention Policy**". The plan was developed and signed off on by the Superintendent on May 18, 2022.

The plan contains information on the following areas.

- Emergency Response Plan
- PREA Response Kits
- Transportation and Collection of Evidence
- Identification of the Alleged Perpetrator
- Notifications
- Refusal of Treatment
- Record Keeping
- Interdiction
- Annual Vulnerability Assessment
- PREA Committee

The plan also contains the following attachments.

- Four Phase PREA Checklist
- PREA Notification Checklist
- Annual Safety Assessment

This plan can be helpful to staff at the facility should there be an allegation of sexual abuse. There is facility specific information included such as where PREA related equipment is located in the facility, specific phone numbers for notifications which are required to be made, collecting evidence, etc. This is a well written document.

**115.66 Preservation of ability to protect inmates from contact with abusers**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The Commonwealth of Massachusetts has a Collective Bargaining Agreement with the Massachusetts Correction Officers Federated Union. This information was provided as part of the pre-audit information. Additionally, policy **230 Discipline and Terminations** was provided which outlines the steps the Department can take should a member of the union be named and have a substantiated case against them as a perpetrator of sexual abuse. This policy reads as follows.

**230.06 DISCIPLINARY ACTION FOR VIOLATIONS OF SEUXLA HARASSMETN AND ABUSE POLICIES**

- 1. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.**
- 2. Termination shall be the presumptive disciplinary sanction for staff members who have engaged in sexual abuse.**
- 3. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.**
- 4. All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity clearly not criminal, and to any relevant licensing bodies.**

## 115.67 Agency protection against retaliation

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Victims, reporters and individuals, both inmates and staff, involved in investigations are monitored for retaliation by staff members at the facility. Both staff and inmates were asked questions regarding monitoring for retaliation. The IPS investigators are the ones that will conduct the monitoring for retaliation. This is documented on a form and uploaded into the PREA database to become part of the investigation file. When interviewed, the investigators indicated that they would monitor both inmates and staff members involved in the case.

When conducting the monitoring for retaliation, the investigator not only talks with the individual to see if they are having any issues/problems and they will also look at other items. These items include things such as excessive disciplinary issues, housing requests and/or changes, etc.

Inmates involved in sexual abuse cases were interviewed regarding the monitoring process. Those inmates indicated staff did ask them if they had any problems. The inmates weren't sure exactly how often the investigators met with them but thought that it was for at least a couple of months after the investigation was done.

Copies of the monitoring form was included in the investigation files reviewed as part of the audit process.

Policy 519 was provided with information highlighted regarding the MDOC policy on monitoring for retaliation. It reads as follows.

### **C. Retaliation**

***The Department protects all inmates and staff members who report sexual harassment/abuse, or who cooperate with sexual harassment/abuse investigations, from retaliation by other inmates or staff members.***

***The Department employs multiple protective measures, including, but not limited to, housing changes or transfers for inmate victims or abusers, and removal of alleged staff members or inmate abusers from contact with victims. The Department also provides emotional support services for inmates or staff members who fear retaliation for reporting sexual harassment/abuse or for cooperating with an investigation.***

***Superintendents shall ensure the following:***

***For a period of at least ninety (90) days following a report of sexual harassment/abuse, IPS staff shall regularly meet with and monitor the conduct and treatment of inmates or staff members who reported the sexual abuse, and of inmates who were reported to have suffered sexual abuse, to see if there are claims and/or changes that may suggest possible retaliation by inmates or staff members, and shall act promptly to remedy any such retaliation.***

***IPS staff should monitor any inmate disciplinary reports, housing changes, program changes, or negative performance reviews or reassignments of staff members.***

***Monitoring shall continue beyond ninety (90) days if the initial monitoring indicates a continued need. In the case of inmates, such monitoring shall also include periodic status checks.***

***The documentation of monitoring must be recorded using Attachment V and maintained in the investigation file in the PREA database.***

***If any other individual who cooperates with an investigation expresses a fear of retaliation, the Department shall take appropriate measures to protect that individual against any form of retaliation.***

***The Department's obligation to monitor shall terminate if the investigation determines that the allegation is unfounded.***

**115.68 Post-allegation protective custody**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

As noted in standard 115.43, NCCI Gardner does not have a segregation unit, therefore inmates are not placed in segregation. Staff use other options for protection of victims of sexual abuse such as placement in a cell rather than a dormitory setting and placement close to the officer's station in the housing unit.

The facility has policy which also directs that victims of sexual abuse should not be placed in any type of restrictive housing. This information is found in **103 DOC 423.00: RESTRICTIVE HOUSING**. This policy reads as follows.

**423.09: Restrictive Housing Reviews**

***(b) Inmates with Safety Needs. Upon verification that an inmate requires separation from general population to protect the inmate from harm by others, the inmate shall not be placed in Restrictive Housing, but shall be placed in a housing unit that provides approximately the same conditions, privileges, amenities and opportunities as in general population.....***

## 115.71 Criminal and administrative agency investigations

**Auditor Overall Determination:** Exceeds Standard

### **Auditor Discussion**

It is clear through review of investigation files, review of agency policy and interviews conducted through this audit process, that the MDOC and NCCI Gardner take all allegations of sexual harassment and sexual abuse seriously and investigate all allegations regardless of the manner the allegation was received. In interviews with staff members, information was provided regarding how allegations are received about sexual harassment or abuse. Reports are accepted through mail, inmate requests, phone calls or direct reports from any individual including inmates or staff. If an allegation is provided anonymously, it will be investigated as any other report of sexual abuse or sexual harassment.

This Auditor was provided a list of investigations, both completed and ongoing, for the preceding twelve months. Investigations were selected randomly to review. The MDOC has an electronic program which is utilized for storage of investigative information, review and approval of reporting and the ability to keep confidential any investigation information. This program captures all important information and evidence in the case. Data collected will be maintained for at least ten (10) years after the date of the initial collection. This verified through Policy **519 Sexual Harassment/Abuse Response and Prevention Policy**.

When an allegation is received, it is reviewed to determine if it is a Category 1 or Category 2 allegation. Category 1 investigations are typically investigated by the facility investigators and are usually inmate on inmate allegations. Category 2 investigations involve more serious allegations and typically involve staff on inmate situations. As a general rule of thumb, Category 2 investigations are conducted by the Professional Standards Unit (PSU) or Office of Investigative Services (OIS). Category 1 investigations are conducted by the facility investigators.

Interviews with the investigators provided information on the process of the investigation, how information is documented, the fact that investigations can move between categories depending on the investigation and that if there is any belief that there is a criminal element involved, the investigator will reach out to the Massachusetts State Police to conduct the criminal investigation.

The Department has a Memorandum of Understanding (MOU) with the MDOC signed in 2021 stating that criminal investigations will be conducted by the state police when requested and that the state police will utilize appropriate evidence collection and investigative techniques.

There are two policies which apply to the investigations of allegations of sexual harassment and sexual abuse. The first of course is Policy **519 Sexual Harassment/Abuse Response and Prevention Policy**. This policy states the following.

#### **522.02 PHILOSOPHY**

***It is the Department's philosophy that all complaints of staff misconduct are to be systematically examined and investigated when warranted to discover truth.***

#### **522.03 GOALS AND OBJECTIVES**

***A. The PSU shall investigate allegations of staff misconduct and violations of policy and procedure that may result in administrative review and possible discipline against staff, vendors and/or contract staff.***

***B. The Chief of PSU will determine which investigative unit (PSU or OIS) will conduct the investigation. The designated unit will work cooperatively with respective District Attorney's Office and external law enforcement agencies to conduct the investigation if it has been determined to be a criminal matter.***

One area of the policy relating to the investigations of sexual abuse and sexual harassment allegations which was incorrect and did not meet the standard is regarding the storage of investigative files. However, once this was pointed out to the PREA Coordinator, he immediately provided a memo which stated that while the policy was incorrect, the PREA database keeps investigative files indefinitely.

After talking with the PREA Coordinator for the Department, it was clear that the PREA databased used by the Department actually exceeds the standard for record retention. In addition to never purging the files, this database is accessible to all facilities in the department, with the proper credentials. This allows for information to be shared Department-wide.

## 115.72 Evidentiary standard for administrative investigations

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Policy review and staff interviews confirm that MDOC and NCCI Gardner utilize Preponderance of Evidence as the standard for administrative investigations. When interviewing the facility investigator, he was able to provide an explanation of the evidentiary standard and how it is applied when determining if the investigation is substantiated, unsubstantiated or unfounded.

Policy *518 Inner Perimeter Security Team (IPS)* states the following.

#### **518.05 INVESTIGATION AND INQUIRY**

##### **4. PREA Investigations**

***The Department shall impose no standard higher than a preponderance of the evidences in determining whether allegations of sexual abuse or sexual harassment are substantiated.***

## 115.73 Reporting to inmates

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Once an investigation has been conducted and an outcome has been determined, the Superintendent's office will provide this information to the victim in the case. Should the investigation be an inmate-on-inmate situation, the outcome will be reported on a standard form. If the case is a staff on inmate investigation, the outcome of the administration will be provided, and the status of the staff member. If either type of investigation involves a criminal investigation, this information will be provided to the victim as well. This information was provided by both the investigator and the Superintendent during their interviews. Copies of these notifications are kept in the PREA database with the investigation files.

The PREA policy also addresses the standard of reporting to inmates. It states the following.

#### ***D. Reporting to Inmates***

***Following an investigation into an inmate's allegation that he/she/they suffered sexual harassment/abuse in a Department institution, the Superintendent shall inform the alleged victim as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded by utilizing Attachment I.***

***If the Department did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.***

***Following an inmate's allegation that a staff member has committed sexual harassment/abuse against him/her/them, the Department shall subsequently inform the victim inmate of the staff member's status utilizing Attachment II (unless the investigation has determined that the allegation is unfounded).***

***Following an inmate's allegation that he or she has been sexually harassed/abused by another inmate, the Department shall subsequently inform the alleged victim inmate of the legal status of the incident utilizing Attachment III.***

***The Department's obligation to report shall terminate if the victim inmate or perpetrator inmate is released from the agency's custody.***

## 115.76 Disciplinary sanctions for staff

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

According to MDOC policy and confirmed by staff interviews, there are specific policies regarding the discipline of staff members involved in PREA incidents at any facility in the Department. When interviewed, all staff members were clear that if a staff was found to have sexually abused an inmate, that staff member would most likely be fired and criminal charges would likely be filed.

MDOC Policy **230 Discipline and Terminations**, states the following regarding staff discipline.

#### **230.06 DISCIPLINARY ACTION FOR VIOLATIONS OF SEXUAL HARASSMENT AND ABUSE POLICIES**

- 1. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.**
- 2. Termination shall be the presumptive disciplinary sanction for staff member who have engaged in sexual abuse.**
- 3. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.**
- 4. All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.**

Staff also indicated during interviews that investigations will continue through to conclusion regardless if the inmate is still at the facility or if the employee is still employed with the agency or has resigned.

**115.77 Corrective action for contractors and volunteers**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Contractors and volunteers, the same as any other individual in a correctional facility, are restricted from sexual contact with inmates. Should a contractor or volunteer be named as an alleged perpetrator in a PREA allegation, the facility would remove that individual from the institution until the conclusion of the investigation. This is clearly stated in the agency's PREA policy and was discussed with the investigators during the interviews.

As with agency staff members, the contractors who were interviewed were clear that no such behavior is allowed, and they would be removed from the facility during an investigation of a PREA allegation.

Policy **519, Sexual Harassment/Abuse Response and Prevention Policy**, states the following regarding standard 115.77.

***B. Staff Accused of Sexually Abusive/Harassing Behavior with Inmates Contractors who are accused of sexual harassment/sexually abusive behavior may be removed from the institution until the investigation is completed. All volunteers who are accused shall be barred from entering any correctional institution until the investigation is completed.***

## 115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

### Auditor Discussion

According to staff and inmate interviews and agency policy, any sexual acts between staff and inmates and inmates with other inmates is prohibited. Agency policy states the following.

#### **519.02 POLICY STATEMENT**

***All intentional acts of sexual harassment/sexually abusive behavior or intimacy between an inmate and a staff member, or between inmates, regardless of consensual status, are prohibited. The perpetrators shall, where appropriate, be subject to administrative, criminal and/or disciplinary sanctions. The Department is committed to investigating, disciplining and referring for prosecution...inmates who engage in sexual harassment/sexually abusive behavior.***

The policy further states ***"The Department resolves to: provide for a thorough investigation of all reported allegations of sexual harassment/abuse and pursue discipline and/or prosecution of perpetrators when appropriate;"***

Should an inmate be found to have perpetrated an act of sexual abuse or sexual harassment on another inmate, sanctions of these offenses are outlined in the Inmate Discipline policy (430). The violation of a sexual offense is in the Category 1 offenses and has a set of potential punishments. This outline of potential punishments ensures that there is equity in the sanctions imposed on inmates for the same offense.

Additionally, MDOC policy addresses false allegations related to PREA. The policy states the following.

#### **519.11 FALSE ALLEGATIONS**

***If a Department investigation reveals that an inmate or staff member knowingly made a false allegation or a false material statement, the Department may take appropriate disciplinary action and/or refer the matter for criminal action under the Massachusetts General Laws, as appropriate.***

## 115.81 Medical and mental health screenings; history of sexual abuse

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Medical and mental health services are both provided to offenders at NCCI Gardner. These services are provided by a contracted company, WellPath. There are several touch points that each department have with offenders when they arrive and while housed at NCCI Gardner.

The first contact which medical and mental health practitioners have with inmates is during the intake process. Once offenders have gone through all the questions at intake, they will then be moved to the Health Services Unit to meet with the medical staff. The Mental Health staff will either come to the medical department or the offenders will go to the mental health building to meet with offenders. The initial assessment questionnaires were provided to this Auditor for review as part of the pre-audit information. Both have assessments have questions related to sexual victimization and perpetration.

Interviews with medical and mental health staff both confirmed that offenders are provided with information about the limits of confidentiality before asking any of the questions they have. This was also supported by interviews with offenders. A number of interviewees remembered being told about confidentiality. Additionally, documentation was also provided in the pre-audit information. These forms have information about the limits to confidentiality and the offender signs that before talking with staff.

When offenders are asked sexual abuse related questions and they provide information about victimization, a referral is made to the mental health department. Offenders are not required to discuss their victimization, but all are offered the access to talk with mental health. The policy indicates that staff have up to fourteen days to meet with the individual, however, most are seen within a day or two at the most.

Additionally, if there is a disclosure that someone has perpetrated sexual abuse, a mental health evaluation will be conducted. A sample of this full mental health evaluation was provided to this Auditor as part of the pre-audit materials.

Policy **650 Mental Health Services** provides direction to medical and mental health practitioners regarding PREA. It states the following.

***c. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.***

***d. Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of eighteen (18).***

#### **4. Medical and mental health screenings; history of sexual abuse.**

***a. If the screening indicates that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the intake screening.***

***b. If the screening indicates that an inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within fourteen (14) days of intake screening.***

The facility also provided information regarding the WellPath policies regarding informed consent, and assessments for regarding sexual abuse.

## 115.82 Access to emergency medical and mental health services

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

Access to emergency medical and mental health services is provided to victims of sexual abuse at MCI Framingham. The medical department operates 24/7. So if there is a report about sexual abuse, the alleged victim is taken to the Health Services Unit (HSU) to either have an examination by the medical staff or to go out to the local hospital, Beth Israel Hospital in Boston, for a forensic medical examination.

Services are provided quickly and professionally. The decision to have an inmate sent for a forensic examination is determined by the medical professionals at the facility, in consultation with the Superintendent. Treatment that is provided is based on the medical and mental health practitioners' professional opinions. Emergency treatment, including contraception and prophylaxis, is provided in a timely manner.

Treatment services, including forensic examinations, are provided to the victim without financial cost and without the requirement of providing the name of the alleged abuser or cooperating with the investigation. These were confirmed in interviews with medical and mental health staff members and supported by MDOC policy which reads as follows.

#### ***B. Medical Response to Sexually Abusive Behavior Allegation:***

***(1) Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. A qualified health care professional shall evaluate and document the extent of the physical injury and provide emergency medical treatment as needed;***

***(4) If the determination is made that the inmate victim should be sent to an outside hospital, and if the inmate victim consents, the inmate victim shall be transported to an outside hospital with a SANE Program where he/she/they shall receive essential medical intervention, including preventative treatment for HIV, sexually transmitted diseases, and pregnancy, if appropriate.***

***(6) Upon return from the outside hospital, the inmate victim shall be brought to the Health Services Unit for appropriate follow-up care, including a mental health screening by qualified contractual health care personnel. If, during this screening, there are any indications that the inmate victim is at risk to hurt himself/herself/themselves or others, a mental health professional shall be immediately notified. Otherwise, the inmate victim shall be seen by a mental health professional within twenty-four (24) hours, or no later than the next business day, to assess the need for crisis intervention and long-term counseling, pursuant to 103 DOC 650, Mental Health Services;***

***(10) Rape crisis services shall be provided at no cost to the alleged victim unless the claim of being sexually assaulted was knowingly false.***

## 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

NCCI Gardner is an all male facility and at the time of the PREA audit, there were no transgender individuals with female genitalia. Therefore, pregnancy related standards do not apply to this facility.

All victims of sexual abuse who are incarcerated at this facility will be provided medical and mental health services, regardless of whether or not the inmate cooperates with the investigation into the allegation of sexual abuse. Should it be determined that the inmate should have a forensic examination, they will be taken to Beth Israel Hospital in Boston as the facility does not perform these services.

Once the inmate returns to the facility, they will immediately go to the Health Services Unit (HSU). There, the discharge orders will be reviewed and conveyed to the provider who will order any medications determined necessary from those instructions and any other follow up services.

The inmate will also see the mental health staff as soon as possible after their return from the hospital. The mental health provider and the inmate will determine what services the inmate will receive/participate in.

During interviews with medical and mental health staff, they were questioned about the level of care inmates receive at the facility in comparison to the level of care they would receive in the community. Both medical and mental health felt that the level of care is at least, if not better than, what they would receive in the community. Each indicated that there is not nearly as long of a waiting period to receive services at the facility. And this waiting period is significantly shorter than the waiting period in the community.

Those inmates who are determined to be abusers, either an abuser at the facility or before they arrived at the facility, the mental health staff will complete a full mental health assessment on the individual. This will be done as soon as possible.

MDOC Policy **519 Sexual Harassment/Abuse Response and Prevention Policy** supports the information provided by staff members and inmates during their interviews.

**115.86 Sexual abuse incident reviews**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

NCCI Gardner conducts the required sexual abuse incident review for investigations which are determined to be substantiated or unsubstantiated. The process that the facility has implemented ensures that all required incident reviews include the appropriate staff members and are completed within the thirty-day timeframe as required by this standard. Staff members participating in these meetings are the department heads of the medical and mental health departments, Chief of Security, Deputy Superintendents, Housing Unit Captain, IPS staff, Treatment/Classification staff and anyone else that the group feels should be involved.

As with other facilities in the agency, the PREA Manager at the facility coordinates a monthly PREA meeting with upper-level staff members and department heads. At this meeting, all issues related to PREA are brought to the table for discussion. This includes any incident reviews for investigations, completed and determined to be substantiated and unsubstantiated, concluded in the preceding thirty days.

Interviewed staff members indicated that the PREA Manager brings up the database information onto the projector screen and the group goes through and answers all questions in the incident review section of the case. The questions in the review are specifically from this standard. As soon as that part of the review is completed, it is submitted. The MDOC and NCCI Gardner has a very streamlined process.

Policy **103 DOC 519: Sexual Harassment/Abuse Response and Prevention Policy** addresses this incident review. It reads as follows.

**519.08 PREA COMMITTEES AND SEXUAL HARASSMENT/ABUSE INCIDENT REVIEWS**

*Each institution shall establish a PREA committee comprised of the PREA Manager, upper-level management officials, line supervisions, investigators, medical and/or mental health practitioners, and any other individual deemed integral to successful implementation of the PREA process at that site. The PREA Committee is to conduct monthly documented meetings to assess site specific sexual harassment/abuse issues and guide the institution's compliance with DOJ PREA standards and SHARPP. The Committee's activities are to be coordinated by the site's PREA Manager.*

*The facility shall also conduct a sexual harassment/abuse incident review at the conclusion of all substantiated and unsubstantiated investigations. Investigations which result in a determination of "unfounded" do not need to be formally reviewed as part of the aforementioned incident review meeting.*

*Incident reviews shall ordinarily occur within thirty (30) days of the conclusion of the investigation. The date of the conclusion of the conclusion of an investigation is the date the Superintendent/designee enters the official outcome of the investigation into the Department's PREA database.*

**115.87 Data collection**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The PREA Coordinator for the MDOC is responsible for the collection of data and the creation of statewide reports and reporting to the Department of Justice.

The Department has a PREA database which houses all PREA related information for all institutions in the MDOC. With all PREA information entered into the system, the statewide PREA Coordinator is able to pull statistical information for the creation of the required annual PREA report and to answer the Survey of Sexual Violence (SSV) for the Department of Justice.

This database holds investigation files, sexual abuse incident reviews, and any other reports created about PREA. The agency has included information on the collection of data in the PREA policy. It reads as follows.

**519.09 DATA COLLECTION/ANALYSIS/STORAGE**

**A. Collection**

***The Department shall collect accurate, uniform data for every allegation of sexual harassment/abuse at institutions through the use of the PREA database.***

***The Departmental PREA Coordinator/designee shall aggregate the incident-based sexual abuse data at least annually and submit a report to the DOJ as required.***

***The incident-based data collected shall include, at a minimum, the data necessary to answer all inquiries and surveys by the DOJ.***

***The Department shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews. The Department shall also attempt to obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.***

***Upon request, the Department's PREA Coordinator shall provide all such data from the previous calendar year to the DOJ.***

## 115.88 Data review for corrective action

**Auditor Overall Determination:** Exceeds Standard

### **Auditor Discussion**

The agency's statewide PREA Coordinator is responsible for the compilation of the agency's annual report and all aspects of data review for corrective action and the implementation of that action on a yearly basis. The annual reports created by the PREA Coordinator are examples of best practice for the creation of PREA Annual Reports.

The 2020 Annual PREA Report was provided as part of the pre-audit information. This report was written with clear format and identification of required elements of the annual report. The report did not contain information where any elements of the data needed to be redacted. This report includes the following sections.

- History of PREA and the history of PREA with the MDOC
- Agency Achievements for the previous year (August 2019 to August 2020)
- Information about standards 115.87, 115.88 and 115.89
- Data Collection Capabilities of the MDOC
- Aggregated Data
- Comparison of data to prior years
- Incident overviews by facility and type
- Trends
- DOC PREA Database tracking history and analysis
- BJS-SSV Reports submitted by the MDOC and analysis
- Identified problem areas and corrective action for 2020
- Resolved problem areas from 2019
- 2020 Assessment of MDOC's progress in addressing inmate sexual harassment/abuse allegations

Policy directing the completion of this report is found in Policy 519. It reads as follows.

### **519.09 DATA COLLECTION/ANAYSIS/STORAGE**

#### **B. Data review for corrective action**

***The Department shall review data collected and aggregated in order to assess and improve the effectiveness of its sexual harassment/abuse response prevention policy and all such efforts related to the prevention, detection and response to any and all sexual harassment/abuse allegations. Additionally, the collection and review of such data serves to give the Department the ability to continually enhance and improve its practices and training, including:***

***(1) Identifying problem areas;***

***(2) Taking corrective action on an ongoing basis; and***

***(3) Preparing an annual report of its findings and corrective actions for each facility, as well as the Department as a whole.***

***a. Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse/harassment within the Department.***

***b. The Department's report shall be approved by the Commissioner and made readily available to the public through the Department's website.***

***c. The Department shall redact specific material from the report when publication would present a clear and specific threat to the safety and/or security of an institution but shall indicate the nature of the material redacted.***

The 2021 PREA Annual Report for the Massachusetts Department of Correction can be found on the agency website at <https://www.mass.gov/doc/prea-annual-report-2021/download>.

## 115.89 Data storage, publication, and destruction

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

PREA information is stored securely in the PREA database for the MDOC. Each individual which is given permission to access the database has specific roles which restricts their access to information to only that which they need to complete their specific job duties. This Auditor observed individuals who had to log into a computer terminal with a username and password, as well as a specific login to the PREA database with a username and password.

As noted in 115.88, the MDOC does have a public website which it publicizes PREA information on. This information can be found at <https://www.mass.gov/info-details/prison-rape-elimination-act-prea-dashboard>.

The statewide PREA Coordinator is responsible to ensure that all aspects of this standard are met by working with different departments in the MDOC. These specific aspects are noted in Policy **519 Sexual Harassment/Abuse Response and Prevention Policy**. It reads as follows.

### **C. Data storage, publication, and destruction**

***The Department shall ensure that data collected is securely retained and only shared with individuals, institutions, and/or agencies, on a "need to know basis".***

***(1) The Department shall attempt to make all aggregated sexual harassment/abuse data from institutions under its direct control, and private facilities with which it contracts with, readily available to the public at least annually through its Departmental website.***

***(2) Before making aggregated sexual harassment/abuse data publicly available, the Department shall remove all personal identifiers.***

***(3) The Department shall maintain collected sexual harassment/abuse data for at least ten (10) years after the date of the initial collection.***

## **115.401 Frequency and scope of audits**

**Auditor Overall Determination:** Meets Standard

### **Auditor Discussion**

The staff has been extremely helpful throughout the pre-audit, onsite audit and post-audit phases. The facility provided full access to all areas of the institution during the tour. This Auditor had the opportunity to have informal interviews with both staff and inmates during the tour.

A confidential area was provided for interviews with both staff and inmates. The staff onsite were extremely helpful in organizing the individuals for interviews with this Auditor. As well as providing documentation requested for reviews.

**115.403 Audit contents and findings**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The Massachusetts Department of Correction does publish, as required, all PREA Final Audit reports on its public website. These reports can be found at the following website address. <https://www.mass.gov/lists/prea-reports#audit-reports->

The website has PREA Final Audit reports from 2016 and 2019 for North Central Correctional Institution at Gardner posted on this website.

**Appendix: Provision Findings**

<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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 facilities?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

**115.13 (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 inmates against sexual abuse?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	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

**115.13 (b)****Supervision and monitoring**

In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
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**115.13 (c)****Supervision and monitoring**

In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
		Is this policy and practice implemented for night shifts as well as day shifts?	yes
		Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
<b>115.14 (a)</b>	<b>Youthful inmates</b>	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
		In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
		Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
		Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
		Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
		Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

**115.15 (d)****Limits to cross-gender viewing and searches**

Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? yes

Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? yes

Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? yes

**115.15 (e)****Limits to cross-gender viewing and searches**

Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? yes

If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? yes

**115.15 (f)****Limits to cross-gender viewing and searches**

Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? yes

Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? yes

**115.16 (a)****Inmates with disabilities and inmates who are limited English proficient**

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? yes

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? yes

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? yes

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? yes

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? yes

Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.) yes

Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? yes

Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? yes

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? yes

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? yes

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision? yes

**115.16 (b)****Inmates with disabilities and inmates who are limited English proficient**

Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? yes

Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? yes

<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
		Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
		Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
		Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
		Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
		Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
		Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
		Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
		Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
		Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
		Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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 always makes a victim advocate from a rape crisis center available to victims.)	yes
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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

<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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 criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

<b>115.33 (d)</b>	<b>Inmate education</b>	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
		Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
		Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
		Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
		Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e)</b>	<b>Inmate education</b>	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
		Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
		Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
		Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	na
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

**115.41 (d)****Screening for risk of victimization and abusiveness**

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

**115.41 (e)****Screening for risk of victimization and abusiveness**

In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes

**115.41 (f)****Screening for risk of victimization and abusiveness**

Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
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<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

<b>115.42 (d)</b>	<b>Use of screening information</b>	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	<p>Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)</p> <p>Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)</p> <p>Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)</p>	<p>yes</p> <p>yes</p> <p>yes</p>
<b>115.43 (a)</b>	<b>Protective Custody</b>	<p>Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?</p> <p>If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?</p>	<p>yes</p> <p>yes</p>

<b>115.43 (b)</b>	<b>Protective Custody</b>	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
		Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
		Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
		Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
		If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
		If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
		If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
		Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
		If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e)</b>	<b>Protective Custody</b>	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
		Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
		Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

<b>115.51 (b)</b>	<b>Inmate reporting</b>	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
		Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
		Does that private entity or office allow the inmate to remain anonymous upon request?	yes
		Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
<b>115.51 (c)</b>	<b>Inmate reporting</b>	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
		Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
		Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
		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.)	yes

**115.52 (d)****Exhaustion of administrative remedies**

Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)

yes

If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)

yes

At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)

yes

**115.52 (e)****Exhaustion of administrative remedies**

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

yes

Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)

yes

If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)

yes

**115.52 (f)****Exhaustion of administrative remedies**

Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)

yes

After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)

yes

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.)

yes

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.)

yes

Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)

yes

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.)

yes

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.)

yes

**115.52 (g)****Exhaustion of administrative remedies**

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

yes

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
		Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
		Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
		Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
		Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

- 115.64 (b) Staff first responder duties**
- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? yes
- 115.65 (a) Coordinated response**
- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? yes
- 115.66 (a) Preservation of ability to protect inmates from contact with abusers**
- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? yes
- 115.67 (a) Agency protection against retaliation**
- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? yes
- Has the agency designated which staff members or departments are charged with monitoring retaliation? yes
- 115.67 (b) Agency protection against retaliation**
- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? yes

**115.67 (c)****Agency protection against retaliation**

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? yes

Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? yes

**115.67 (d)****Agency protection against retaliation**

In the case of inmates, does such monitoring also include periodic status checks? yes

**115.67 (e)****Agency protection against retaliation**

If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? yes

**115.68 (a)****Post-allegation protective custody**

Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? yes

**115.71 (a)****Criminal and administrative agency investigations**

When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) yes

Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) yes

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
		Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
		Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
		Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
		Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
		Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
		Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
		Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	<b>Disciplinary sanctions for inmates</b>	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	<b>Disciplinary sanctions for inmates</b>	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	<b>Medical and mental health screenings; history of sexual abuse</b>	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	<b>Medical and mental health screenings; history of sexual abuse</b>	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	<b>Medical and mental health screenings; history of sexual abuse</b>	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	<b>Medical and mental health screenings; history of sexual abuse</b>	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	<b>Medical and mental health screenings; history of sexual abuse</b>	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	<b>Access to emergency medical and mental health services</b>	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	<b>Access to emergency medical and mental health services</b>	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
		Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	Are inmate 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 inmates 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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates 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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	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

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
		Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
		Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
		Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
		Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
		Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	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
<b>115.87 (b)</b>	<b>Data collection</b>	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	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
<b>115.87 (d)</b>	<b>Data collection</b>	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
<b>115.87 (e)</b>	<b>Data collection</b>	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
<b>115.87 (f)</b>	<b>Data collection</b>	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.)	yes

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	Does the agency review data collected and aggregated pursuant to § 115.87 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 § 115.87 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 § 115.87 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
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	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

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	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
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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